

KEY POINTS FOR LIVING A HEALTHY LIFESTYLE

REQUIRED

- Blood pressure screening _____Date
- Blood sugar screening _____Date
- BMI screening _____Date
- Preventive Screening (if due)
- _____Date
- _____Date
- _____Date

KEY POINTS FOR LIVING A HEALTHY LIFESTYLE

RECOMMENDED

- Annual physical _____ Date
- Well women exam _____ Date
- Immunization-Flu _____ Date
- Immunization-Tetanus _____ Date
- Immunization-Pneumonia _____ Date
- Tobacco screening _____ Date
- Depression screening _____ Date