

The background is a dark blue gradient with a starry texture. It features several circular elements: a large scale on the left with numbers from 160 to 260, and several smaller circles with arrows indicating clockwise or counter-clockwise rotation. The text is centered in the right half of the image.

PREVENTIVE MEDICINE

WHAT YOU SHOULD DO...TO BE YOUR BEST YOU!

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WHAT IS PREVENTIVE MEDICINE?

- Definition by the American Board of Preventive Medicine:

“**Preventive Medicine** is the specialty of **medical** practice that focuses on the health of individuals, communities, and defined populations. Its goal is to protect, promote, and maintain health and well-being and to prevent disease, disability, and death.”

- General Definition

“Medical practices that are designed to avert and avoid disease. For example, screening for hypertension and treating it before it causes disease is good preventive medicine. Preventive medicine takes a proactive approach to patient care. “

WHAT IS PREVENTIVE MEDICINE CONT....

- American Board of Medical Specialties Definition

“ the application of biostatistics and epidemiology, health services management and administration, control and prevention of environmental and occupational factors, clinical preventive medicine activities, and assessment of social, cultural, and behavioral influences on health.”

- Definition by Bloomberg School of Public Health

“A different way to define Preventive Medicine is to divide the entire field into two broad groups: clinical and non-clinical Preventive Medicine. Doctors who work in clinical Preventive Medicine see patients on a daily basis and may provide services in screening, health counseling, and immunization. This can include diabetics, smokers, cardiac patients, and others who can benefit from prevention and lifestyle modification.

Non-clinical Preventive Medicine may include health policy, social and behavioral aspects of health and disease, epidemiology, or other areas in which individual patients are not the primary daily focus. Many Preventive Medicine physicians do both clinical and non-clinical activities.”

FOCUS ON CLINICAL PREVENTIVE MEDICINE

VISIT TYPES

OVERALL PRACTICES

IMMUNIZATIONS

TESTS

RECENT UPDATES

GUIDELINES BY DECADE (EMPHASIS ON TEEN YEARS)

SPECIAL POPULATIONS

DIET

EXERCISE



WHAT TO EXPECT AT YOUR OFFICE VISIT

- There are Multiple different Office Visit types
 - Well Child Check
 - Adult Physical Exam or Complete Physical Exam (CPE)
 - Establish Care
 - Well Woman Exam
 - Medicare Wellness Visit
 - Sports/Camp Physical
 - Acute Visit
 - Follow Up Visit
 - Pre Op Exam

OVERALL PRACTICES OF PREVENTIVE MEDICINE:

- Vitamins:
- Daily Multivitamin (something is better than nothing)
- Prenatal Vitamin if childbearing age
- Vitamin D supplementation
- Laboratory Testing
- Age 35-50 1000 mg Calcium
- Age 50 + 1000-1200 mg Calcium....best if Vitamin D is added (should take into account overall Calcium load, including diet)

OVERALL PRACTICES OF PREVENTIVE CARE

- 0-5 years Focus is on Growth, Immunizations, Development, and Check In
- 5-11 years old Focus is on Growth Progress, Catch Up, and School Integration
- 11-19 years old Focus is on School Performance, Peer Group Relations, Education on Substance Abuse/ETHO, Tobacco Avoidance, Depression Screening, Toxic/Harmful Exposures, Bullying, Sex Ed, Pubertal and Body Change, Immunizations , and Overall Social Growth
- 20+ Focus on Age Guidelines and is More Lab and Referral Driven

OVERALL PRACTICES OF PREVENTIVE CARE:

- Yearly Check in with the provider
- Chance to ask questions
- Opportunity to Update (History and Guidelines)
- Education Opportunity
- Get and/or Catch up on Immunizations
- Lab work
- Physical Examination (Pap Smear and Testicular Exam)
- Referrals
- Paperwork

IMMUNIZATIONS:

- Tetanus: q 10 years, if over 18 need DTAP booster due to resurgence
- Flu shot: yearly
- HPV: 3 dose series
- Pneumovax: 65 unless high risk (Asthma, COPD, Tobacco Abuse, immunocompromised, DM, Splenectomy)
- Zoster: after 50 years, 60 years during the shortage

Vaccine	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19-23 mos	2-3 yrs	4-6 yrs	7-10 yrs	11-12 yrs	13-15 yrs	16-18 yrs
Hepatitis B ¹ (HepB)	1 st dose	← 2 nd dose →			← 3 rd dose →											
Rotavirus ² (RV) RV1 (2-dose series); RV5 (3-dose series)			1 st dose	2 nd dose	See footnote 2											
Diphtheria, tetanus, & acellular pertussis ³ (DTaP: <7 yrs)			1 st dose	2 nd dose	3 rd dose				← 4 th dose →			5 th dose				
Tetanus, diphtheria, & acellular pertussis ⁴ (Tdap: ≥7 yrs)														(Tdap)		
<i>Haemophilus influenzae</i> type b ⁵ (Hib)			1 st dose	2 nd dose	See footnote 5				← 3 rd or 4 th dose → See footnote 5							
Pneumococcal conjugate ⁶ (PCV13)			1 st dose	2 nd dose	3 rd dose				← 4 th dose →							
Pneumococcal polysaccharide ⁶ (PPSV23)																
Inactivated poliovirus ⁷ (IPV) (<18 yrs)			1 st dose	2 nd dose	← 3 rd dose →							4 th dose				
Influenza ⁸ (IIV; LAIV) 2 doses for some: See footnote 8					Annual vaccination (IIV only)						Annual vaccination (IIV or LAIV)					
Measles, mumps, rubella ⁹ (MMR)								← 1 st dose →				2 nd dose				
Varicella ¹⁰ (VAR)								← 1 st dose →				2 nd dose				
Hepatitis A ¹¹ (HepA)								← 2-dose series, See footnote 11 →								
Human papillomavirus ¹² (HPV2: females only; HPV4: males and females)															(3-dose series)	
Meningococcal ¹³ (Hib-Men-CY ≥ 6 weeks; MenACWY-D ≥ 9 mos; MenACWY-CRM ≥ 2 mos)			See footnote 13											1 st dose		Booster

 Range of recommended ages for all children

 Range of recommended ages for catch-up immunization

 Range of recommended ages for certain high-risk groups

 Range of recommended ages during which catch-up is encouraged and for certain high-risk groups

 Not routinely recommended

TESTS/LABS

- Cholesterol Testing
- Anemia Testing
- Thyroid Testing
- Electrolyte Testing
- Vitamin D

TESTS/LABS

- Dexa if in 60's or sooner if on Steroids 3 months consecutively, High Risk (thin, tobacco abuse, Caucasian), family history of Osteoporosis
- EKG: Baseline by 50, if high risk such as HTN, DM, Family History of Heart Disease
- Good Practices: Yoga, Meditation, Pilates, Stress Free Living (Problem associated Acupuncture, Biofeedback)

Infants 0-18 months

- Birth History, Social History, Family History
- Weight, Length, Head Circumference
- Pulse Respirations
- Newborn Screen #2 (2 week visit only)
- Sickle Cell, Thyroid, Hemoglobinopathies and PKU screening
- ASQ given at 2 months, MCHAT at 18 mos.
- Immunizations (See Chart)

Toddlers 24 months to 3 years

- Weight, Height, **BMI**
- Pulse, Respirations
- ASQ
- Screening test for Hgb/Hct
- Blood Pressure at Age 3

Pediatric 4-11 years old

- Vision and Hearing Screen age 4
- ASQ
- Focus on School Assimilation
- Continued Changes in Development and Progress to Puberty
- Immunizations

Adolescent 11-19 years old

- Patient, Family and School History/Interview (relations with family and friends)
- Physical Exam, Lab Work (Cholesterol, Hct, sometimes Thyroid), Paperwork
- Specifically in the Areas of
 - Academic Performance
 - Substance and/or ETOH Abuse
 - Sexual Activity
 - Depression Screening
 - Peer Pressure/Bullying
 - Tobacco Use/Abstinence
 - Possible Toxic Exposure
 - Physical/Sport/Extracurricular Activity

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**“I need to let my parents get online more often.
Last night I got grounded for saying the word
‘blogger’ in front of my mom!”**

History and Interview

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“I can see my zit on Google Earth!”

Physical Exam

Academics

Substance Abuse/ETOH

SEX

Depression

(must have proper support)

Peer Pressure/Bullying

Tobacco

Risks from Smoking

Smoking can damage every part of the body

Cancers

Head or Neck

Lung

Leukemia

Stomach

Kidney

Pancreas

Colon

Bladder

Cervix

Chronic Diseases

Stroke

Blindness

Gum infection

Aortic rupture

Heart disease

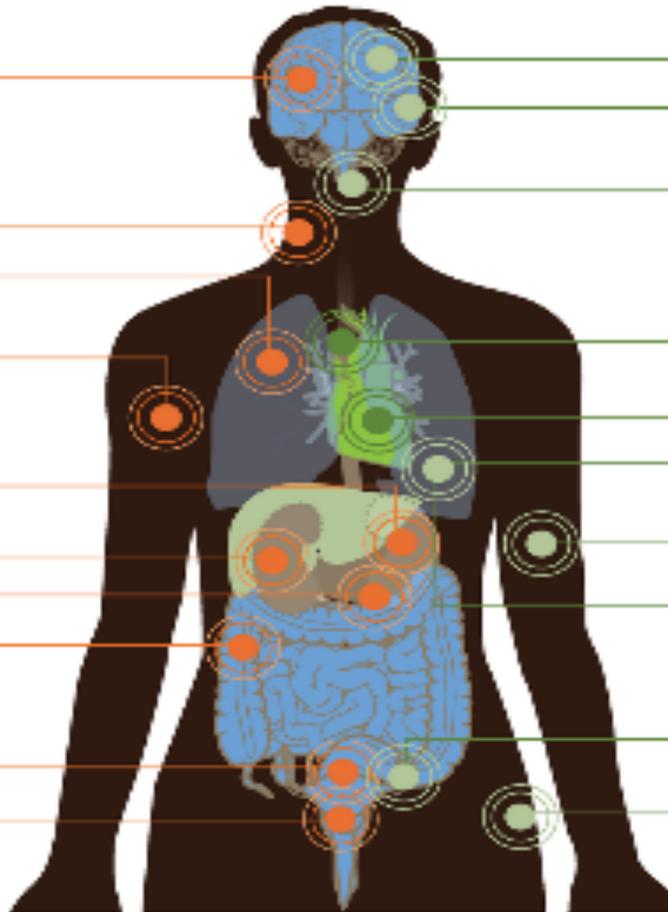
Pneumonia

Hardening of the arteries

Chronic lung disease
& asthma

Reduced fertility

Hip fracture



Toxic Exposures

TB

HIV

Shelter Risk

Employment Risk

Physical Activity/Sports/Extracurricular

20'S:

- Important to establish care away from home if at college or on their own
- Paps should be regular starting at age 21, especially if you have multiple sexual partners
- Paps are now every 3 years if normal until age 30 then every 5 years if cytology and HPV testing has been done and is normal (2012)
- Chlamydia and Gonorrhea testing for sexually active 24 and under (2014)
- Married women in their 20's taking a prenatal vitamin is a good practice in case of conception
- Skin Cancer Counseling (esp. if fair skinned)
- CPE/Well Woman is a regular appt
- Skin Survey
- Discuss Obesity
- Men need to get/or at least be familiar with a self Testicular Exam
- Labs should include CBC,TSH,LIPIDS, BMP, STD SCREEN VITAMIN D

30'S:

- Usually the time men and women start to become more preoccupied with their health
- Paps should be regular depending on the risk strata
- A daily mvi should be a regular part of the daily regimen
- Labs should include: CBC, TSH, LIPIDS, BMP or CMP if on cholesterol lowering meds, STD SCREEN,
- VITAMIN D, immunization boosters.

40'S:

- Paps continue to be regular for some, if not still need yearly breast exam,
- Every 3-5 years , and external exam yearly
- Mammograms are now not recommended unless high risk/family history (2016)
- Yearly Prostate Exams (if high risk, controversial)
- Daily MVI with 1000 mg Calcium supplementation
- Labs should include : CBC,TSH,LIPIDS, BMP, STD SCREEN VITAMIN D
- PSA screening if high risk (AA, Family history of Cancer, high risk)

50'S:

- Mammograms every 2 years (2016)
- Colonoscopy every 10 years is standard unless there is a family history of colon disease or cancer, then interval is sooner
- Daily MVI with 1000mg Calcium supplementation
- Menopause
- Zostavax Eligible
- Labs should include: CBC, TSH, LIPIDS, BMP, STD SCREEN VITAMIN D, and Hormone Profile (may not be conclusive for menopause, FSH \geq 23)
- PSA in men (still controversial)
- Consider baseline Stress testing/ECHO, definitive in high risk strata such as HTN, DM, etc.

60/70'S:

- Add pneumovax at age 65 , Now 2 administrations, 13 then 23
- DEXA scanning for Osteoporosis
- All else is the same, except if hysterectomy... paps might go to a much longer interval, if at all. Still need to “check in”
- Hep C Screening for those born between 1945-1965

DIABETES

- Yearly Podiatric
- Ophthalmologic Exams
- Hepatitis B Vaccination

GUIDELINES

- USPTF
- American Cancer Society
- AAFP
- AAP
- Various Medical Specialty Societies

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"I'm writing my report on 3 types of eating disorders: anorexia, bulimia, and cafeteria."

IMPORTANCE OF DIET/LIFESTYLE PRACTICES AND MODIFICATIONS

- Whole Foods Diet/Moderation
- Creating Healthy Habits/Alternative Modalities
- BMI 18-25 Normal
- Heart Health (lifestyle)

GLASBERGEN

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**"If the brain is mostly made of fat,
then gaining weight in college
helps you get smarter!"**

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**"I'm on a low-carb diet.
Whenever I feel low, I eat carbs!"**

IMPORTANCE OF EXERCISE



TOP 10 BENEFITS OF EXERCISE

1. Helps to maintain a normal weight
2. Keep muscles strong, create more muscle mass, therefore burn more calories
3. Keeps bones strong
4. Keeps skin healthy with increased circulation of nutrients
5. Decreases Stress and Stress Hormones
6. Improves Mood by literally increasing Endorphins (feel good chemicals)
7. Increase Brain Power
8. Helps to Age Well
9. Jump starts the immune system, thereby decreasing colds and viruses *
10. Improves Sleep

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GO SEE YOUR DOCTOR!
THANK YOU!