Intervention	A	B	C	D	I
Cervical Cancer (Screening)					
Women who have been sexually active and have a cervix	XX				
Women >65 for cervical cancer if they have had adequate recent screening with normal Pap smears and are not otherwise at high risk for cervical cancer				XX	
Women who have had a total hysterectomy for benign disease.				XX	
Routine use of new technologies to screen for cervical cancer.					XX
Routine use of *human papillomavirus* (HPV) testing as a primary screening test for cervical cancer.					XX
Skin cancer (Screening)					
Routine counseling by primary care clinicians to prevent skin cancer.					XX
Testicular Cancer (screening)					
Routine screening for testicular cancer in asymptomatic adolescent and adult males.				XX	
Cardiovascular Disorders (Heart and Vascular Diseases) (screening)					
Routine screening for lipid disorders in infants, children, adolescents, or young adults (up to age 20)					XX
Screening for high blood pressure in adults aged 18 and older	XX				
Development and Behavior (screening)					
Routine use of brief, formal screening instruments in primary care to detect speech and language delay in children up to 5 years of age.					XX
Infectious Diseases					
Screening for chlamydial infection for all sexually active non-pregnant young women aged 24 and younger and for older non-pregnant women who are at increased risk.	XX				
Screening for chlamydial infection for all pregnant women aged 24 and younger and for older pregnant women who are at increased risk.		XX			
Routinely providing screening for chlamydial infection for women aged 25 and older, whether or not they are pregnant, if they are not at increased risk.			XX		
To assess the balance of benefits and harms of screening for chlamydial infection for men.					XX
Recommends that clinicians screen all sexually active women, including those who are pregnant, for gonorrhea infection if they are at increased risk for infection (that is, if they are young or have other individual or population risk factors; go to Clinical Considerations for further discussion of risk factors).		XX			
Routine screening for gonorrhea infection in men at increased risk for infection (go to Clinical Considerations for discussion of risk factors).					XX
Routine screening for gonorrhea infection in men and women who are at low risk for infection (go to Clinical Considerations for discussion of risk factors).				XX	
Routine screening for gonorrhea infection in pregnant women who are not at increased risk for infection (go to Clinical Considerations for discussion of risk factors).					XX
Prophylactic ocular topical medication for all newborns against gonococcal ophthalmia neonatorum.	XX				
Routine serological screening for herpes simplex virus (HSV) in asymptomatic pregnant women at any time during pregnancy to prevent neonatal HSV infection.				XX	
Routine serological screening for HSV in asymptomatic adolescents and adults.				XX	
Screen for human immunodeficiency virus (HIV) all adolescents and adults at increased risk for HIV infection (go to Clinical Considerations for discussion of risk factors).	XX				
routinely screening for HIV adolescents and adults who are not at increased risk for HIV infection (go to Clinical Considerations for discussion of risk factors).			XX		

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Recommends high-intensity behavioral counseling to prevent sexually transmitted infections (STIs) for all sexually active adolescents and for adults at increased risk for STIs.		XX			
Benefits and harms of behavioral counseling to prevent STIs in non-sexually-active adolescents and in adults not at increased risk for STIs.					XX
Injury Prevention					
Routine screening of parents or guardians for the physical abuse or neglect of children, of women for intimate partner violence, or of older adults or their caregivers for elder abuse.					XX
To assess the incremental benefit, beyond the efficacy of legislation and community-based interventions, of counseling in the primary care setting, in improving rates of proper use of motor vehicle occupant restraints (child safety seats, booster seats, and lap-and-shoulder belts).					XX
To assess the balance of benefits and harms of routine counseling of all patients in the primary care setting to reduce driving while under the influence of alcohol or riding with drivers who are alcohol-impaired.					XX
Mental Health Conditions and Substance Abuse					
Screening and behavioral counseling interventions to reduce alcohol misuse (go to Clinical Considerations) by adults, including pregnant women, in primary care settings.		XX			
Screening and behavioral counseling interventions to prevent or reduce alcohol misuse by adolescents in primary care settings.					XX
Screening of adolescents (12-18 years of age) for major depressive disorder (MDD) when systems are in place to ensure accurate diagnosis, psychotherapy (cognitive-behavioral or interpersonal), and follow-up.		XX			
To assess the balance of benefits and harms of screening of children (7-11 years of age).					XX
To assess the balance of benefits and harms of screening adolescents, adults, and pregnant women for illicit drug use.					XX
Screen all adults for tobacco use and provide tobacco cessation interventions for those who use tobacco products.	XX				
Screen all pregnant women for tobacco use and provide augmented pregnancy-tailored counseling to those who smoke.	XX				
Routine screening for tobacco use or interventions to prevent and treat tobacco use and dependence among children or adolescents.					XX
Routine screening by primary care clinicians to detect suicide risk in the general population.					XX
Metabolic, Nutritional, and Endocrine Conditions					
Primary care clinicians prescribe oral fluoride supplementation at currently recommended doses to preschool children older than 6 months of age whose primary water source is deficient in fluoride.		XX			
Routine risk assessment of preschool children by primary care clinicians for the prevention of dental disease.					XX
Recommend for or against behavioral counseling in primary care settings to promote physical activity.					XX
Routine behavioral counseling to promote a healthy diet in unselected patients in primary care settings.					XX
Intensive behavioral dietary counseling for adult patients with hyperlipidemia and other known risk factors for cardiovascular and diet-related chronic disease. Intensive counseling can be delivered by primary care clinicians or by referral to other specialists, such as nutritionists or dietitians.		XX			
Screening infants for hyperbilirubinemia to prevent chronic bilirubin encephalopathy (select "Clinical Considerations" for suggestions for practice when evidence is insufficient).					XX
Routine screening for iron deficiency anemia in asymptomatic children aged 6 to 12 months.					XX
Screening for iron deficiency anemia in asymptomatic pregnant women.		XX			
Routine iron supplementation for asymptomatic children aged 6 to 12 months who are at increased risk for iron deficiency anemia (go to Clinical Considerations for a discussion of increased risk).		XX			
Routine iron supplementation for asymptomatic children aged 6 to 12 months who are at average risk for iron deficiency anemia.					XX

Routine iron supplementation for non-anemic pregnant women.					XX
Routine screening for elevated blood lead levels in asymptomatic children aged 1 to 5 who are at increased risk. (Go to Clinical Considerations for a discussion of risk.)				XX	
Routine screening for elevated blood lead levels in asymptomatic pregnant women.				XX	
Screen children aged 6 years and older for obesity and offer them or refer them to comprehensive, intensive behavioral interventions to promote improvement in weight status.		XX			
Musculoskeletal Disorders					
Routine screening for developmental dysplasia of the hip in infants as a means to prevent adverse outcomes.[a]					XX
Routine screening of asymptomatic adolescents for idiopathic scoliosis.				XX	
Perinatal Care					
Screening for congenital hypothyroidism (CH) in newborns.	XX				
Screening for phenylketonuria (PKU) in newborns.	XX				
Screening for sickle cell disease in newborns.	XX				
Vision and Hearing Disorders					
Screening for hearing loss in all newborn infants.		XX			
Screening for all children at least once between the ages of 3 and 5 years, to detect the presence of amblyopia or its risk factors.		XX			
Vision screening for children <3 years of age.					XX

Grade Definitions After May 2007

The U.S. Preventive Services Task Force (USPSTF) has updated its definitions of the grades it assigns to recommendations and now includes "suggestions for practice" associated with each grade. The USPSTF has also defined levels of certainty regarding net benefit. These definitions apply to USPSTF recommendations voted on after May 2007.

What the Grades Mean and Suggestions for Practice

Grade	Definition	Suggestions for Practice
A	The USPSTF recommends the service. There is high certainty that the net benefit is substantial.	Offer or provide this service.
B	The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial.	Offer or provide this service.
C	The USPSTF recommends against routinely providing the service. There may be considerations that support providing the service in an individual patient. There is at least moderate certainty that the net benefit is small.	Offer or provide this service only if other considerations support the offering or providing the service in an individual patient.
D	The USPSTF recommends against the service. There is moderate or high certainty that the service has no net benefit or that the harms outweigh the benefits.	Discourage the use of this service.
I Statement	The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of the service. Evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined.	Read the clinical considerations section of USPSTF Recommendation Statement. If the service is offered, patients should understand the uncertainty about the balance of benefits and harms.

http://www.uspreventiveservicestaskforce.org/uspstf/gradespost.htm#brec