

Preventive activities over the lifecycle – Adults

Patient name: _____ Date of birth: _____ Date: _____

Activity/topic	Frequency	Notes	Reference	Age group											
				15–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65–69	70–79
Prevention of chronic disease															
Smoking	Opportunistically	It would be ideal to offer smoking cessation advice at every visit for those at high risk of complications	p 67, Section 7.1												
Women who are pregnant or planning a pregnancy	Each antenatal visit		p 67, Section 7.1 and p 18, Chapter 1.												
Overweight	Every two years	Every 12 months for Aboriginal and Torres Strait Islander patients, or those with existing diabetes, cardiovascular disease, stroke, gout or liver disease. Every six months for adults who are overweight or obese	p 69 Section 7.2												
Nutrition	Every two years	Every six months for patients who are overweight or obese, or have high cardiovascular absolute risk, a family history cardiovascular disease, type 2 diabetes or high risk of type 2 diabetes .	p 73, Section 7.3												
Alcohol: Early detection of at-risk drinking	Every two to four years for low-risk groups and opportunistically for higher risk groups	All patients 15 years of age and older should be asked about the quantity and frequency of alcohol intake	p 75, Section 7.4												
Women who are pregnant or planning a pregnancy	Each antenatal visit	No drinking is the safest option	p 18, Section 1												
Physical activity	Every two years	Opportunistically for those at higher risk, including teenage girls, older adults, office workers, Aboriginal and Torres Strait Islander patients, patients with low socioeconomic status and non-English speaking background, or those at high risk of a chronic condition or cancer	p 77, Section 7.5												
Pre-conception care	Opportunistically	Consider for all women aged 15–49 years	p 18, Chapter 1												
Sexual health – Chlamydia and other sexually transmissible diseases	Opportunistically if indicated	All sexually active patients up to 29 years of age. Test every 12 months for higher and highest risk groups	p 62, Section 6.2.1												
Prevention of vascular disease															
Absolute cardiovascular disease risk assessment	Every two years	Aged ≥35 years for Aboriginal and Torres Strait Islander patients	p 86, Section 8.1												
Blood pressure	Every two years	Every 6–12 months for patients with moderate risk and every 6–12 weeks for patients with high risk.	p 87, Section 8.2												
Cholesterol and other lipids	Every five years	Every two years for those with increased risk, and 12 months with increased cardiovascular risk and existing chronic disease. Aged ≥35 years for Aboriginal and Torres Strait Islander patients	p 89, Section 8.3												
Type 2 diabetes	Every three years	Every 12 months for those with impaired glucose tolerance or impaired fasting glucose. Aged 18 years and older for Aboriginal and Torres Strait Islander patients	p 92, Section 8.4												
Stroke	Assess patients with high absolute risk every 12 months		p 94, Section 8.5												
Kidney disease	Every one to two years for those at high risk	Aged ≥30 years for Aboriginal and Torres Strait Islander patients	p 96, Section 8.6												
Cancer															
Colorectal cancer	Every two years from 50 years of age	Earlier for those with high risk	p 105, Section 9.2												
Breast cancer	Every two years		p 109, Section 9.3												
Melanocytic skin cancer	Opportunistically for average and increased risk	Examine every 6–12 months for those at high risk.	p 113, Section 9.4.1												
Non-melanocytic skin cancer	Opportunistically	Opportunistically for patients with increased risk including those >40 years of age, and every 12 months for high-risk patients	p 116, Section 9.4.2												
Cervical cancer (to April 2017)	Every two years		p 117, Section 9.5												
Cervical cancer (commencing May 2017)	Every five years		p 117, Section 9.5												
Psychosocial															
Depression	Every encounter for those aged 12–18 years and opportunistically for those aged ≥18 years														
Intimate partner violence	Opportunistically; maintain a high level of clinical awareness for patients at increased risk	Every encounter for adolescent women and screen all pregnant women	p 130, Section 10.3												
Elderly															
Immunisation	Refer to Section 5.1 or the <i>Australian immunisation handbook</i>		p 46, Table 5.1												
Physical activity	Every two years	Advise moderate physical activity	p 46, Section 5.2 and p 78, Table 7.5.1												
Falls risk	Every 12 months	Every six months if the patient has a history of falls or multiple risk factors	p 47, Section 5.3												
Vision and hearing	Every 12 months														
Oral health	At least every 12 months and encouraged to attend annual dental visits	More frequently for those at increased risk	p 134, Chapter 11												
Glaucoma	Frequency of follow-up determined by the patient's eye assessment	Patients at increased risk	p 137, Chapter 12												
Osteoporosis															
Postmenopausal women	Every 12 months for average risk	Increased risk for women aged ≥50 years with risk factors	p 141, Chapter 14												
Men	Every 12 months for average risk	Increased risk for women aged ≥50 years with risk factors	p 141, Chapter 14												
Family history screening questionnaire	First visit to a practice and then at least every three years		p 24, Chapter 2												

Low-average risk Increased risk

Preventive activities over the lifecycle – Children

Patient name: _____ Date of birth: _____ Date: _____

Activity/topic	Frequency	Reference	Age group					
			Neonatal	2,4,6 & 12 months	18 months & 3 years	3.5–5 years	6–13 years	14–19 years
Immunisation	Refer to the <i>Australian immunisation handbook</i>	p 58, Table 6.1.1						
Assessment								
Metabolic screen		p 33, Chapter 3, Table 3.1						
Hearing		p 33, Chapter 3, Table 3.1						
Physical examination	As outlined in the Child Personal Health Record (Blue Book)	p 33, Chapter 3, Table 3.1						
Body mass index	Measure routinely from 2 years of age	p 37, Table 3.2 Practice Point k						
Vision	At least once between 3 and 5 years of age	p 37, Table 3.2 Practice Point j						
Oral health	Lift the lip' check from 12 months of age and encourage annual dental visits. Opportunistic examination of higher risk groups	p 37, Table 3.2 Practice Point e						
Chlamydia and other sexually transmissible infections	Patients who are sexually active	p 62, Section 6.2.1						
Family and social environment	When a child presents with behavioural or emotional problems	p 33, Table 3.1						
Depression	Every encounter	p 38, Table 3.2 Practice Point m						
Risky behaviours		p 38, Table 3.2 Practice Point m						
Intimate partner violence	Opportunistically at every encounter for adolescent women	p 131, Table 10.3.1						
Health promotion								
Support breastfeeding		p 74, Table 7.3.2						
Nutrition		p 32, Chapter 3, Table 3.1						
Physical activity		p 37, Table 3.2 Practice Point f						
Healthy sleep		p 32, Chapter 3, Table 3.1						
Interactive reading		p 32, Chapter 3, Table 3.1						
Developmental progress	As outlined in the Child Personal Health Record (Blue Book)	p 36, Table 3.2 Practice Point d						
Preventive counselling and advice								
Smoking	Ask about passive smoking during the neonatal period. It should be asked opotunistically in adolescents and young people	p 67, Section 7.1						
Sudden unexpected death in infancy		p 32, Chapter 3, Table 3.1						
Social/emotional wellbeing		p 32, Chapter 3, Table 3.1						
Injury prevention		p 32, Chapter 3, Table 3.1						
Sun protection	Opportunistically							
Early detection of at-risk drinking	Every two to four years all patients aged ≥15 years Opportunistically for children aged <15 years (increased risk)	p 75, Section 7.4						

Low-average risk Increased risk