



Patients are required to complete preventive health maintenance **prior to evaluation testing**. Please work with your PCP/insurance company to complete preventive health maintenance that applies to you. The list below describes all preventive health maintenance testing that the candidate may have to perform. Please review testing description below to determine which tests you need to complete.

- **Colonoscopy** required for patients:
  - 50 years old or above
  - *Results must state the length of time when a repeat colonoscopy is required*
  - *Cologuard will not be considered as a valid screening option*
- **Yearly Mammogram** required for female patients:
  - 40 years old or above
- **Yearly PAP Smear** required for female patients:
  - 18 years old or above
- **Yearly Dental Clearance** required for all patients
  - Dental clearance form attached- need medical clearance from your Dentist
- **Immunization Records** required for all patients:
  - Hepatitis A x 2 doses (six months apart)→ NOT offered at dialysis
  - Tetanus (TDAP) – required every 10 years→ NOT offered at dialysis
  - Pneumonia – required every 5 years
  - Hepatitis B x 4 doses or have antibodies
  - Flu Shot – required yearly
- **TB Skin Testing Record:** required yearly for all patients

**Please save the above testing and submit when requested by your Transplant Coordinator.**

