

	Clinical Indicator	Infancy					Childhood													Adolescenc										
		Birth to 1 mo	2-3 mo	4-5 mo	6-8 mo	9-11 mo	12 mo	15 mo	18 mo	24 mo	30 mo	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	14 yr	15 yr	16 yr	17 yr	18 yr			
EXAM	Newborn (NB) Metabolic/Hgb Screening ¹	NB to 2 mo																												
	Physical and Developmental ²	Every visit					Every visit													Every visit										
	Blood pressure ³						Annually beginning at age 3													Annually										
	BMI/ Percentile ⁴						Annually beginning at age 2													Annually										
	Vision & Hearing ⁵	Assess through observation or health history/physical					Assess through observation or health history/physical					Annually													Annually					
	Dental ⁶	Assess through observation or health history/physical					Assess through observation or health history/physical					Refer for preventive dental services													Refer for preventive dental services					
	Developmental Screening ⁷					√					√		√	If indicated by risk assessment and/or symptoms						If indicated by risk assessment and/or symptoms										
	Autism Screening ⁸										√	√	If indicated by risk assessment and/or symptoms						If indicated by risk assessment and/or symptoms											
DIAGNOSTICS	Clinical Indicator	Infancy					Childhood													Adolescenc										
		Birth to 1 mo	2-3 mo	4-5 mo	6-8 mo	9-11 mo	12 mo	15 mo	18 mo	24 mo	30 mo	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	14 yr	15 yr	16 yr	17 yr	18 yr			
	Lead Screening ⁹						√	If not done		√	If not done						If indicated by history and/or symptoms.													
	Anemia Screening ¹⁰					Between 9 and 12 mo.						If indicated by risk assessment and/or symptoms						Do once after onset of menses and if indicated by history and/or symptoms												
	Pelvic Exam/Pap Test ¹¹																			Cervical cancer screening with cytology or HPV testing is not recommended before the age of 21, regardless of sexual activity.										
Chlamydia Screening ¹²																			Annually once sexually active											
PATIENTS AT RISK	Clinical Indicator	Infancy					Childhood													Adolescenc										
		Birth to 1 mo	2-3 mo	4-5 mo	6-8 mo	9-11 mo	12 mo	15 mo	18 mo	24 mo	30 mo	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	14 yr	15 yr	16 yr	17 yr	18 yr			
	Cholesterol Screening ¹³										√					√		√		√	Annually if at risk						√			
	TB Testing ¹⁴	At the clinical discretion of the provider and based on the patients' history and/or presenting signs and symptoms.																												
Sickle Cell Test ¹⁵	√	As indicated by history and/or symptoms				As indicated by history and/or symptoms													As indicated by history and/or symptoms											

STI Screening¹⁶

As indicated by history and/or symptoms

As indicated by history and/or symptoms

As indicated by history and/or symptoms

PIEDMONT WELLSTAR HEALTHPLANS PEDIATRIC PREVENTIVE GUIDELINES
Initial QIC Approval 12/13

	Clinical Indicator	Infancy					Childhood										Adolescenc								
		Birth to 1 mo	2-3 mo	4-5 mo	6-8 mo	9-11 mo	12 mo	15 mo	18 mo	24 mo	30 mo	3 yr	4 yr	5 yr	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr	13 yr	14 yr	15 yr	16 yr
ANTICIPATORY GUIDANCE	Safety and Injury Prevention ¹⁷	Each visit					Each visit										Each visit								
	Violence Prevention ¹⁸	Each visit					Each visit										Each visit								
	Sleep Position Counseling ¹⁹	Each visit birth through 6 months																							
	Nutritional Counseling ²⁰	Each visit					Each visit										Each visit								
	Physical Activity Counseling ²¹											Each visit beginning at age 4					Each visit								
	Screen/Counsel for Tobacco, Alcohol & Substance Abuse ²²																Through risk assessment beginning at age 11								

IMMUNIZATIONS

Piedmont WellStar HealthPlans, Inc. follows the Recommended Childhood and Adolescent Immunization Schedule approved in 12/13 Quality Improvement Committee (QIC), the American Academy of Pediatrics (AAP), the American Academy of Family Physicians (AAFP), The current 12/13 Child and Adolescent Immunization Schedules are available at

Ages 0-18:
<http://www.cdc.gov/vaccines/schedules/downloads/child/0-18yrs-schedule.pdf>

Catch-up Schedule:

Scientific Evidence Sources:

- American Academy of Pediatrics. Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008.
- American Academy of Pediatrics. Prevention of Pediatric Overweight and Obesity, *Pediatrics*. 2003; 112:424-430 (Reaffirmed February 2007).
- American Academy of Pediatrics Committee on Substance Abuse. Tobacco, Alcohol, and Other Drugs: The Role of the Pediatrician in Prevention, Identification, and Management of Substance Abuse, *Pediatrics*. 2005; 115:816-821.
- American Academy of Pediatrics. Identifying Infants and Young Children with Developmental Disorders in the Medical Home: An Algorithm for Developmental Surveillance and Screening. *Pediatrics* 2006; 118:405-420 (Reaffirmed 2010).
- Hagan JF, Shaw JS, Duncan PM, eds. 2008. *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents*, Third Edition. Elk Grove Village, IL: American Academy of Pediatrics.
- American Academy of Pediatrics. *Performing Preventive Services: A Bright Futures Handbook: Intimate Partner Violence*. 2010 25-32.
- American Academy of Pediatrics. The Changing Concept of Sudden Infant Death Syndrome: Diagnostic Coding Shifts, Controversies Regarding the Sleeping Environment, and New Variables to Consider in Reducing Risk, *Pediatrics*. 2005; 116:1245-1256 (Reaffirmed May 2008).
- Gupta VB, Hyman SL, Johnson CP, et al. Identifying Children with Autism Early? *Pediatrics* 2007; 119:152-153.
- American Academy of Family Physicians (AAFP). Summary of recommendations for clinical preventive services. Leawood (KS): American Academy of Family Physicians (AAFP); October 2012.
- U.S. Preventive Services Task Force. The Guide to Clinical Preventive Services 2012. Recommendations of the U.S. Preventive Services Task Force.
- American Cancer Society Guidelines for the Early Detection of Cancer, March 5, 2012 (Revised January 11, 2013).
- Centers for Disease Control and Prevention. Recommended immunization schedules for persons aged 0-18 years – United States, 2013. *MMWR*, February 2013; 62(01);1-19.

1. **Newborn Metabolic/Hemoglobin Screening.** Screening should take place between newborn and 2 months of age. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)
2. **Physical and Developmental.** This includes, at appropriate ages, height and weight measurement, head circumference, psychosocial/behavioral assessment, developmental surveillance and other care at the clinical discretion of the provider. Per PA Medicaid EPSDT Periodicity Schedule, annual physical exam is required for adolescents <21 years. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)
3. **Blood Pressure.** Start annual screening at age three or earlier if clinically indicated. Per PA Medicaid follow EPSDT Periodicity guidelines. (Source AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)
4. **BMI (Body Mass Index)/Percentile.** Calculate and plot BMI/percentile once a year in all children and adolescents beginning at age 2. (Source: AAP, Prevention of Pediatric Overweight and Obesity, *Pediatrics*. 2003;112:424-430, (Reaffirmed February 2007)
5. **Vision and Hearing.** Per PA Medicaid EPSDT Periodicity Schedule. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008, USPSTF Screening for Visual Impairment in Children Ages 1 - 5, January 2011, and AAFP Summary of Recommendations for Clinical Preventive Services, October 2012)
6. **Dental.** Earlier dental examinations may be appropriate for some children. Subsequent examinations as prescribed by dentist. Per PA Medicaid EPSDT Periodicity Schedule. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)
7. **Developmental Screening.** Identifying infants and young children with developmental disorders. Per PA Medicaid EPSDT Periodicity Schedule. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)
8. **Autism Screening.** Screening with an autism-specific tool should be performed routinely at 18 and 24 months. Per PA Medicaid EPSDT Periodicity Schedule. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)
9. **Lead Screening.** In accordance with Medicaid EPSDT standards, all children should be screened for lead at 12 months and at 24 months, or between 36 and 72 months if not previously screened. (Source: Recommendations for Blood Lead Screening of Medicaid-Eligible Children Aged 1-5 Years: an Updated Approach to Targeting a Group at High Risk MMWR August 7, 2009; 58(RR09):1-11, USPSTF Screening for Elevated Blood Lead Levels in Children and Pregnant Women 2012, and AAFP Summary of Recommendations for Clinical Preventive Services, October 2012)
10. **Anemia Screening.** Screen infants between 9-12 months. Consider earlier screening for high-risk infants (e.g., premature infants and low birth weight infants). Screen all menstruating adolescents once at onset of menses and if indicated by history and/or symptoms. Per PA Medicaid EPSDT Periodicity Schedule. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008, and AAFP Summary of Recommendations for Clinical Preventive Services, October 2012)
11. **Pelvic Exam/Pap Test.** Cervical cancer screening with cytology or HPV testing is not recommended before the age of 21, regardless of sexual activity. (Source: American Cancer Society Guidelines for the Early Detection of Cancer, March 5, 2012 (Revised January 11,2013) and USPSTF Screening for Cervical Cancer, 2012)
12. **Chlamydia Screening.** Annual screening of all sexually active women < 25 years. All pregnant women should be screened. (Source: USPSTF Screening for Chlamydial Infection, 2012, and AAFP Summary of Recommendations for Clinical Preventive Services, October 2012)
13. **Cholesterol Screening.** Screen high-risk patients and all adolescents at the age of 18-20. If family history cannot be ascertained and other risk factors are present, screening should be at the discretion of the physician with risk assessment performed and appropriate action to follow if positive. Per PA Medicaid follow EPSDT Periodicity guidelines. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)
14. **TB Testing.** Testing should be done upon recognition of high-risk factors. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)
15. **Sickle Cell Test. Screening for newborns.** Per PA Medicaid EPSDT Periodicity Schedule and USPSTF Screening for Sickle Cell Disease in Newborns 2012.
16. **STI Screening.** All sexually active patients should be screened for sexually transmitted infections (STIs). Per PA Medicaid EPSDT Periodicity Schedule. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)
17. **Safety and Injury Prevention.** Counsel parents and children more than 2 years old regarding accidental injury prevention including, as appropriate: child safety seats, lap and shoulder belt use, bicycle safety, motorcycle helmet use, smoke detectors, poison control center number and driving while intoxicated. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)
18. **Violence Prevention.** Counsel parents and children on violence prevention and management. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008, and AAFP Summary of Recommendations for Clinical Preventive Services, October 2012)
19. **Sleep Position Counseling.** Parents and caregivers should be advised to place healthy infants on their backs when putting them to sleep. Side positioning is a reasonable alternative but carries a slightly higher risk of SIDS. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)
20. **Nutrition Counseling.** Age-appropriate nutrition counseling should be an integral part of each visit. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008).
21. **Physical Activity Counseling.** Age-appropriate physical activity counseling should be discussed at each visit beginning at age 4. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008).
22. **Screen/Counsel for Tobacco, Alcohol and Substance Abuse.** Risk assessment to be performed beginning at age 11 with appropriate action to follow if indicated. Per PA Medicaid EPSDT Periodicity Schedule. (Source: AAP Recommendations for Preventive Pediatric Health Care Periodicity Schedule, 2008)