

Summary of Clinical Preventive Services Guidelines for Young Adults Ages 18-25 (CPSG-YA Summary) UCSF Division of Adolescent and Young Adult Medicine

Updated September 28th, 2020

Preventive Services	All (√)	At Risk (+)	Screening Test/Procedure and Other Notes
Nutrition/Exercise/Obesity			
Hypertension/Blood Pressure	√		Screen every 3-5 years with BP < 130/85mm Hg w/ no other risks
Dyslipidemia Screening	√		√ Bright Futures once between 18-21 y/o; USPSTF insufficient evidence
Obesity/BMI	√		[Weight (lb.)/Height (in)] x 703
Healthy diet & physical activity		+	Intensive behavioral counseling
Substance Use			
Alcohol (screening & counseling)	√		NIAA Screening; AUDIT; √ Bright Futures
Tobacco (screening and counseling) for non-pregnant adults	√		5-A Framework (Ask, Advise, Assess, Assist, Arrange); should undergo behavioral interventions
Tobacco (screening and counseling) for pregnant women	√		5-A Framework (Ask, Advise, Assess, Assist, Arrange); should undergo behavioral interventions
Unhealthy Drug Use (screening & counseling)	√		√ Bright Futures* and ACOG**, USPSTF insufficient evidence
Mental Health / Depression			
Depression (screening & treatment)	√		Screening instruments: PHQ, EPDS
Suicide Screening	√		√ Bright Futures and ACOG, USPSTF insufficient evidence
Safety / Violence			
Family/Partner Violence	√		HITS; OAS/OVAT; STaT; HARK; CTQ-SF; and WAST
Fighting	√		√ Bright Futures and ACOG
Helmets	√		√ Bright Futures and ACOG
Seat Belts	√		√ Bright Futures and ACOG
Guns	√		√ Bright Futures and ACOG
Bullying	√		Bright Futures only
Reproductive Health			
HIV	√		HIV Screening
STI (screening & counseling)		+	High-Intensity Counseling Interventions
Syphilis		+	RPR or VDRL followed by TPPA or FTA-ABS if first test result is positive
Gonorrhea (females)		+	NAATs; test if ≤ 24 and sexually active or if ≥ 25 and at increased risk
Chlamydia (females)		+	NAATs; test if ≤ 24 and sexually active or if ≥ 25 and at increased risk
Chlamydia & Gonorrhea (male)		+	√ Bright Futures, USPSTF insufficient evidence
Birth Control Methods	√	+	√ ACOG, + Bright Futures
Pregnancy (counseling)		+	+ Bright Futures
Folic Acid		+	Women planning/capable of pregnancy should take folic acid daily
Cancer Screening			
Cervical Cancer		+	Females aged ≥ 21: Cytology (pap smear) every 3 years
Skin Cancer (counseling)		+	Counsel those aged 10-24 years with fair skin on reducing UV exposure
Testicular Cancer (self-clinician exam)	√		√ Bright Futures for all males 18-21, USPSTF recommends against
BRCA-Related Cancer		+	Family Hx of breast, ovarian, tubal, or peritoneal cancer
Infectious Diseases including CDC Immunization Recommendations			
Td/Tdap	√		1 dose Tdap, then Td booster every 10 years
Human Papillomavirus	√		HPV vaccine for male and females up to age 26; 2-3 lifetime doses
Varicella (Live Vaccine)	√		2 lifetime doses at least 4 weeks apart ***See below
Measles, Mumps, Rubella	√		1 or 2 lifetime doses at least 4 weeks apart
Influenza	√		1 dose annually
Pneumococcal		+	PCV13: 1 lifetime dose; PPSV23: 1-2 lifetime doses
Hepatitis A	√		Havrix or Vaqta: 2 doses; Twinrix (18+ y/o): 3-4 doses
Hepatitis B	√		Recombivax HB (11-15 y/o): 2 doses; Heplisav-B/Twinrix (18+ y/o): 2-3 lifetime doses.
Hepatitis C Screening	√		Anti-HCV antibody testing, polymerase chain reaction testing
Meningococcal Quadrivalent	√		2 lifetime doses
Serogroup B Meningococcal		+	Men B vaccine (2 or 3 dose series) to those 16-23 years old

Bold = US Preventive Services Task Force (USPSTF) A or B Recommendation or CDC recommendations for immunizations.
 Current evidence is insufficient to assess the balance of benefits and harms of service. √ = All adolescents + = Adolescents at risk. For more information, please view the [appendix](#), and visit the [official website](#).
 * **Bright Futures**: recommendations are for annual visits, up to age 21.
 ** [American Congress of Obstetricians and Gynecologists \(ACOG\)](#)

recommendations, up to age 26.
 *** The varicella vaccine should NOT be given to patients with these [contraindications](#).
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