



## Objectives: Periodic Health Assessment

1. Do a periodic health assessment in a proactive or opportunistic manner (e.g. address health maintenance even when patients present with unrelated concerns).
2. In any given patient, selectively adapt the periodic health examination to the patient's specific circumstances.
3. For a patient requesting a test which may not be recommended (e.g. mammography at age 40, PSA testing):
  - a. Inform the patient about the limitations of the screening test (e.g. sensitivity and specificity)
  - b. Counsel the patient about the implications of proceeding with the test
4. Keep up to date with new recommendations for the periodic health examination and critically evaluate their usefulness and application to your practice.
5. Maintain an ongoing record of patients' weights so as to accurately determine if true weight loss or gain has occurred and whether anything needs to be done to investigate suspected pathological weight changes.
6. Do not conduct routine non-evidenced based physical examinations on asymptomatic patients.
7. Include discussion on areas outside of cancer screening which can impact health and well-being, including:
  - a. Exercise and Diet Counselling
  - b. Sun Protection
  - c. Sexually Transmitted Disease Screening and Prevention
  - d. Sexual Dysfunction
  - e. Gender Identity and Sexual Orientation
  - f. Substance Use
  - g. Wills and Healthcare Directives
  - h. Family issues and important life-cycle points (e.g. when children move out, after the birth of a baby)
  - i. Work-life balance
8. With regards to cancer screening:
  - a. In all patients provide the indicated evidence-based screening (according to age group, risk factors etc...) to detect cancer at an early stage (e.g. with PAP tests, mammography, colonoscopy).
  - b. In patients with a distant history of cancer who present with new symptoms (e.g. shortness of breath, neurologic symptoms), include recurrence of metastatic disease in the differential diagnosis.
9. Establish office policies and practices to ensure patient comfort and choice, especially with sensitive examinations (e.g. positioning for PAP, chaperones for genital/rectal exams).
10. In patients with chronic disease, actively inquire about:
  - a. The psychological impact of diagnosis and treatment
  - b. Functional impairment
  - c. Underlying depression or risk of suicide
  - d. Underlying substance use

\*Modified from CFPC's Priority Topic Objectives