



The U.S. Preventive Services Task Force (USPSTF) makes evidence-based recommendations for preventive services such as screenings, counseling, and preventive medications. These recommendations provide guidance on more than 80 health conditions and are for people without signs or symptoms of a disease.



Listed below are the most impactful final recommendations (new topic to the portfolio, a change in grade, or topics that address the prevention of leading causes of death, and garnered significant attention) and published between January 1, 2022, and December 31, 2022. To find a full list of all recommendations, visit the USPSTF [Recommendations Page](#).

### NEW TOPIC



## SCREENING FOR ANXIETY IN CHILDREN & ADOLESCENTS

- **B Grade** Screen children 8 and older for anxiety.
- **I Statement** There is not enough evidence to recommend for or against screening for anxiety in children 7 or younger.



**Population:** Children and adolescents who have no signs or symptoms of anxiety.

Read the full recommendation statement [here](#).



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Download the [Prevention TaskForce app](#) to identify clinical preventive services for patients.



## SCREENING FOR DEPRESSION & SUICIDE RISK IN CHILDREN & ADOLESCENTS

- **B Grade** Screen children 12 and older for depression.
- **I Statement** There is not enough evidence to recommend for or against screening for depression in children 11 or younger.
- **I Statement** There is not enough evidence to recommend for or against screening for suicide risk in all children and adolescents.



**Population:** Children and adolescents who have no signs or symptoms of depression or suicide risk.

Read the full recommendation statement [here](#).



### ASPIRIN USE TO PREVENT CARDIOVASCULAR DISEASE

- **C Grade** People who are 40 to 59 years old and at higher risk for developing heart disease or stroke should decide together with their clinician if starting aspirin is right for them.
- **D Grade** People who are 60 years and older should not start taking aspirin to prevent a first heart attack or stroke.



**Population:** Adults 40 years and older who do not have a history of CVD, signs or symptoms of CVD, or a higher chance of bleeding.

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Read the full recommendation statement [here](#)

#### Grade Definitions

<b>A</b>	Recommended
<b>B</b>	Recommended
<b>C</b>	Recommendation depends on the patient's situation
<b>D</b>	Not recommended
<b>I Statement</b>	There is not enough evidence to make a recommendation for or against service



### STATIN USE TO PREVENT CARDIOVASCULAR DISEASE

- **B Grade** People who are at high risk between 40 and 75 years of age should take a statin.
- **C Grade** People who are at increased risk, but not at high risk, between 40 and 75 years of age may benefit from statins. They should talk with their clinician and decide together if taking a statin is right for them.
- **I Statement** There is not enough evidence to determine if people 76 years of age and older should start taking a statin to prevent a first heart attack or stroke.



**Population:** Adults ages 40 and older who have never had a stroke or heart attack who have no signs or symptoms of CVD.

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Read the full recommendation statement [here](#)

#### In case you heard...

about our **draft recommendations** on topics related to behavioral health, pregnancy disorders, and HIV, remember this guidance is not final yet. Check the **Task Force's website** for the latest on these recommendations.