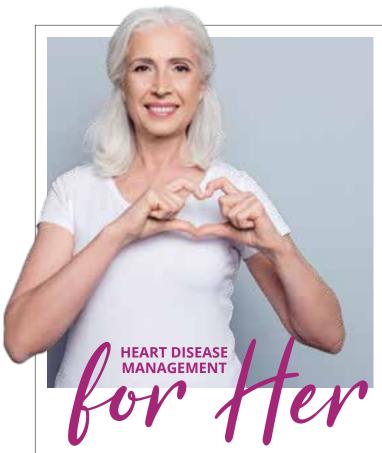


Your SCREENING SCHEDULE

Annual visits with your provider give you a chance to stay on top of these vital screenings through every decade of life.*

20 s	30 s	40s	50s and early 60s	65 and Beyond
Blood pressure every 1 to 2 years	Blood pressure every 1 to 2 years	Blood pressure every 1 to 2 years	Blood pressure every 1 to 2 years	Blood pressure every year
Cholesterol every 5 years	Cholesterol every 5 years	Cholesterol every 5 years	Cholesterol every 5 years	Cholesterol every 5 years
Chlamydia and gonorrhea testing every year for women who are sexually	Pap test every 3 years or HPV test/Pap-HPV co-test every 5 years if results are normal	Colorectal cancer screening beginning at age 45 (frequency depends on the test)	Colorectal cancer screening (frequency depends on the test)	Colorectal cancer screening until age 75 (frequency depends on the test)
active, up to age 25		Diabetes screening every 3 years after age 44	Diabetes screening every 3 years	Diabetes screening every 3 years
Pelvic exam and Pap test every 3 years beginning at age 21		Mammogram every year beginning at 40 Pap test every 3 years or HPV test/ Pap-HPV co-test	Lung cancer screening with low-dose CT annually for women age 55 and up who smoked the equivalent of one pack a day for 30 years or quit within the past 15 years	Lung cancer screening with low-dose CT every year for women up to age 80 who smoked the equivalent of one pack a day for 30 years or quit within the past 15 years
*This information is based or	n women who are	every 5 years if results are normal	Mammogram every year	Bone density screening at least once
at average risk. Your provide earlier, more frequent or add based on your personal risk j	litional screenings		Pap test every 3 years or HPV test/Pap-HPV	Mammogram every year
			co-test every 5 years if results are normal	Pap/HPV test every five years up to age 65; after age 65, discuss screening with your provider.



Learn when to take action to prevent heart disease.

Heart disease is the No. 1 cause of death for women in the United States, according to the American Heart Association. The condition can be particularly dangerous because it develops over time and you may not immediately associate some symptoms, including fatigue, nausea and shortness of breath, with heart problems.

Some early risk factors of heart disease, such as high blood pressure and high cholesterol, are considered "silent." You can't always see or feel them until they are diagnosed by your provider or an emergency, such as a heart attack, occurs. You may also be at increased risk for heart disease because of your family history, weight and age.

PROTECTIVE MEASURES

Staying up-to-date with your health can help you identify heart disease and manage the condition before it becomes an emergency. During an annual physical, your primary care provider will check indicators of heart health to see if they are in healthy ranges, including:

- Blood pressure: lower than 120/80 for women age 20 and over
- Blood sugar: less than 100 mg/dL
- Cholesterol: 125 to 200 mg/dL for women age 20 and over

If your levels are too high, your provider can recommend lifestyle changes, such as exercising more and eating a healthier diet, or medications that can bring your cholesterol, blood pressure and blood sugar back into healthy ranges.



Alcohol can be healthy and unhealthy at the same time. That's why providers need to know how much you drink.

During your annual check-ups, your primary care provider will ask you about how much alcohol you drink. This question is a common screening at every wellness visit. There's a good reason for this — and it's not because your doctor is judging you.

Although drinking a glass of wine a day has been linked to a reduced risk of dying from heart disease, drinking more than that can take a toll on your health, increasing your risk for:

- · Cardiomyopathy (diseased heart muscle)
- · Heart failure
- · High blood pressure
- Irregular heartbeat
- Liver damage
- · Obesity
- Stroke

Those risks are generally associated with drinking more than one drink per day, the recommended limit for women. However, according to the National Cancer Institute, even light alcohol consumption (less than one drink per day) has been associated with a slightly higher risk for breast cancer. The risk increases the more alcohol that's consumed.

THE IMPORTANCE OF BEING HONEST

When your provider asks you how much you drink, be truthful. It helps him or her determine ways to help reduce your risk



MORE THAN

MAMMOGRAMS

You may be aware of the importance of an annual breast cancer screening — but that isn't the only cancer screening you need.

Breast cancer is the second most common type of cancer in women behind skin cancer, according to the American Cancer Society (ACS), and we recommend all women at average risk begin screening with annual mammograms starting at age 40. The five-year survival rate for breast cancer detected in the earliest stage, before it has spread outside the breast, is 99%, according to the ACS.

However, breast cancer is not the only cancer threat women face. Cervical, colorectal and lung cancers all affect women, in some cases resulting in more cancer-related deaths than breast cancer despite being highly preventable. Be sure to discuss these important screenings with your women's health provider:

PAP TESTS

Pap tests screen for cervical cancer, which is often caused by human papillomavirus (HPV) infection. HPV is a sexually transmitted disease, which is why testing is recommended for women who are sexually active. According to The American College of Obstetricians and Gynecologists, it can take three to seven years for cancer to develop, and cervical cancer screenings, such as the Pap test, can detect cancerous cells before they cause disease.

LOW-DOSE CT LUNG CANCER SCREENING

Lung cancer is the leading cause of cancer death in women, the ACS reports. Low-dose CT scans take highly detailed images of the lungs and allow doctors to see abnormalities that have the potential to become cancer. Early detection allows for more treatment options. Unfortunately, surveys from the American Lung Association have found that many adults who qualify for this important screening are not receiving it. If you meet the criteria (see page 2), discuss this scan with your doctor.

COLORECTAL CANCER SCREENING

Colorectal cancer is the third leading cause of cancer death in women, according to the ACS. Colonoscopies, considered the gold standard in testing, allow providers to visually inspect the colon and rectum and remove potentially cancerous polyps if any are found during the procedure. However, alternative noninvasive tests, such as a fecal occult blood test, fecal immunochemical test and DNA tests, all of which examine your stool, also exist. You should discuss which test is appropriate for you with your doctor beginning at age 45.



PREVENTION FIRST

At Beaufort Memorial, we are dedicated to cancer prevention. Our full-service cancer program offers important screenings as well as follow-up lab tests, additional imaging and procedures you may need, all in one convenient location.

Beyond screenings, our providers work with you to prevent cancer before it impacts your life. They can evaluate your risk factors and help you make healthy lifestyle changes by referring you to our smoking cessation programs and nutrition and fitness experts.

Learn more at BeaufortMemorial.org/cancer-prevention.



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