

Celebrating 40 years of Prevention Guidance

For 40 years, the <u>U.S. Preventive Services Task Force</u> (USPSTF or Task Force) has improved the health of people nationwide by making evidence-based recommendations on preventive services. Clinicians, healthcare professionals, patients, families, and communities all look to the Task Force to help them know what works and what doesn't in preventive care. Join us as we celebrate 40 years of this important work!



1984

1980s

Task Force first convened by the U.S. Department of Health and Human Services (HHS).

1989

First Guide to Clinical Preventive Services published; Task Force invites experts from the scientific community to provide input for the inaugural Guide.

1990s

HHS convenes the second Task Force.

1990

Congress gives authority to the Agency for Healthcare Research and Quality (AHRQ) to provide administrative, research, technical, and dissemination support to the Task Force in the 1998 Public Health Service Act

1998



Third Task Force convened and established continuous operations.





Task Force leads the establishment of methods to develop

Task Force leads the establishment of methods to develop evidence-based guidelines and creates a systematic process aligning with evolving evidence-based principles.

2000s

2005

2001

Task Force <u>solidifies partnerships</u> with national primary care and patient advocacy groups, Federal agencies, and other partners to help inform and disseminate the work of the Task Force.

2006

Task Force launches the Electronic Preventive Services Selector (ePSS), which is now called **Prevention TaskForce**, an application tool to assist primary care clinicians with current recommendations on preventive services. Two years after Prevention TaskForce was created, it became the first app (on iOS) from a federal agency and popular among health and medical apps.

2008

Task Force recommendations are integrated into the Office of Disease Prevention and Health Promotion's <u>MyHealthfinder</u>. platform, a resource to help patients and families stay healthy.

2009

To further its commitment to transparency, the Task Force began to pilot a public comment process on draft materials, which grew to include 4-week comment periods for all draft research plans, recommendation statements, and evidence reviews.

2010s

Patient Protection and Affordable Care Act reinforces AHRQ's support of and the importance of the Task Force and connects Task Force recommendations to coverage requirements.

2010

Task Force issues its **first annual Report to Congress.**

Institute of Medicine (now National Academy of Medicine) issues report "Clinical Practice Guidelines We Can Trust," identifying the USPSTF as a leader and a reference standard for guideline development processes.

2011

Task Force <u>publishes a commentary</u> demonstrating its alignment with the gold standards of clinical practice guideline development and clarifying its role in evaluating the science to identify the most effective preventive services.

2015

Task Force publishes <u>American Journal of Preventive Medicine</u> <u>supplement</u> on updated methods, reinforcing its commitment to continuously advancing its methods of making evidence-based recommendations.

Task Force evaluates its conflict-of- interest policy and <u>publishes</u> <u>best practices from guideline-making bodies</u>, demonstrating its commitment to maintaining transparent, state-of-the-art policies and procedures.

2018









2020

Task Force rebrands and redesigns the ePSS application to Prevention TaskForce. Key features of the redesign include a streamlined user interface, real-time data sync, and one-click access to clinical and full recommendation data.



Task Force reinforces and <u>publishes its commitment to</u> addressing health equity in primary care.



2024

As of this year, the Task Force has recommendations on more than 88 topics.



...And Beyond

Looking ahead to the next 40 years, the Task Force will continue serving as a trusted, valuable resource that primary care clinicians, policymakers, patient groups, professional societies, and patients can depend on to identify what works and does not work to help prevent disease and prolong life.

Learn more about the Task Force's work today at:

www.uspreventiveservicestaskforce.org