

What Preventive Services Do You Need?

Take this checklist and ask your doctor which **preventive services** are right for you.

Look on pages 18–25 for more details about how much, how often, and whether you meet the conditions to get these services. Write down any notes (like the date you get the service).

Medicare-covered Preventive Service		Details on page	Notes
<input type="checkbox"/>	Abdominal Aortic Aneurysm Screening	18	
<input type="checkbox"/>	Bone Mass Measurement	18	
<input type="checkbox"/>	Cardiovascular Screenings	18	
	Colorectal Cancer Screenings	19	
<input type="checkbox"/>	Fecal Occult Blood Test	19	
<input type="checkbox"/>	Flexible Sigmoidoscopy	19	
<input type="checkbox"/>	Screening Colonoscopy	19	
<input type="checkbox"/>	Barium Enema	19	
<input type="checkbox"/>	Diabetes Screenings	19	
<input type="checkbox"/>	Diabetes Self-management Training	20	
<input type="checkbox"/>	Flu Shots	21	
<input type="checkbox"/>	Glaucoma Tests	21	
<input type="checkbox"/>	Hepatitis B Shots	21	
<input type="checkbox"/>	Mammogram (screening)	22	
<input type="checkbox"/>	Medical Nutrition Therapy Services	22	
<input type="checkbox"/>	Pap Test and Pelvic Exam (includes breast exam)	23	
<input type="checkbox"/>	Physical Exam (One-time “Welcome to Medicare” physical exam)	23	
<input type="checkbox"/>	Pneumococcal Shot	23	
<input type="checkbox"/>	Prostate Cancer Screenings	23	
<input type="checkbox"/>	Smoking Cessation (counseling to stop smoking)	24	

Visit www.MyMedicare.gov on the web to keep track of your preventive services (see page 96).