Appendix B

Maneuvers to be Included in Clinical Preventive Health Care

Recommendations of the Canadian Task Force on the Periodic Health Examination Not Updated Since 1979

These tables summarize maneuvers reviewed by the Canadian Task Force on the Periodic Health Examination in 1979 that were not updated in this text. However, the medical evidence at that time established that benefits outweighed potential harm. All other interventions that the Task Force has recommended in the past (A and B Recommendations) have been updated in the 1994 Guide. However, note that Duchenne muscular dystrophy, Tay-Sachs disease and Progressive incapacity with aging are currently under review.

The information is displayed with "A Recommendations" for the general population at the top (maneuvers for which there is strong evidence for inclusion in a periodic health examination). The second grouping on each page are "B Recommendations" for the general population. (Maneuvers for which there is *fair* evidence for inclusion in a periodic health examination). A subsection of each group of recommendations specifically addresses recommendations for high-risk populations.

CONDITION	MANEUVER	POPULATION
GOOD EVIDENCE TO INCLUDE (A RECOMMENDATIONS):		
Tetanus	Immunization, booster every 10 years	Adults
Immunizable conditions related to international travel	Immunization	For travellers without contraindications
Syphilis	Serologic testing	Pregnant women
High-risk populations		
Meningococcal meningitis	Immunization	Military recruits and travellers
Toxoplasmosis	Exposure history, serologic testing and hygiene counselling	Non-immune pregnant women who keep a cat at home or eat raw meat
Syphilis	Serologic testing	Individuals with a history of multiple sexual partners
FAIR EVIDENCE TO INCLUDE (B RECOMMENDATIONS):		
Hemorrhagic disease of the newborn	Vitamin K ₁ , 1 mg	Newborns
Hearing impairment	History and clinical examination	Adults attending for other reasons
Orthodontic conditions	Oral examination and roentgenography	Children
Progressive incapacity with aging ¹	Home visit – enquiry into physical, psychological and social competence	Elderly
High-risk populations		
Duchenne muscular dystrophy (DMD) ¹	Serum creatine phosphokinase determination	Female relatives of DMD patients
Interventricular septal defect	History and clinical examination	At birth and discharge from nursery
Tay-Sachs disease ¹	Measure resistance of serum hexosaminidase to heat inactivation	Premarital screening of high-risk including Ashkenazi Jews
Preterm labour	History; cerclage of cervix	Pregnant women

¹ Currently under review