



SCREENING TESTS

The following recommendations are general guidelines on screening procedures for healthy men and women. We may recommend a different screening schedule based on a variety of factors, particularly your health history, age and family medical history.

BODY MEASUREMENT:

Measurements of your height, weight, waist circumference and body mass index(BMI) are taken to determine whether you are overweight or obese. This is important to determine because many diseases are more prevalent in overweight or obese patients, such as type two diabetes, heart disease and high cholesterol. We recommend these measurements at every preventative visit.

BLOOD PRESSURE:

Measurement of your blood pressure is taken to detect high blood pressure. Blood pressure is determined by the amount of blood your heart pumps and the resistance to flow in your arteries. Narrowed arteries limit your blood flow and therefore your heart must work harder to deliver the same amount of blood. The longer high blood pressure goes untreated the higher your risk of developing heart disease, stroke, heart attacks and kidney failure. We recommend this screening test at least every 2 yrs in patients with no history of hypertension, and more frequently in those who do.

CHOLESTEROL TEST:

A simple blood test that measures total cholesterol, low-density lipoprotein(LDL) cholesterol ("bad" cholesterol), high-density lipoprotein(HDL) cholesterol("good" cholesterol) and triglycerides. Cholesterol is a form of fat carried in your blood by lipoproteins. LDL deposits cholesterol in your artery walls, and HDL carries cholesterol away from your arteries to your liver for disposal. Atherosclerosis occurs when LDL deposits too much cholesterol in your artery walls and HDL doesn't take enough away. This deposition can lead to heart attacks and strokes. We recommend that if you are 20 and older that you get your cholesterol measured every 5 years. We may recommend more frequent measurements depending on your other health problems or if your measurement is abnormal.

COLORECTAL CANCER SCREENING:

We may recommend tests to examine your colon and rectum to detect colon polyps that may become cancerous or to detect colon cancer before symptoms occur. Not everyone needs to be tested; three major factors place you at higher risk for developing colorectal cancer:

- Age 50 or older
- Family or personal history of colorectal cancer or adenomatous polyps
- Personal history of inflammatory bowel disease.

There are two primary tests that the Center for Lifetime Health recommends. The first is a fecal occult blood test. This test uses a chemical to check for blood that may be hidden in your stool, which can be one of the first warning signs of a problem with your colon. We can do the test in the office during your physical exam, or we can send you home with a kit to take the sample at home. If you are sent home with a kit you will then need to return the kit to our office for further lab studies. After the age of 50 we recommend that you have this test done yearly. The second test is a colonoscopy. This is a special test that uses a thin, flexible tube called a colonoscope that is inserted into your rectum and visualizes your entire colon. This procedure can be somewhat uncomfortable, so you may be given intravenous medication to ease the discomfort. Usually a colonoscopy can be done on an outpatient basis. We recommend that this procedure be done once every 10 years after the age of 50.

EYE EXAMINATION:

The American Academy of Ophthalmology recommends screening once between the ages of 20-39, every 2-4 years between the ages of 40-64 and every one to two years after age 65. During the eye examination you will read eye charts, and will have your pupils dilated with eyedrops. Your ophthalmologist also checks your eye movement, peripheral vision, color vision and the acuity of your eyesight. The ophthalmologist also looks into your eyes using an instrument called an ophthalmoscope as well as checking the pressure in your eye with a painless procedure called tonometry. This examination helps determine if you need glasses or if you have new vision problems. The most common vision problems are:

- Glaucoma: increased pressure in your eye, which can lead to vision loss.
- Macular degeneration: this is deterioration of retinal cells, which gradually decreases vision.
- Cataracts: this is a clouding of the lens of your eye, which blurs vision.

FOR MEN:

PROSTATE CANCER SCREENING:

There are two tests that we recommend for prostate screening. One is a simple blood test called a PSA (prostate specific antigen) test. With the PSA test, high levels of PSA may indicate prostate cancer. However, levels can be elevated by benign prostatic hypertrophy or other non-cancerous conditions as well. The second test is the digital rectal exam (DRE). DRE can detect prostate enlargement or prostate cancer. Don't be alarmed if you are told that your prostate is enlarged, more than 50% of men older than age 50 have an enlarged prostate caused by benign prostatic hypertrophy. The American Cancer Society recommends that you consider a DRE and a PSA test yearly after the age of 50.

TESTICULAR EXAMINATION:

An examination of your testicles is usually done during your health maintenance exams. This examination checks for masses or any change in size, shape or consistency of the testes. The most important reason for this test is to check for testicular cancer which is the most common cancer of American men between the ages of 15-35. We also recommend that you do monthly testicular exams at home starting in the mid teenage years.

FOR WOMEN:

MAMMOGRAM AND CLINICAL BREAST EXAM:

Both of these screening tests are designed to detect breast lumps or breast irregularities that may be manifestations of breast cancer. The mammogram is an x-ray of your breast tissue. The reason for a mammogram is to detect breast masses, suspicious changes or calcifications that may represent breast cancer but are too small to detect by physical examination. We recommend yearly mammograms after the age of 40. The clinical breast exam is a physical examination of your breasts and armpits. The examiner is looking for changes in skin color, skin irregularities and changes in your nipples as well as checking for enlarged lymph nodes and lumps in the breast. We recommend that you have a clinical breast exam yearly after age 40 in conjunction with your mammogram.

PAP TESTS AND PELVIC EXAM:

The pap test is a screening test used to detect cervical cancer or precancerous changes of your cervix. During this examination a speculum is inserted into your vagina to observe your cervix. Using a small swab, cervical cells are gently removed and then the cells are placed into a fluid-filled bottle and sent to a laboratory for microscopic examination. The US Preventive Services Task Force recommends screening start within three years of your first sexual encounter or at age 21, whichever comes first. We recommend that you have yearly pap smears if you are at increased risk of cervical cancer. The following increase your risk of cervical cancer:

- History of sexually transmitted disease, especially human papillomavirus.
- You have multiple sex partners
- History of abnormal cells on your cervix(cervical dysplasia)
- History of vaginal or vulvar cancer
- You are a smoker

The pap smear test is only one part of the pelvic examination. The pelvic examination is a screening test that exams the external genitalia for abnormal lesions or sores. During the pelvic examination a speculum is also used to visualize the vaginal walls to look for sores, lumps, inflammation or abnormal discharge. After the speculum exam the uterus and ovaries are also palpated to make sure there are no abnormal masses or tenderness. Usually the pelvic exam is done in conjunction with the pap test and we may recommend that you have annual pelvic exam even if you don't need a yearly pap test.

BONE DENSITY MEASUREMENT:

This is a quick and painless x-ray of your lower back and hips. This test helps us to assess your bone density and gives us a measurement of your fracture risk. The most common x-ray done is called a DEXA scan. Currently the DEXA scan is the standard for diagnosing osteoporosis, as well as response to treatment. Osteoporosis is a disease that is characterized by loss of bone mass which in turn makes bones more likely to break. The US Preventive Services Task Force recommends that women age 65 and over get a DEXA scan routinely. Certain factors put you at increased risk of osteoporosis:

- Low body weight
- History of fractures.
- Family history of osteoporosis
- Menopause
- Discontinuing estrogen therapy

We may recommend earlier DEXA scans if you have any of the previous factors.