CHECKUPS AFTER 70

What the US Preventive Services Task Force (USPSTF) says, from Episode 9.

WHAT THE STUDIES FOUND

☐ 6	**Pap test after 65**	The Task Force recommends against it for women with adequate past screening who are not at high risk (grade D). *(USPSTF, JAMA, 2018)*
☐ 5	**Neck artery scan, no symptoms**	The Task Force recommends against it (grade D). After surgery to clear the artery, 2.4% of patients died or had a stroke within 30 days. *(USPSTF, JAMA, 2021)*
☐ 4	**PSA test at 70 or older**	The Task Force recommends against it (grade D). In a European trial, 20.6% of men over 70 had a false alarm on the first test, against 3.5% under 55. *(USPSTF, JAMA, 2018)*
☐ 3	**Mammogram at 75 or older**	The Task Force calls the evidence insufficient (grade I). In Medicare records, women 75 to 84 who kept screening and who stopped died of breast cancer at the same rate. *(USPSTF, JAMA, 2024; García-Albéniz et al., 2020)*
☐ 2	**Colonoscopy after 75**	From 76 to 85, the Task Force recommends that clinicians selectively offer screening (grade C), weighing overall health, past screening and preferences. *(USPSTF, JAMA, 2021)*
☐ 1	**Bone density scan, women 65+**	The Task Force recommends it with no upper age limit (grade B). In a trial of 12,483 women aged 70 to 85, screening meant 28% fewer hip fractures. *(USPSTF, JAMA, 2025; Shepstone et al., 2018)*

QUESTIONS TO ASK YOUR DOCTOR

- ☐ Do my past Pap tests count as enough screening?
- ☐ With no stroke symptoms, would a neck artery scan help me?
- ☐ Is a PSA test still on my lab slip, and should it be?
- ☐ Does a mammogram still make sense for me at 75 or older?
- ☐ Does another colon screening make sense for me?
- ☐ Have I had a bone density scan, and do I need a repeat?

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