

# Better Health Better Life



Getting the most out of your health plan





INTRODUCTION.....	1
THE KEYS TO BETTER HEALTH: DIET AND EXERCISE.....	2
WELL CHILD CARE PHYSICIAN OFFICE VISITS.....	2
ADULT PREVENTIVE HEALTH EXAMINATIONS.....	3
CHILDHOOD IMMUNIZATIONS.....	3
ADULT IMMUNIZATIONS.....	3
HEALTH RISK ANALYSIS.....	4
<i>BMI (Body Mass Index).....</i>	4
<i>Blood Pressure Category.....</i>	4
<i>Blood Glucose (Sugar) Fasting.....</i>	5
<i>Total Blood Cholesterol Levels.....</i>	5
<i>LDL (Bad) Cholesterol Levels.....</i>	5
<i>HDL (Good) Cholesterol Levels.....</i>	5
<i>Triglyceride Levels.....</i>	6
EARLY DETECTION OF CANCER AND OTHER CONDITIONS.....	6
BREAST CANCER.....	6
CERVICAL CANCER.....	6
CHLAMYDIA.....	6
COLORECTAL CANCER.....	7
PROSTATE CANCER.....	7
OSTEOPOROSIS.....	7
DISEASE MANAGEMENT.....	8
DIABETES.....	8
<i>Diabetes Self-Management Education.....</i>	8
<i>Self-Monitoring of Blood Glucose.....</i>	8
<i>Diabetes Medications and Supplies.....</i>	9
<i>Screening.....</i>	9
<i>Preventive Measures.....</i>	10
<i>Procedures.....</i>	10
<i>For Women With Diabetes.....</i>	10
ASTHMA.....	10
OVERWEIGHT / OBESITY.....	12
TOBACCO ADDICTION.....	12
FOR MORE INFORMATION.....	12
SCREENING TESTS FOR MEN.....	13
SCREENING TESTS FOR WOMEN.....	14
NOTES.....	15





## Introduction

UHA plans are designed with your better health in mind. We include a wide range of wellness benefits\* including an annual preventive physical examination, tests to identify health risks, and special examinations to detect cancer and other conditions while they are still curable.

Your covered benefits also include educational and treatment programs for risk factors such as tobacco use or obesity, or conditions such as diabetes or asthma, that may lead to serious but avoidable complications.

We urge you to take advantage of these benefits. They'll help you improve your health, stay well, and lead a better life. Please take the time to read this guide and learn about the benefits and services UHA offers to you!

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\* Please note: The co-payment for these covered services may vary depending on your plan. In general, UHA 3000 covers these services fully, while UHA 600 and UHA 2000 may require co-payments. Please refer to your Member Benefits Guide to determine the exact co-payment for your plan.

## The Keys to Better Health: Diet and Exercise

An essential part of wellness is a good diet and regular exercise! They work together to lower your risk of heart disease, decrease the risk of osteoporosis, and they may even lessen your risk of certain cancers.

Even if your weight is ideal, eating well is good for you. The United States Department of Agriculture describes a healthy diet as one that:

- Emphasizes fruits, vegetables, whole grains, and fat-free or low-fat milk and milk products;
- Includes lean meats, poultry, fish, beans, eggs, and nuts; and
- Is low in saturated fats, *trans* fats, cholesterol, salt (sodium), and added sugars.

See their website at: [mypyramid.com](http://mypyramid.com) for more information. The recommendations in their Dietary Guidelines and in *MyPyramid* are for the general public over two years of age.

Above all, find a selection of healthy foods that your family likes and can eat as their usual diet. Serve moderate portions.

Exercise always goes along with a healthy diet. The current recommendation for adults is moderate-intensity activity for 30 minutes on 5 or more days of the week. See the Department of Health and Human Services, Centers for Disease Control and Prevention website for more information: [www.cdc.gov](http://www.cdc.gov). Again, it is important to pick sports or activities that you and your family enjoy and can do together. Here in Hawaii, we are lucky to be able to go outside to enjoy the ocean and mountains all year-round. Remember that walking is free and always available!

## Well Child Care Physician Office Visits

Six (6) Well Child Care Physician Office Visits (one additional visit is covered when a newborn child is discharged within 48 hours of birth) are fully covered for children from birth to one year of age. Two (2) Well Child Care Physician Office visits are fully covered for children from ages one to two. One (1) Well Child Care Physician Office visit per year is fully covered for children from age two through five. One (1) Preventive Medicine Office Visit is fully covered for children from age six through eighteen.

## Adult Preventive Health Examinations

One (1) Adult Preventive Health Examination is fully covered per calendar year.

Preventive Health Examinations are essential tools for maintaining good health. In addition to identification of health risks and early diagnosis of serious illness, they provide an opportunity for members to form a relationship with a personal physician who can guide them as they seek to remain well.

Family Physicians, Pediatricians, General Internists, and Obstetrician/ Gynecologists are trained to perform this function and are, therefore, best suited to be your Primary Physician. Many adult women use either a Family Physician or a General Internist as well as a Gynecologist/Obstetrician as Primary Physicians. If this is true in your case, then you should make sure they share their findings and test results.

We have developed an age and gender related checklist of essential information that should be completed during Adult Preventive Health Examinations. The Screening Tests for Men and Screening Tests for Women checklists are included in this guide. If you need additional forms, they are available at [uhahealth.com](http://uhahealth.com), or by calling UHA Health Care Services at 532-4006, or 800-458-4600, extension 300, from the neighbor islands. Please take this with you and ask your physician to fill it out and give you a copy for your records. This checklist can also be used to keep other physicians apprised of the results of your Preventive Health Examination.

## Childhood Immunizations

All ACIP (Advisory Committee on Immunization Practices [www.cdc.gov/nip/acip](http://www.cdc.gov/nip/acip)) childhood and adolescent recommended immunizations are covered at 100%; there is no co-payment or coinsurance for all UHA plans.

## Adult Immunizations

All adults should receive the immunizations recommended by the Department of Health and Human Services Centers For Disease Control and Prevention ([www.cdc.gov/nip](http://www.cdc.gov/nip)) unless they are contraindicated.\*

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## ●●● Health Risk Analysis

Identifying health risks is an important part of your preventive health examination. There are several factors that are known to increase the risk of heart disease, stroke, and other life-threatening illnesses. These risk factors may be controlled or even eliminated by proper and timely treatment, so identifying them and starting treatment is important.

1. Obesity: During your preventive medicine examination, your doctor will check your height and weight and use these to calculate your BMI. Compare your BMI to the standards below.

### BMI (Body Mass Index)

Underweight	Less than 18.5
Normal	18.5 to 24.9
Overweight	25.0 to 29.9
Obese	30 to 40
Morbid Obesity	40 or greater

2. Hypertension, or high blood pressure, causes stress on arteries resulting in heart disease, stroke and, at times, kidney failure. Good control of blood pressure can reduce these risks. Your doctor should check your blood pressure as part of your preventive health examination. Compare your blood pressure with the standards below.

### Blood Pressure Category

	Systolic (mm Hg)		Diastolic (mm Hg)
Normal	Less than 120	and	Less than 80
Pre-hypertension	120 to 139	or	80 to 89
High			
Stage 1	140 to 159	or	90 to 99
State 2	160 or higher	or	100 or higher

- Diabetes Mellitus results in higher-than-normal levels of sugar in the blood. It increases the risk of heart disease, stroke, kidney failure, blindness and amputation (loss of an arm or leg). Diabetes Mellitus can be detected by measuring the level of sugar in the blood.

#### Blood Glucose (Sugar) Fasting

Non Diabetes	70 to 100
Diabetes	More than 100

- Dyslipidemia includes elevated total cholesterol, elevated LDL (bad) cholesterol, low levels of HDL (good) cholesterol and/or elevated levels of triglycerides. These abnormalities can be determined by a blood test as part of your preventive health examination. Dyslipidemia can lead to heart disease, stroke, and other ailments related to clogged arteries. Dyslipidemia is correctable by diet, exercise, weight loss, and, if these fail, medication. Compare your cholesterol levels with the standards below.

#### Total Blood Cholesterol Levels

Desirable	Less than 200 mg/dL
Borderline high risk	200 to 239 mg/dL
High Level	$\geq 240$ mg/dL

#### LDL (Bad) Cholesterol Levels

Optimal	Less than 100 mg/dL
Near optimal / above optimal	100 to 129 mg/dL
Borderline high	130 to 159 mg/dL
High	160 to 189 mg/dL
Very high	190 mg/dL and above

#### HDL (Good) Cholesterol Levels

Average man range	40 to 50 mg/dL
Average woman range	50 to 60 mg/dL

### Triglyceride Levels

Normal	Less than 150 mg/dL
Borderline high	150 to 199 mg/dL
High	200 to 499 mg/dL
Very high	500 mg/dL or higher

5. Smoking: use of tobacco is a well-known cause of heart disease, stroke, lung and other cancers, chronic lung disease, mouth and stomach ulcers, impotence, and cataracts.

## Early Detection Of Cancer And Other Conditions

Detecting cancers or other diseases while they are still treatable is an essential part of prevention. The diseases for which early detection tests are recommended include:

### Breast Cancer

Mammography, when performed according to United States Preventive Services Task Force (USPSTF) guidelines, can identify breast cancers in an early state, improving chances of cure. It is recommended that women have a mammography initially at 40 years of age and every one to two years thereafter.\*

### Cervical Cancer

The PAP smear, or cervical cancer screening test, requires a pelvic examination. It can identify cancers of the cervix at an early state, or even before they become cancerous, and allow for early treatment and a much better outcome. Cervical Cancer Screening should begin within three years of sexual activity, or age 21 (whichever comes first), and continue thereafter at least every three years.\*

### Chlamydia

This is a sexually transmitted disease, which may not be symptomatic and might, therefore, go unnoticed. In women, unrecognized Chlamydia can cause pelvic problems including the inability to have children. Screening for this disease allows it to be recognized and treated before it can lead to problems. Screening should begin with sexual activity and continue thereafter until 25 years of age.\*

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## Colorectal Cancer

Cancer of the rectum and large bowel, or colon, is a common cancer that can be prevented by the removal of polyps, which are precancerous lesions, or cured if a cancer is identified early. The USPSTF strongly recommends that screening begin at 50 years of age. It can be done in one of three ways:

1. Fecal Occult Blood Testing (FOBT) detects blood in the stool which may be an early sign of colon cancer. This test should be a part of your annual preventive examination.\*
2. Sigmoidoscopy, which allows direct examination of the rectum and distal portion of the large bowel, is a covered benefit if it is done as part of your preventive examination every 5 years.\*
3. Colonoscopy, which allows the direct examination of the entire colon, is also a covered benefit if done as a part of your preventive examination every 10 years.\*

## Prostate Cancer

Prostate Specific Antigen (PSA) is a substance that, when elevated, may signify that a cancer exists in the prostate gland. The PSA, plus a digital rectal examination, are the two screening tests available for prostate cancer. One PSA screening test per calendar year is covered for men age 50 or older.\*

## Osteoporosis

A consequence of aging, especially in women who are no longer menstruating, osteoporosis may result in fractures of the spine, hips and other bones with minimal trauma. It occurs less commonly in men. Osteoporosis can be avoided with treatment, but only if your doctor knows about it. The screening test for this is a special x-ray called central Dexascan. This should be done routinely in women who are over 65 years of age and is a covered benefit for them.\* A central Dexascan may also be done in selected younger women and in men with certain risk factors, after prior authorization is obtained.

Also available are peripheral Dexascans and ultrasound examinations of the heel. These may be performed without prior authorization in individuals between 50 and 65 years of age who do not have special requirements. If these screening tests are positive, a central Dexascan should be performed to verify the presence of early osteoporosis.

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## Disease Management

UHA has special programs for members who have chronic illnesses that are common and have serious complications. These treatment programs have been shown to be effective in preventing those complications. These programs include:

### Diabetes

Diabetes, or more accurately Diabetes Mellitus, occurs in individuals who either don't make enough insulin, or who are resistant to the insulin they make. As a result, the level of glucose or sugar in their blood becomes elevated either after a meal or during a fasting state. There are two types of Diabetes: I and II.

- Type I is unusual and usually diagnosed in children and young adults. Patients are often thin. Insulin is required for treatment.
- Type II is inherited and is very common in Hawaii. It is almost always associated with being overweight or obese. It is often reversed by weight loss and exercise.

While not curable, both types can be controlled so that the likelihood of complications, such as blindness, heart disease, stroke, gangrene, and kidney failure, is reduced significantly. The key to avoiding complications is Self-Management.

### Diabetes Self-Management Education

To take control, you must first become knowledgeable. That's why UHA recommends and provides fully covered Diabetes Self-Management Education classes as a benefit. To make arrangements to attend a class, please call UHA Health Care Services at 532-4006, or 800-458-4600, extension 300, from the neighbor islands. We will refer you to a Certified Diabetic Educator.

### Self-Monitoring of Blood Glucose

The next step in achieving good control is learning how to check your own blood sugar. This is one of the things you will learn in Diabetes Self-Management Classes. UHA will help you obtain, at no cost to you, a glucose meter, testing strips for the meter and lancets (needles).

Another way to check your diabetes control is by a blood test called Hemoglobin A1c. It measures what your blood sugar levels have been over a period of time rather than what it is at the time of the test and is, for that reason, a more accurate indicator of good or bad control. A Hemoglobin A1c level less than 7 represents good control; between 7 and 9 fair control; above 9 poor control. Diabetics should have a Hemoglobin A1c level tested periodically.

### Diabetes Medications and Supplies

Many people are able to control their Diabetes with diet and exercise. Others may need oral hypoglycemic medications and others, insulin. This is a decision you and your physician will make based on how well your blood sugar is controlled.

With the help of diabetes experts, we have identified the most cost effective medications and placed them on the UHA Preferred Drug List. The advantage to you for using one of these drugs is that the co-payment is lower. If you are taking a drug that is not on the UHA Preferred Drug List, please ask your doctor if one of the medications on the UHA Preferred Drug List would be appropriate for you so that your costs will be less.

If you have questions regarding the UHA preferred Drug List, please call UHA Health Care Services at 532-4006, or 800-458-4600, extension 300, from the neighbor islands, or visit our website at [www.uhahealth.com](http://www.uhahealth.com).

Also available without co-payments are diabetic supplies including self-monitoring strips and insulin syringes and needles.

The Hawaii State Department of Health, recognizing the devastating impact Diabetes has on our population, has developed practice standards of care that identify the services all diabetics should receive. A summary of these practice standards is included in this booklet. If you are diabetic or have a family history of diabetes please review these standards.

If there are services on this list that have not been provided, be sure to discuss them with your physician at your next visit. Also, you may call UHA Health Care Services at 532-4006, or 800-458-4600, extension 300, from the neighbor islands, and we will help you arrange for their completion.

#### Screening

1. Complete Foot Exam Visual inspection and neurovascular examination	At least twice a year
2. Dilated Retinal Exam By an ophthalmologist or optometrist knowledgeable and experienced in diagnosing diabetic retinopathy	Annually
3. Diabetic Nephropathy (kidney failure) Screening Urine microalbumin	Annually
4. Depression Screening	At least twice a year

### Preventive Measures

1. Influenza immunization	Annually
2. Pneumococcal immunization	At diagnosis if not already vaccinated
3. Aspirin prophylaxis	Between ages 21-39 with heart disease risk and for all over age 40 if no contradictions
4. Tobacco use assessment	Smokers: ask and advise each visit Non-smokers: ask and advise annually
5. Oral/Dental examination*	Optimally every 6 months, at least annually

\*Requires separate dental coverage

### Procedures

1. Diabetes Self-Management Education	At diagnosis and annually
2. Self-Monitoring Blood Glucose	Encouraged in all patients, individualized to reach and maintain goals
3. A1c- (hemoglobin A1c or HbA1c)	At least twice a year
4. Blood pressure	Every office visit
5. Cholesterol (lipid panel)	Annually, if in targets

### For Women With Diabetes

1. Preconception Counseling	At initial visit for all women of child bearing age or at approach of child bearing age
2. Gestational Diabetes—any degree of glucose intolerance during pregnancy	Screen at 24-28 weeks' gestation Postpartum: test at >6 weeks' postpartum and if normal, annually for 3 years

## Asthma

Asthma is common in Hawaii. In fact, it is the most common chronic disease among Hawaii's children. Uncontrolled asthma may result in emergency room visits and hospitalizations. Asthma may also interfere with activities such as team sports, school and work if not optimally controlled.

It is however, controllable with drugs that are used during an attack (rescue drugs) and those that are used regularly to prevent attacks (controllers).

To determine if your asthma is optimally controlled answer the following questions:

1. I have missed work or school because of my asthma during the past 12 months.  
Yes\_\_\_ No\_\_\_ How many days? \_\_\_\_\_
2. Sometimes I avoid exercising or taking part in sports like jogging, swimming, tennis or aerobics because I have trouble breathing or I cough.  
Yes\_\_\_ No\_\_\_ How often? \_\_\_\_\_ per month
3. At times I am unable to sleep through the night without coughing attacks or shortness of breath.  
Yes\_\_\_ No\_\_\_ How often? \_\_\_\_\_ per month
4. I have received emergency care for my asthma at least once during the past 12 months.  
Yes\_\_\_ No\_\_\_ How many visits? \_\_\_\_\_
5. I had one or more overnight hospitalizations due to breathing problems in the past year.  
Yes\_\_\_ No\_\_\_ How many events? \_\_\_\_\_
6. I feel like I use my asthma inhaler too often.  
Yes\_\_\_ No\_\_\_ How often? \_\_\_\_\_ per week \_\_\_\_\_ per month
7. My asthma medicine doesn't control my asthma.  
Yes\_\_\_ No\_\_\_
8. My asthma controls my life more than I would like.  
Yes\_\_\_ No\_\_\_

If you answered yes to any of the questions, then your asthma is not controlled optimally and you should consult your physician or call UHA Health Care Services at 532-4006, or 800-458-4600, extension 300, from the neighbor islands, to discuss the next steps to achieve optimum control. These steps might include:

1. Asthma Education Classes

As with other chronic illnesses, Asthma is best controlled when the person with the illness is knowledgeable as to its causes symptoms and treatment. So, UHA has made Asthma Education a fully covered benefit! To take advantage of this benefit call UHA Health Care Services at 532-4006, or 800-458-4600, extension 300, from the neighbor islands.

2. A change in medications

If a change in medications is necessary, we will work with your doctor to make these changes or refer you to an asthma specialist for help.

## Overweight / Obesity

To help combat this very widespread and serious health problem, UHA is partnering with Weight Watchers® to provide nutrition counseling to UHA members who are overweight or obese. The introductory program runs for 10 weeks during which participants attend weekly half-hour meetings conducted by a Weight Watchers® facilitator at locations throughout the community and on all islands. Upon successful completion of the Program, participants will receive a rebate for the cost of the program. This benefit is limited to one 10-week Program per calendar year. To inquire about this program, please call UHA Health Care Services at 532-4006, or 800-458-4600, extension 300, from the neighbor islands.

**Note: Limitations apply; requires completion of the 10-week program within 3 months for benefits to apply; non-completion will result in the expiration of the rebate.**

## Tobacco Addiction

The solution to this risk factor is straightforward: just quit!

Unfortunately, it is not easy to quit once addicted. Clearly, those who are most successful in doing so have taken smoking cessation classes and use nicotine replacement products.

Both are covered by UHA. We will reimburse you up to \$100 toward the cost of the classes and also for an 8-week supply of nicotine patches at \$4 per day. The prescription drug Zyban® (or its more cost-effective generic equivalent bupropion), often used as an aid to quitting smoking, is covered under your drug plan.

The smoking cessation benefit can be used once a year.

## For More Information

UHA is committed to helping you live a better, healthier life by providing you with the tools you need to take control of your health. But remember, the best way to stay healthy is to live a healthy lifestyle. Exercise, eat well, control risk factors, and keep informed. If you have questions or need more information about UHA's wellness and prevention benefits, please go to our website at [www.uhahealth.com](http://www.uhahealth.com), or call the Health Care Services department at 532-4006, or 800-458-4600, extension 300, from the neighbor islands.



## Screening Tests for Men

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date of Birth

### Checklist For Your Next Examination

**Dyslipidemia Screening:** Have your cholesterol checked at least every five years, starting at age 35. If you smoke, have diabetes, or heart disease runs in your family, start having your cholesterol checked at age 20.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**High Blood Pressure Screening:** Have your blood pressure checked at least every two years.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Colorectal Cancer Screening:** Begin regular screening for colorectal cancer starting at age 50. Your doctor can help you decide which test is right for you. How often you need to be tested will depend on which test you have.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Depression:** If you've felt "down," sad or hopeless, or felt little interest or pleasure in doing things for two weeks straight, talk to your doctor about whether you should be screened for depression.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Diabetes Screening:** Have a test to screen for diabetes if you have high blood pressure or high cholesterol.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Prostate Cancer Screening:** Talk to your doctor about the possible benefit and harm of prostate cancer screening if you are considering having a prostate-specific antigen (PSA) test or digital rectal examination (DRE).

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Sexually Transmitted Disease Screening:** Talk to your doctor to see whether you should be screened for sexually transmitted diseases, such as HIV.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

*Guidelines adopted from the Department of Health and Human Services Agency for Healthcare Research and Quality*

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## Screening Tests for Women

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date of Birth

### Checklist For Your Next Examination

**High Blood Pressure Screening:** Have your blood pressure checked at least every two years.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Chlamydia and Tests Other Sexually Transmitted Disease Screening:** Have a test for Chlamydia if you are 25 or younger and sexually active. If you are older, talk to your doctor to see whether you should be tested. Also, talk to your doctor to see whether you should be tested for other sexually transmitted diseases.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Dyslipidemia Screening:** Have your cholesterol checked at least every five years, starting at age 45. If you smoke, have diabetes, or heart disease runs in your family, start having your cholesterol checked at age 20.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Colorectal Cancer Screening:** Begin regular screening for colorectal cancer starting at age 50. Your doctor can help you decide which test is right for you.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Depression:** If you've felt "down," sad or hopeless, or felt little interest or pleasure in doing things for two weeks straight, talk to your doctor about whether you should be screened for depression.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Diabetes Screening:** Have a test to screen for diabetes if you have high blood pressure or high cholesterol.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Breast Cancer Screening:** Have a mammogram every one to two years starting at age 40.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Osteoporosis Screening:** Have a bone density test at age 65 to screen for osteoporosis (thinning of the bones). If you are between the ages of 60 and 64 and weigh 154 pounds or less, talk to your doctor about whether you should be tested.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

**Cervical Cancer Screening:** Have a Pap smear every one to three years.

\_\_\_\_\_  
*Date of last screening*

\_\_\_\_\_  
*Next screening due*

*Guidelines adopted from the Department of Health and Human Services Agency for Healthcare Research and Quality*

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