

Abbreviations

BRCA = breast cancer susceptibility gene; CVD = cardiovascular disease; HIV = human immunodeficiency virus; HCV = hepatitis C virus; HBV = hepatitis B virus; STI = sexually transmitted infection; USPSTF = U.S. Preventive Services Task Force; WPSI = Women's Preventive Services Initiative.

¹Additional Bright Futures recommendations include: Periodic vision and hearing tests ages 13 to 21; screening for suicide risk ages 13 to 21; risk assessment for sudden cardiac arrest and sudden cardiac death ages 13 to 21; risk assessment for anemia ages 13 to 21; and fluoride supplementation if needed ages 13 to 16 (https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf?_ga=2.90295442.924462059.1671580996-606326568.1671580995). Accessed December 19, 2022.

*Criteria for selective screening

- ² Diabetes screening and management: Screen women with overweight or obese BMI ages 35 to 70 years; and women with previous gestational diabetes but not previously diagnosed with type 2 diabetes when not pregnant ages ≥ 13 years.
- ³ Folic acid supplementation: Sexually active and planning or capable of pregnancy.
- ⁴ Healthy diet and physical activity counseling: Overweight or obese BMI and additional CVD risk factors (hypertension, dyslipidemia, abnormal blood glucose levels, diabetes).
- ⁵ Lipid screening: Familial dyslipidemia, risk factors, or high-risk conditions ages 13 to 17 years.
- ⁶ Osteoporosis screening: 10-year fracture risk equivalent to an average-risk 65-year-old woman based on specific risk factors (parental history of hip fracture, smoking, white race, excess alcohol consumption, low body weight).
- ⁷ Statin use to prevent CVD: Ages 40 to 75 years, one or more CVD risk factors (i.e., dyslipidemia, diabetes, hypertension, or smoking), and calculated 10-year risk of a CVD event $\geq 10\%$.
- ⁸ Urinary incontinence screening: Screen all women ages ≥ 18 and younger women if postpartum.
- ⁹ Gonorrhea and chlamydia screening: New sex partner, more than one sex partner, a sex partner with concurrent partners, or a sex partner who has an STI; inconsistent condom use among persons who are not in mutually monogamous relationships; previous or coexisting STI; and exchanging sex for money or drugs. Prevalence is also higher among incarcerated populations, military recruits, and patients receiving care at public STI clinics.
- ¹⁰ Hepatitis B screening: Born in a country with a prevalence of HBV infection $\geq 2\%$; lack of vaccination in infancy in U.S.-born persons with parents from a country or region with prevalence $\geq 8\%$; HIV-positive; injection drug use; and household contacts or sexual partners of persons with HBV infection.
- ¹¹ Hepatitis C screening: One-time screening for asymptomatic adults ages 18 to 79 without known liver disease. Repeat screening and screen at other ages if past or current injection drug use.
- ¹² HIV preexposure prophylaxis (PrEP): Candidates include 1) heterosexually active women with a serodiscordant sex partner (i.e., in a sexual relationship with a partner living with HIV); or inconsistent use of condoms during sex with a partner whose HIV status is unknown and who is at high risk; or an STI with syphilis or gonorrhea within the past 6 months; 2) uses injection drugs and shared use of drug injection equipment; or has risk of sexual acquisition of HIV based on above; 3) engaged in transactional sex, such as for money, drugs, or other.
- ¹³ Immunizations should be administered according to the most recent Advisory Committee on Immunization Practices (ACIP) recommendations (<https://www.cdc.gov/vaccines/schedules/index.html>). Accessed December 19, 2022.
- ¹⁴ Sexually transmitted infection prevention counseling: Risk factors for STIs include having an STI currently or within the past year, not consistently using condoms, having multiple sex partners, or having sex partners within populations with a high prevalence of STIs. Increased STI prevalence rates are found among women seeking STI testing or attending STI clinics; sexual and gender minorities; and among those with HIV, using injection drugs, exchanging sex for money or drugs, or residing in correctional facilities.
- ¹⁵ Syphilis screening: Women with HIV; high prevalence communities or populations; history of incarceration; exchanging sex for money or drugs.
- ¹⁶ Tuberculosis infection: Persons from countries with increased tuberculosis prevalence; living in high-risk congregate settings (e.g., homeless shelters, correctional facilities); exposure to individuals with active tuberculosis, such as health care workers and workers in high-risk congregate settings; immunosuppressed individuals.
- ¹⁷ Breast cancer screening: Decisions about screening are made on an individual basis according to risk and preferences through a shared-decision making process.
- ¹⁸ Lung cancer screening: 20 pack-year smoking history and currently smoke or have quit within the past 15 years.
- ¹⁹ Medications to reduce breast cancer risk: Major risk factors for breast cancer include increasing age, family history of breast or ovarian cancer (especially among first-degree relatives and onset before age 50 years), history of atypical hyperplasia or other nonmalignant high-risk breast lesions, previous breast biopsy, and extremely dense breast tissue. Models suggest that women with an estimated 5-year breast cancer risk of 3% or greater are likely to have more benefit than harm, although the balance of benefits and harms depends on age, race or ethnicity, the medication used, and whether the patient has a uterus.
- ²⁰ Skin cancer counseling: Fair skin, light hair and eye color, freckles, sunburn easily.
- ²¹ Perinatal depression preventive interventions: Counseling interventions for women with one or more of the following: a history of depression, current depressive symptoms that may not reach a diagnostic threshold, socioeconomic risk factors such as low income or adolescent or single parenthood, recent intimate partner violence, or mental health-related factors such as elevated anxiety symptoms or a history of significant negative life events.
- ²² Diabetes: Universal screening after 24 weeks' gestation (preferably 24 to 28 weeks); additionally, selective screening for those with risk factors before 24 weeks' gestation, ideally at the first prenatal visit (obese BMI; increased maternal age; history of gestational diabetes; family history of diabetes; ethnicity with increased risk for type 2 diabetes [Hispanic, Native American, South or East Asian, African American, or Pacific Islands descent]).
- ²³ Preeclampsia prevention with low-dose aspirin: History of preeclampsia, especially when accompanied by an adverse outcome; multifetal gestation; chronic hypertension; type 1 or 2 diabetes; renal disease; autoimmune disease (systemic lupus erythematosus, antiphospholipid syndrome).
- ²⁴ Diabetes screening after pregnancy: Previous gestational diabetes but not previously diagnosed with type 2 diabetes when not pregnant ages ≥ 13 years.



When women are **healthy**,
communities **thrive**.



©2023. Content owned by the ACOG Foundation, all Marks and Rights Reserved. This project was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number UHOMC29440, Bright Futures for Women's Health: Standard Practice Guidelines for Well Woman Care. This information or content and conclusions are those of the author and should not be construed as the official position nor policy of, nor should any endorsements be inferred by HRSA, HHS, or the U.S. Government.

HRSA
Health Resources & Services Administration

 **WPSI**
Women's Preventive Services Initiative

Recommendations for Well-Woman Care – A Well-Woman Chart

2023 RECOMMENDATIONS FOR WELL-WOMAN CARE

Preventive care visits provide an excellent opportunity for well-woman care including screening, evaluation of health risks and needs, counseling, and immunizations. *Recommendations for Well-Woman Care – A Well-Woman Chart* was developed by the Women’s Preventive Services Initiative (WPSI). The Well-Woman Chart outlines preventive services recommended by the WPSI, U.S. Preventive Services Task Force (USPSTF), and **Bright Futures** based on age, health status, and risk factors. Additional recommendations for immunizations are provided in a separate table from the Advisory Committee on Immunization Practices. Clinical practice considerations, risk assessment methods, and the age and frequency to deliver services are described in the **Clinical Summary Tables** that accompany the chart.

The Well-Woman Chart provides a framework for incorporating preventive health services for women into clinical practice. These services may be completed at a single visit or as part of a series of visits that take place over time. This information is designed as an educational resource to aid clinicians in providing preventive health services for women, and use of this information is voluntary. This information should not be considered as inclusive of all proper treatments or methods of care or as a statement of the standard of care. It is not intended to substitute for the independent professional judgment of the treating clinician. Variations in practice may be warranted when, in the reasonable judgment of the treating clinician, such course of action is indicated by the condition of the patient, limitations of available resources, or advances in knowledge or technology. While every effort is made to present accurate and reliable information, this publication is provided “as is” without any guarantees or warranties of accuracy, reliability, or otherwise, either express or implied. The Chart and Tables are updated annually. The WPSI website (www.womenspreventivehealth.org) has the most up-to-date version of the Chart and Clinical Summary Tables.

HEALTH CARE SERVICES	AGE (Years)						
	13–17 ¹	18–21 ¹	22–39	40–49	50–64	65–75	>75
♥ GENERAL HEALTH							
Alcohol use screening & counseling	●	●	●	●	●	●	●
Anxiety screening	●	●	●	●	●	●	●
Blood pressure screening	●	●	●	●	●	●	●
Contraception and contraceptive care	●	●	●	●	○		
Depression screening	●	●	●	●	●	●	●
Diabetes screening ²	○	○	○	○	○	○	○
Fall prevention						●	●
Folic acid supplementation ³	○	●	●	●	○		
Healthy diet & activity counseling ⁴		○	○	○	○	○	○
Interpersonal & domestic violence screening	●	●	●	●	●	●	●
Lipid screening ⁵	○	●	○	●		●	
Obesity prevention					● _{50–60}		
Obesity screening & counseling	●	●	●	●		●	●
Osteoporosis screening ⁶					○	●	●
Statin use to prevent CVD ⁷				○	○	○	
Substance use screening & assessment	●	●	●	●	●	●	●
Tobacco screening & counseling	●	●	●	●	●	●	●
Urinary incontinence screening ⁸	○	●	●	●	●	●	●
♣ INFECTIOUS DISEASES							
Gonorrhea & chlamydia screening ⁹	●	●	● _{≤24} ○ _{>24}	○	○	○	○
Hepatitis B screening ¹⁰	○	○	○	○	○	○	○
Hepatitis C screening (at least once) ¹¹	○	●	●	●	●	●	● _{≤80}
HIV preexposure prophylaxis ¹²	○	○	○	○	○	○	○
HIV risk assessment	●	●	●	●	●	●	●
HIV screening (at least once)	● _{>15}	●	●	●	●	○	○
Immunizations ¹³	●	●	●	●	●	●	●
STI prevention counseling ¹⁴	●	●	○	○	○	○	○
Syphilis screening ¹⁵	○	○	○	○	○	○	○
Tuberculosis screening ¹⁶	○	○	○	○	○	○	○
♣ CANCER							
Breast cancer screening ¹⁷				○	●	●	○
Cervical cancer screening		● _{≥21}	●	●	●	● _{≤65}	
Colorectal cancer screening				● _{45–49}	●	●	
Lung cancer screening ¹⁸					○	○	○ _{≤80}
Medications to reduce breast cancer risk ¹⁹			○	○	○	○	○
Risk assessment for BRCA1/2 genetic counseling & testing		●	●	●	●	●	●
Skin cancer counseling ²⁰	○	○	○ _{≤24}				

Recommendations from the WPSI and the USPSTF for preventive services for pregnant and postpartum women are also provided in the Well-Woman Chart. Comprehensive recommendations for pregnant and postpartum women can be found in ACOG’s **practice guidelines** and other educational materials.

PREVENTION SERVICES for pregnancy and postpartum provided in addition to age-based services listed in the previous chart	
♥ PREGNANCY	
Anxiety screening	●
Bacteriuria screening	●
Breastfeeding counseling, services & supplies	●
Contraception and contraceptive care	●
Depression screening & preventive interventions ²¹	●
Diabetes screening ²²	●
Folic acid supplementation	●
Gonorrhea & chlamydia screening	●
Healthy weight gain counseling	●
Hepatitis B screening	●
HIV screening (each pregnancy)	●
Interpersonal & domestic violence screening	●
Preeclampsia prevention with low-dose aspirin ²³	○
Preeclampsia screening	●
Rh(D) blood typing	●
Substance use screening & assessment	●
Syphilis screening	●
Tobacco screening & counseling	●

PREVENTION SERVICES for pregnancy and postpartum provided in addition to age-based services listed in the previous chart	
♥ POSTPARTUM	
Anxiety screening	●
Breastfeeding counseling, services & supplies	●
Contraception and contraceptive care	●
Depression screening & preventive interventions ²¹	●
Diabetes screening ²⁴	○
Folic acid supplementation	●
Interpersonal & domestic violence screening	●
Substance use screening & assessment	●
Tobacco screening & counseling	●

KEY:
 ● Recommended by the USPSTF (A or B rating), WPSI, or Bright Futures
 ○ Recommended for selected groups



MEMBERS OF THE ADVISORY PANEL SUPPORT THE WPSI

