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# Maneuvers to be Included in Clinical Preventive Health Care

## Classified by Age, Strength of Evidence, Target Population and Burden of Suffering

These tables summarize maneuvers reviewed by the Canadian Task Force on the Periodic Health Examination in this text for which the medical evidence documents that benefits outweigh potential harm. They deal with screening and counselling for the asymptomatic individual that would be offered in a clinical setting by physicians, nurses or associated health care workers. The tables exclude evaluation of interventions such as legislation, school-based programs and care provided by dentists. Therapeutic recommendations for individuals who have previously identified conditions (e.g. hypertension) are not included. Previous recommendations made by the Task Force where benefit outweighs harm but that have not been specifically updated for this volume are listed in Appendix B.

Recommendations are summarized by age and gender into subgroups eg. Prenatal/perinatal. The information is displayed with “A Recommendations” for the general population at the top (maneuvers for which there is good evidence for inclusion in a periodic health examination (PHE)). Conditions with a higher burden of suffering are listed first.

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). Within this category, conditions with a high burden of suffering are again listed first. A subsection of each group of recommendations specifically addresses high-risk populations.

# Perinatal Care

CONDITION	MANEUVER	POPULATION	CHAPTER
<b>GOOD EVIDENCE TO INCLUDE IN PHE (A RECOMMENDATIONS):<sup>1</sup></b>			
Low birth weight/cognitive ability of child	Smoking cessation interventions	Pregnant women	Ch 3
Gastrointestinal and respiratory infection in the newborn	Counselling on breast feeding; peripartum interventions to increase frequency of breast feeding	Pregnant women (or peripartum period)	Ch 22
D (Rh) sensitization	D (Rh) antibody screening and immunoglobulin (D Ig) administration after delivery of D positive infant	Pregnant women	Ch 11
Neural tube defects	Folic acid supplementation	Women capable of becoming pregnant	Ch 7
Bacteriuria in pregnancy	Urine culture	Pregnant women	Ch 9
<b>FAIR EVIDENCE TO INCLUDE IN PHE (B RECOMMENDATIONS):<sup>1</sup></b>			
Congenital rubella syndrome	Screen, counsel and vaccinate post-partum	Pregnant women	Ch 12
Preeclampsia	Blood pressure measurement	Pregnant women	Ch 13
Fetal alcohol syndrome	Screen and counsel, alcohol consumption	Pregnant women	Ch 5
Chlamydial infection	Smear, culture, or analysis	Pregnant or high-risk women	Ch 60
Perinatal morbidity and mortality	Single prenatal ultrasound	Pregnant women	Ch 1
Neural tube defects	Maternal serum alpha-fetoprotein/ ultrasound, amniocentesis	Pregnant women	Ch 7
Down syndrome	Triple screening and counselling	Pregnant women <35 yrs	Ch 8
Iron deficiency anemia in infants	Counselling parents on breast feeding	Pregnant women (or peripartum period)	Ch 23
<b>High-risk Populations</b>			
D (Rh) sensitization	Repeat D (Rh) antibody screening and immunoglobulin (D Ig) administration	Pregnant women and women undergoing induced abortion or amniocentesis who are antibody negative	Ch 11

<sup>1</sup> See Appendix B for Recommendations not updated since 1979.

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**Perinatal Care – *Concl'd***

<b>CONDITION</b>	<b>MANEUVER</b>	<b>POPULATION</b>	<b>CHAPTER</b>
D (Rh) sensitization	D (Rh) antibody screening and immunoglobulin (D Ig) administration	After delivery of D positive infant	Ch 11
Down syndrome	Genetic screening and counselling	High-risk pregnant women	Ch 8
Hemoglobinopathies	1) Screen for carrier status (complete blood count and hemoglobin electrophoresis); 2) DNA analysis, fetal tissue sample/counselling	1) High-risk pregnant women; 2) Families, parents confirmed carriers	Ch 20

# Neonatal and Well-Baby Care

CONDITION	MANEUVER	POPULATION	CHAPTER
<b>GOOD EVIDENCE TO INCLUDE IN PHE (A RECOMMENDATIONS):<sup>1</sup></b>			
Immunizable infectious disease	Immunizations, Childhood	Infants and children	Ch 33
Hepatitis B	Immunization	Infants and children	Ch 35
Phenylketonuria	Serum phenylalanine screening	Newborns	Ch 17
Unintentional injury	Counselling on home risk factors, poison control	Parents of infants	Ch 24
Infection	Counselling on breast feeding; peripartum interventions to increase frequency of breast feeding	Pregnant women (or peripartum period)	Ch 22
Congenital hip dislocation	Physical exam, hips	Infants	Ch 24
Ophthalmia neonatorum	Ocular prophylaxis	Newborns	Ch 16
Amblyopia	Eye exam	Infants	Ch 24
Hearing impairment	Hearing exam	Infants	Ch 24
Congenital hypothyroidism	Thyroid-stimulating hormone (TSH) test	Neonates	Ch 18
Night-time crying	Anticipatory guidance on systematic ignoring	Parents of infants distressed by crying	Ch 24
<b>High-risk Populations</b>			
Hemoglobinopathies	Hemoglobin electrophoresis	High-risk neonates	Ch 20
<b>FAIR EVIDENCE TO INCLUDE IN PHE (B RECOMMENDATIONS):<sup>1</sup></b>			
Iron deficiency anemia in infants	Counselling parents on breast feeding, iron fortified formula, cereal, supplements	Infants	Ch 23
Disorders of physical growth	Serial height, weight, head circumference measurement	Infants	Ch 24
Delayed mental development	Enquire about developmental milestones	Parents of infants	Ch 24

<sup>1</sup> See Appendix B for Recommendations not updated since 1979.

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**Neonatal and Well-Baby Care – *Concl'd***

<b>CONDITION</b>	<b>MANEUVER</b>	<b>POPULATION</b>	<b>CHAPTER</b>
<b>High-risk Populations</b>			
Iron deficiency anemia	Routine hemoglobin 6-12 mths	High-risk infants	Ch 23
HIV/AIDS	Voluntary HIV antibody screening	Infants of HIV positive women	Ch 58

# Preventive Health Care for Children and Adolescents

CONDITION	MANEUVER	POPULATION	CHAPTER
<b>GOOD EVIDENCE TO INCLUDE IN PHE (A RECOMMENDATIONS):<sup>1</sup></b>			
Tobacco-caused disease	Counselling on smoking cessation	Smokers	Ch 43
Dental caries, periodontal disease	Fluoride, toothpaste or supplement, brushing teeth	General population	Ch 36 Ch 37
Hearing impairment	Noise control and hearing protection	General population	Ch 80
Hepatitis B	Immunization	Children and adolescents	Ch 35
<b>High-risk Populations</b>			
All-cause morbidity and mortality	Referral day care or preschool programs	Disadvantaged children	Ch 32
Child maltreatment	Home visits	High-risk families	Ch 29
Influenza	Amantadine chemoprophylaxis	High-risk or unvaccinated individuals exposed to index case	Ch 61
Tuberculosis	INH prophylaxis	Household contacts and skin test converters	Ch 62
HIV/AIDS, gonorrhea, chlamydia	Screening for sexually transmitted disease	High-risk populations	Ch 58 Ch 59 Ch 60
<b>FAIR EVIDENCE TO INCLUDE IN PHE (B RECOMMENDATIONS):<sup>1</sup></b>			
MVA injury	Counselling on restraint use and avoidance drinking and driving	General population	Ch 44
Tobacco-caused disease	Counselling to prevent smoking initiation	Children and adolescents	Ch 43
Tobacco-caused disease	Referral to validated cessation program	Smokers	Ch 43
Household and recreational injury	Counselling on home risk factors, poisoning	Children; parents	Ch 28
Vision problems	Visual acuity testing	Preschool children	Ch 27

<sup>1</sup> See Appendix B for Recommendations not updated since 1979.

**Preventive Health Care for Children and Adolescents – *Concl'd***

<b>CONDITION</b>	<b>MANEUVER</b>	<b>POPULATION</b>	<b>CHAPTER</b>
Unintended pregnancy; STDs	Counselling, sexual activity, contraception	Adolescents	Ch 46
Congenital rubella syndrome	Screen and vaccinate or universal vaccination	Non-pregnant women of child-bearing age	Ch 12
All-cause mortality and morbidity	Moderate physical activity	General population	Ch 47
Problem drinking	Case finding and counselling	General population	Ch 42
Adverse consequences, children of alcoholics	Children of Alcoholics Screening Test (CAST)	General population	Ch 41
Skin cancer	Counselling, Sun exposure, clothing	General population	Ch 70
<b>High-risk Populations</b>			
Iron deficiency anemia	Routine hemoglobin	Disadvantaged children	Ch 32
Cystic fibrosis (CF)	Sweat test	Siblings of children with CF	Ch 19
Cystic fibrosis	DNA analysis for carrier status	Siblings of children with CF	Ch 19
Lead exposure	Blood lead screening	High-risk children	Ch 25

# Preventive Health Care for Adults

CONDITION	MANEUVER	POPULATION	CHAPTER
<b>GOOD EVIDENCE TO INCLUDE IN PHE (A RECOMMENDATIONS):<sup>1</sup></b>			
Tobacco-caused disease	Counselling on smoking cessation and offer of nicotine replacement therapy	Smokers	Ch 43 Ch 69 Ch 71 Ch 3 <sup>2</sup>
Neural tube defects	Folic acid supplementation	Women capable of becoming pregnant	Ch 7 <sup>2</sup>
Hearing impairment	Noise control and hearing protection	General population	Ch 80
Breast cancer	Mammography and clinical exam	Women aged 50-69	Ch 65 <sup>2</sup>
Dental caries, periodontal disease	Fluoride, toothpaste or supplement, brushing and flossing teeth	General population	Ch 36 Ch 37
<b>High-risk Populations</b>			
HIV/AIDS	Voluntary HIV antibody screening	High-risk populations	Ch 58
Child maltreatment	Home visits	High-risk families	Ch 29
Progressive renal disease	Urine dipstick	Adults with IDDM	Ch 38
Gonorrhea	Gram stain/culture cervical or urethral smear	High-risk groups	Ch 59
Influenza	Amantadine chemoprophylaxis	Individuals exposed to index case	Ch 61
Influenza	Outreach strategies to reach high-risk groups	Specific subgroups (e.g. diabetics, chronic heart disease)	Ch 61
Tuberculosis	Mantoux tuberculin skin test	High-risk groups	Ch 62
Tuberculosis	INH prophylaxis	Household contacts and skin test converters	Ch 62

<sup>1</sup> See Appendix B for Recommendations not updated since 1979.

<sup>2</sup> Maneuvers that are gender-specific



## Preventive Health Care for Adults – *Cont'd*

CONDITION	MANEUVER	POPULATION	CHAPTER
<b>FAIR EVIDENCE TO INCLUDE IN PHE (B RECOMMENDATIONS):<sup>1</sup></b>			
Hypertension	Blood pressure measurement	Adults	Ch 53
MVA injury	Counsel, restraint use	General population	Ch 44
All-cause mortality and morbidity	Moderate physical activity	General population	Ch 47
Tobacco-related disease	Refer to validated cessation programs after cessation advice	Smokers	Ch 43
Diet-related illness	Counselling on adverse nutritional habits	Adults	Ch 49
Problem drinking	Case finding and counselling	General population	Ch 42
Coronary heart disease	General dietary advice on fat and cholesterol	Males 30-69 yrs	Ch 54 <sup>2</sup>
Cervical cancer	Papanicolaou smear	Women	Ch 73 <sup>2</sup>
Congenital rubella syndrome	Screen and vaccinate or universal vaccination	Non-pregnant women of child-bearing age	Ch 12 <sup>2</sup>
Osteoporotic fractures (and side effects)	Counselling, hormone replacement therapy	Perimenopausal women	Ch 52 <sup>2</sup>
Gonorrhea	Counselling, Educational materials	General population	Ch 59
Skin cancer	Counselling, sun exposure, clothing	General population	Ch 70
<b>High-risk Populations</b>			
Chlamydial infection	Smear, culture or analysis	High-risk women	Ch 60 <sup>2</sup>
Tuberculosis	INH prophylaxis	High-risk sub-groups	Ch 62
Influenza	Immunization, annual	High-risk groups	Ch 61
Colorectal cancer	Colonoscopy	Those with cancer family syndrome	Ch 66

<sup>1</sup> See Appendix B for Recommendations not updated since 1979.

<sup>2</sup> Maneuvers that are gender-specific

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**Preventive Health Care for Adults – *Concl'd***

<b>CONDITION</b>	<b>MANEUVER</b>	<b>POPULATION</b>	<b>CHAPTER</b>
Diabetic retinopathy	Funduscopy or retinal photography	Diabetics	Ch 78
Lung cancer	Dietary advice on leafy green vegetables and fruit	Smokers	Ch 64
Skin cancer	Physical exam, skin	First degree relative with melanoma	Ch 70

# Additional<sup>1</sup> Preventive Health Care for the Elderly

CONDITION	MANEUVER	POPULATION	CHAPTER
<b>GOOD EVIDENCE TO INCLUDE IN PHE (A RECOMMENDATIONS):<sup>2</sup></b>			
Influenza	Outreach strategies for vaccination	Elderly	Ch 61
<b>High-risk Populations</b>			
Falls/injury	Multidisciplinary post-fall assessment	Elderly	Ch 76
Pneumococcal pneumonia	Immunization	Specific subgroups	Ch 34
<b>FAIR EVIDENCE TO INCLUDE IN PHE (B RECOMMENDATIONS):<sup>2</sup></b>			
Hypertension	Blood pressure measurement	Elderly	Ch 79
Influenza	Immunization, annual	Elderly	Ch 61
Hearing impairment	Enquiry, whispered voice test or audioscope	Elderly	Ch 80
Diminished visual acuity	Snellen sight card	Elderly	Ch 78

<sup>1</sup> Continue appropriate interventions from adult tables.

<sup>2</sup> See Appendix B for Recommendations not updated since 1979.