

Preventive activities over the lifecycle – Adults

Screening Case-finding

Activity/topic	Age group															Frequency	Notes	
	15–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65–69	70–74	75–79	≥80				
Cancer																		
Breast																	Screening: Every two years Case-finding: At least every two years	Screening: Women at average risk or slightly higher than average risk of breast cancer should participate in mammographic screening from ages 50 to 74 years as part of the national BreastScreen program. Case-finding: Undertake mammographic screening from ages 40 to 74 years for women at moderately increased risk.
Cervical																	Every five years	Women and people with a cervix who are aged between 25-74 years, have ever had sexual contact and who are eligible for screening should have an HPV screening test for cervical cancer. This can be on a self-collected vaginal sample or on a clinician-collected sample.
Colorectal																	Every two years	Immunochemical faecal occult blood testing (iFOBT) every two years is recommended starting at age 45 years and continuing to age 74 years for those at average risk of colorectal cancer.
Prostate																	See chapter for frequency	See chapter for individual recommendations.
Skin																	See chapter for frequency	See chapter for individual recommendations.
Cardiovascular																		
Atrial fibrillation (AF)																	Opportunistically	Opportunistic clinical palpation or auscultation to detect asymptomatic AF in people aged 65 years or more.
Cardiovascular disease risk																	Blood pressure (BP) (18+ years) opportunistically, no more than every two years. CVD risk (age 45 - 79) every five years unless risk factors worsen.	See chapter for individual recommendations.
Infectious diseases																		
Immunisation	Immunisation is recommended at particular ages throughout life, according to the Australian Immunisation Handbook.															See chapter for frequency	See chapter and Australian Immunisation Handbook schedule for recommendations.	
Sexually transmitted disease																	Opportunistically if indicated (evidence is unclear on testing interval).	Screening for chlamydia and gonorrhoea is recommended in all sexually active women 24 years or younger but only in those who are at increased risk (see Box 1) in women 25 years or older.
Injury prevention																		
Bullying and child abuse																	Opportunistically	See chapter for individual recommendations.
Mental health																		
Alcohol																	Every two years	Screen adults aged ≥18 years, including pregnant women, for unhealthy alcohol use. The Alcohol Use Disorder Identification Test – Consumption (AUDIT-C) tool can be used to assess this. Provide persons engaged in risky or hazardous drinking with brief behavioural counselling interventions to reduce unhealthy alcohol use.
Anxiety																	As required	See chapter for individual recommendations.
Dementia																	Opportunistically	See chapter for individual recommendations.
Depression																	See chapter for frequency	See chapter for individual recommendations.
Gambling																	Opportunistically	In patients experiencing stress, mental health issues or substance use problems; in people experiencing or perpetrating domestic violence; in people experiencing relationship breakdown; and/or in people with symptoms of compulsive gambling (see Box 1), ask about gambling behaviours (eg sports betting, wagering, card playing, pokies, casino gambling, online gambling). For example, 'In the past 12 months, have you or someone you are close to ever had issues with gambling?'
Smoking and nicotine vaping																	At every opportunity starting from the age of 10 years	Ask patients whether they are currently smoking and document their smoking status. Also ask about and document the use of vaping products.
Metabolic																		
Diabetes																	Determined by individual risk. See chapter for recommendations.	General population of average risk (for screening of high-risk and highest-risk populations, see Diabetes chapter).
Overweight and obesity																	Opportunistically	Assess height, weight and calculate BMI with caution in adults without a known eating disorder and who are not pregnant.
Physical activity																	Every two years	Ask questions about frequency, duration and intensity of physical activity and sedentary behaviour.
Musculoskeletal disorders																		
Osteoporosis																	Do not routinely repeat BMD + FRAX® within two years except in special circumstances.	Use FRAX® to calculate absolute fracture risk in people aged ≥50 years with lifestyle and non-modifiable risk factors (eg parent with hip fracture). When the FRAX® risk for major osteoporotic fracture (MOF) is ≥10%, refer for dual energy X-ray absorptiometry (DXA). If the risk for MOF is <10%, DXA is not recommended. Refer for BMD assessment by DXA for people aged ≥50 years with diseases/chronic conditions/medications associated with increased fracture risk. Restratify risk with FRAX® after DXA using BMD reading and treat when: the BMD T-score is ≤−2.5, or when the BMD T-score is between −1.5 and −2.5 and the FRAX® risk for MOF is ≥20% and/or the hip fracture risk is ≥3%.
Metabolic																		
Preconception																	See chapter for frequency	See chapter for individual recommendations.
Pregnancy - First antenatal visit																	See chapter for frequency	See chapter for individual recommendations.
Pregnancy - During pregnancy																	See chapter for frequency	See chapter for individual recommendations.
Interconception																	See chapter for frequency	See chapter for individual recommendations.
Perinatal mental health																	See chapter for frequency	See chapter for individual recommendations.
Miscellaneous																		
Frailty																	Every 12 months (screening). Every one - three years (case finding).	Consider screening as part of an assessment of elderly patients. Case find as an assessment of patients (age 65-74) with risk factors.

Preventive activities over the lifecycle – Children

Screening Case-finding

Activity/topic	Age group						Frequency	Notes
	Neonatal	2, 4, 6 & 12 months	18 months & 3 years	3.5–5 years	6–13 years	14–19 years		
Development and behaviour								
Developmental delay and autism							Opportunistically	See chapter for individual recommendations.
Preventive activities in childhood							Neonatally	See chapter for individual recommendations.
Infectious diseases								
Immunisation	Immunisation is recommended from birth for all children, and at particular ages throughout life, according to the Australian Immunisation Handbook.						See chapter for frequency	See chapter and Australian Immunisation Handbook schedule for recommendations.
Sexually transmissible infections							Opportunistically if indicated (evidence is unclear on testing interval)	Screening for chlamydia and gonorrhoea is recommended in all sexually active women 24 years or younger.
Injury prevention								
Bullying and child abuse							Opportunistically	See chapter for individual recommendations.
Mental health								
Alcohol							Every two years	Screen adults aged ≥18 years, including pregnant women, for unhealthy alcohol use. The Alcohol Use Disorder Identification Test – Consumption (AUDIT-C) tool can be used to assess this. Provide persons engaged in risky or hazardous drinking with brief behavioural counselling interventions to reduce unhealthy alcohol use.
Anxiety							As required	See chapter for individual recommendations.
Depression							See chapter for frequency	See chapter for individual recommendations.
Gambling							Opportunistically	In patients experiencing stress, mental health issues or substance use problems; in people experiencing or perpetrating domestic violence; in people experiencing relationship breakdown; and/or in people with symptoms of compulsive gambling (see Box 1), ask about gambling behaviours (eg sports betting, wagering, card playing, pokies, casino gambling, online gambling). For example, 'In the past 12 months, have you or someone you are close to ever had issues with gambling?'
Smoking and nicotine vaping							At every opportunity starting from the age of 10 years	Ask patients whether they are currently smoking and document their smoking status. Also ask about and document the use of vaping products.
Metabolic								
Overweight and obesity							Opportunistically	Assess height, weight and calculate BMI using age-appropriate charts in children and adolescents aged ≥6 years without a known eating disorder and who are not pregnant.
Physical activity							Every two years	Ask questions about the frequency (in each week), duration and intensity of physical activity and muscle strengthening activities.
Musculoskeletal disorders								
Developmental dysplasia of the hip							At newborn and postnatal checks	See chapter for individual recommendations.
Reproductive & women's health								
Preconception							See chapter for frequency	See chapter for individual recommendations.
Pregnancy - First antenatal visit							See chapter for frequency	See chapter for individual recommendations.
Pregnancy - During pregnancy							See chapter for frequency	See chapter for individual recommendations.
Interconception							See chapter for frequency	See chapter for individual recommendations.
Perinatal mental health							See chapter for frequency	See chapter for individual recommendations.
Miscellaneous								
Vision							Once, between the ages of three - five years	Vision screening in children to detect amblyopia, or its risk factors.