

Massachusetts Department of Developmental Services Annual Health Screening Recommendations

For use at the annual health visit

Intended to guide self-advocates, families, and support providers in discussing individual screening exams with a physician or Health Care Provider (HCP)

Name: _____ Age: _____

Date: _____

		Date of last screen	Ask HCP to evaluate need for screening
All Adults			
Height/Weight/BMI	Annually.		<input type="checkbox"/>
Colorectal Cancer screen	Not routine unless at high risk. Ages 50 – 75: Annual Fecal Occult Blood Testing (FOBT) OR		<input type="checkbox"/>
	Sigmoidoscopy testing every 5 years OR		<input type="checkbox"/>
	Colonoscopy every 10 years		<input type="checkbox"/>
Skin cancer screen	Total skin exam every 3 years 20 – 39. Annually 40+.		<input type="checkbox"/>
Hypertension	At every medical encounter and at least annually.		<input type="checkbox"/>
Cholesterol	Screen if not previously tested from years 18+. Screen every 5 years or at clinician's discretion.		<input type="checkbox"/>
Diabetes (Type II)	Conduct annual risk assessment. HgbA1c or fasting plasma glucose screen every 3 years beginning at 45. At least every 3-5 years until 45 if at high risk.		<input type="checkbox"/>
Osteoporosis	Consider BMD screening at any age if risk factors are present ¹ . Consider BMD testing for all others 50+ as most adults with I/DD have risk factors by this age. Repeat BMD testing at HCP discretion.		<input type="checkbox"/>
Dysphagia and Aspiration	Screen annually for signs, symptoms, and clinical indicators of dysphagia, GERD, & recurrent aspiration.		<input type="checkbox"/>
STIs	Screen annually in sexually active patients under 25. Screen annually for patients aged 25+ if at risk.		<input type="checkbox"/>
HIV	Periodic testing if at risk or if pregnant.		<input type="checkbox"/>
Hepatitis B & C	Periodic testing if at risk. One time Hep C screening for adults born between 1945 – 1965.		<input type="checkbox"/>
Tuberculosis	Skin testing every 1-2 years for individuals at risk.		<input type="checkbox"/>
Depression	Screen annually for sleep, appetite disturbance, weight loss, general agitation.		<input type="checkbox"/>
Dementia	Monitor for problems performing daily activities.		<input type="checkbox"/>

Men			
Testicular exam	Annual testicular exam		<input type="checkbox"/>
Prostate cancer screen (PSA or DRE)	Annual digital rectal exam (DRE) for patients 50+. PSA blood test at clinician's discretion.		<input type="checkbox"/>

Women			
Clinical breast exam	Annually. Self-examination instruction as appropriate.		<input type="checkbox"/>
Mammography	Every 2 years ages 50+; earlier/ more frequently at HCP discretion.		<input type="checkbox"/>
Pap Smear	Every 3 years starting at age 21. May screen with a combination of cytology and HPV testing every 5 years ages 30 – 65. Omit after 65 if consistently normal.		<input type="checkbox"/>

Vision and Hearing

		Date	Ask HCP
Eye Examination	All should be under an active vision care plan and eye examination schedule based on rec's from an ophthalmologist or optometrist. • Glaucoma assessment by age 22. Follow-up every 2-3 years. Every 1-2 years 40+ People with diabetes should have an annual eye exam		<input type="checkbox"/>
Hearing Assessment	Assess for hearing changes annually and refer to audiologist for a full screen as needed.		<input type="checkbox"/>

Immunizations²

		Last Date	Ask HCP
Tetanus-diphtheria (Tdap)	Three doses given once. TD booster every 10 yrs.		<input type="checkbox"/>
Influenza vaccine	Annually unless medically contraindicated.		<input type="checkbox"/>
Pneumococcal vaccine	Once (booster at age 65).		<input type="checkbox"/>
Hep A	Offer to all adults who take potentially hepatotoxic medications or who have ever lived in institutions or group homes.		<input type="checkbox"/>
Hepatitis B vaccine	One series of 3 vaccinations.		<input type="checkbox"/>
HPV Vaccine	Three doses for unvaccinated adults aged 9-26.		<input type="checkbox"/>
Zoster (shingles) Vaccine	Once after age 60. Not for weak immune systems.		<input type="checkbox"/>

Other Populations

Persons with Down syndrome	Monitor thyroid function regularly.		<input type="checkbox"/>
	Obtain baseline of cervical spine x-ray to rule out atlanto-axial instability; recommend repeat if symptomatic or 30 years from baseline. Test once. If negative, no need to repeat		<input type="checkbox"/>
	Baseline echocardiogram if no records of cardiac function are available.		<input type="checkbox"/>
	Annual screen for dementia after age 40		<input type="checkbox"/>
Hepatitis B Carriers	Annual liver function test.		<input type="checkbox"/>

General Counseling and Guidance

Prevention Counseling	Annually. Accident/fall prevention, fire/burns, choking.
Abuse or neglect	Annually monitor for behavioral signs of abuse and neglect.
Healthy Lifestyle	Annually. Diet/nutrition, physical activity, & substance abuse.
Preconception counseling	As appropriate. Genetic counseling, folic acid supplementation, discussion of parenting capability.
Menopause management	As appropriate. Counsel on change and symptom management

Other screenings to be considered at this appointment (May include tests recommended previously or by other clinicians that have not yet been performed:

¹Osteoporosis risk factors: long term polypharmacy, mobility impairments, hypothyroid, limited physical activity, Down syndrome, hypogonadism, vitamin D deficiency ²Vaccines are recommended, but may not be covered by MassHealth or Medicare