

Adolescents (11 to 17 years)

We're here to help you make your health a priority. To get started, use our preventive care checklists highlighting some of the exams, vaccines and screenings that can help you and your loved ones avoid or minimize potential health problems. No matter how healthy you are today, having a discussion with your doctor about preventive care can make a difference in the long run—for you and the people you care about.

EXAMS	AGE / FREQUENCY	\checkmark
Yearly Well Visit with Your Adolescent's Doctor	Annually	
VACCINES	AGE / FREQUENCY	\checkmark
Flu Shot (every fall)	Annually	
Human Papillomavirus (HPV)	11 and above	
Meningococcal Conjugate (MCV4)	11 and above	
Tetanus, Diphtheria, Pertussis (Tdap)	11 and above	
SCREENINGS	AGE / FREQUENCY	\checkmark
Body Mass Index (BMI)	Annually	
Depression	Annually (ask your doctor)	
Hepatitis B	Ask your doctor	
HIV	Ask your doctor	
Sexually Transmitted Disease (Chlamydia, Gonorrhea, Syphilis)	Ask your doctor	
Tobacco Substance and Alcohol Use Counseling	Annually (ask your doctor)	

This is a select list of recommendations. For the full list, please visit the USPSTF website or talk to your doctor: uspreventiveservicestaskforce.org/uspstf/recommendation-topics/uspstf-and-b-recommendations