



Primary Care Assessment & Screening Standards

PACE Program

1. **Comprehensive Medical Assessment**
 - Initial and every six months

2. **Preventative Health Guidelines**
 - a. National PACE Association Preventative Health Guidelines ([click here](#))
 - b. United States Preventative Health Guidelines unless not consistent with members Goals of Care ([USPSTF](#))

3. **Dementia Screen**
 - Saint Louis University Mental Status Examination
 - Initial and annual on all members over 55 unless **exclusion applies**

4. **Depression Screen**
 - a. >40 year old Geriatric Depression Scale
 - initial and annual
 - b. <40 year old Glasgow Depression Scale
 - as appropriate

5. **Advance Directives Discussion**
 - Initial, annual and as needed

6. **Periodic Medication Review**
 - Initially and every 6 months by Pharmacy or CC Primary Care

7. **Falls Prevention and Management Guideline**

8. **Vision**
 - Annual exam by optometrist unless history of Diabetes Mellitus or significant eye disease and then exam by ophthalmologist as needed

9. **Hearing**
 - Annual hearing check by CC primary care, referral to audiology as needed

10. **Oral**
 - a. Initial evaluation by Dentist for all participants
 - b. Annual screen by Dental for participants with teeth or dentures
 - c. Annual Screen by Primary Care Physician for edentulous participants, those who refuse dental referral or those in palliative care