

Recommendations for Preventive Pediatric and Adolescent Health Care



This chart combines the Bright Futures/American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care and the National Business Group on Health Life Course Chart: Children & Adolescents. All services for children and adolescents covered under the Affordable Care Act are also included.

AGE ¹	Prenatal ²	Newborn ³	1 Month	2 Months	4 Months	6 Months	9 Months	12 Months	15 Months	18 Months	24 Months	30 Months	3 Years	4-6 Years	7-10 Years	11-12 Years	13-15 Years	16-18 Years	
Alcohol and Drug Use																			Screen pending risk and need
Autism																			
Body Mass Index (BMI)																			
Blood Pressure																			
Cervical Dysplasia/Cancer ⁴																			All females within 3 years of the onset of sexual activity: screen at least once every 3 years but no more than once per calendar year
Contraceptive Use																			Counsel and prescribe as medically indicated
Depression																			Screen beginning age 12
Developmental Screening and Surveillance ⁵																			
Dyslipidemia ⁶																			
Genetic and Endocrine Disorders ⁷																			Re-screen as medically indicated
Gonorrhea medication for eyes																			
Head Circumference																			
Hearing ⁸																			
Immunizations ⁹																			
• Diphtheria, Tetanus, Pertussis [DTaP]																			
• Booster for Diphtheria, Tetanus, Pertussis [Tdap]																			
• Haemophilus influenzae type B [Hib]																			
• Hepatitis A [Hep A]																			
• Hepatitis B [Hep B]																			
• Human papillomavirus [HPV]																			
• Inactivated Poliovirus [IPV]																			
• Influenza [Flu]																			
• Measles, mumps, rubella [MMR]																			
• Meningococcal [MCV4]																			
• Pneumococcal [PCV]																			
• Rotavirus [Rota]																			
• Varicella [Chicken Pox]																			
Iron Deficiency Anemia ¹⁰																			
Iron Supplements ¹¹																			
Lead Levels in Blood ¹²																			
Medical History																			
Motor vehicle-related injury prevention																			
Provision of medications and medical foods																			
Obesity																			
Oral Health ¹³																			
Physical Examination																			
Psychosocial/Behavior Assessment																			
Sexually Transmitted Infections (STIs) ¹⁴																			
• Counseling to prevent STIs																			
• Chlamydia																			
• Gonorrhea																			
• Human Immunodeficiency Virus (HIV)																			
• Syphilis																			
Tobacco Use																			
Tuberculin																			
Vision																			
Weight for Length Measurement																			

■ Screening
 ■ Counseling
 ■ Immunization
 ■ Preventive Treatment
 ■ Preventive Medication
 ■ Counseling & Preventive Medication
 ■ Screening & Preventive Treatment
 ■ Counseling & Screening
 ■ Screening, Counseling & Preventive Medication

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Authors

Berryman P, Campbell KP, Lanza A, Dixon R, Chattopadhyay S, Molinari N, Finch RA, editors. *A Purchaser's Guide to Clinical Preventive Services: Moving Science into Coverage*. Washington, DC: National Business Group on Health; 2006 (updated August 2011). Available online at: www.businessgrouphealth.org/preventive.

- ¹ Ages: The first time a child comes under care, the child should be screened for all items and brought up to date at the earliest possible time.
- ² A prenatal visit is recommended for parents who are at high risk, first-time parents and those that request a conference. The prenatal visit should include a pertinent medical history, discussion of the benefits of breastfeeding and planned method of feeding.
- ³ Every newborn should have an evaluation after birth, breastfeeding encouraged, and instructions and support offered. Every infant should have an evaluation within 3-5 days of birth and within 48-72 hours after discharge from the hospital. The evaluation should include formal breastfeeding evaluation, encouragement and instructions.
- ⁴ All sexually active females should be screened for cervical dysplasia as part of a pelvic examination within 3 years of onset of sexual activity or by age 21, whichever comes first.
- ⁵ American Academy of Pediatrics (AAP) and the American Academy of Neurology recommend that all infants and young children be screened for developmental delays periodically in the context of office-based primary care.
- ⁶ Dyslipidemia is an abnormal amount of lipids (e.g. cholesterol and/or fat) in the blood. In the U.S., this often takes the form of high cholesterol.
- ⁷ For newborns, this includes screening for phenylketonuria (PKU) and congenital hypothyroidism.
- ⁸ All newborns should be screened for hearing.
- ⁹ The immunizations schedule listed on this chart is a graphic representation of recommendations for routine vaccinations at the time the chart was made. Visit the ACIP website at <http://www.cdc.gov/vaccines/recs/acip/default.htm> for up-to-date recommendations.
- ¹⁰ Newborn metabolic and hemoglobin or hematocrit screening should be done according to state law.
- ¹¹ Providing iron supplements to infants aged 6 to 12 months at increased risk of anemia is effective in preventing the depletion of iron stores and the onset of iron deficiency anemia.
- ¹² Screen at any age when deemed medically necessary by a risk assessment, clinical signs or symptoms consistent with elevated blood lead levels, or when other evidence indicates possible lead exposure.
- ¹³ If primary water source is fluoride deficient, consider prescribing oral fluoride supplements.
- ¹⁴ All sexually active patients should be screened for sexually transmitted infections (STIs).
- ¹⁵ Infants born to mothers who are HBsAg-positive should receive the hepatitis B vaccine with HBIG within 12 hours of birth. Infants born to mothers whose HBsAg status is unknown should receive the hepatitis B vaccine with HBIG within 12 hours of birth.
- ¹⁶ Two doses of flu vaccine given at least four weeks apart are recommended for children aged 6 months through 8 years of age who are getting a flu vaccine for the first time.
- ¹⁷ HPV vaccination is recommended for girls 11-12 years old. All women age 11-26 should be vaccinated with the 3 dose series. The vaccine is also licensed and effective for males 9-26 years old.
- ¹⁸ If a child did not receive any or all of the DTap Vaccine series, a single dose of Tdap booster should be given between 7-10 years of age.
- ¹⁹ One dose of MCV is recommended at age 11-12. Teens who receive MCV for the first time at age 13-15 years require a booster between 16-18 years.