

**Appendix G:**

**HealthCheck Program Periodicity  
Schedule**



## 2010 HealthCheck Program Periodicity Schedule



	INFANCY							EARLY CHILDHOOD					MIDDLE CHILDHOOD							ADOLESCENCE										
	New born	3-5 days	By 1 mo	2 mo	4 mo	6 mo	9 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	19 yr	20 yr
<b>Well Child Check Up (1)</b>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>
<b>Growth Measurements</b>																														
Length/Height and Weight	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>
Head Circumference	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>
Body Mass Index	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>
<b>Blood Pressure</b>													Begin @ 3 yr	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>
<b>Tuberculosis Risk Screen</b>			>			>		>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>
<b>Lead Risk Screen</b>						Begin @ 6 mo	>	>	>	>	>	>	>	>	>	>														
<b>Vision Screen</b>	S	S	S	S	S	S	S	S	S	S	S	S	O	O	O	O	S	O	S	O	S	O	S	S	O	S	S	O	S	S
<b>Hearing Screen</b>	O	S	S	S	S	S	S	S	S	S	S	S	S	O	O	O	S	O	S	O	S	S	S	S	S	S	S	S	S	S
<b>Developmental/Behavioral</b>																														
Developmental Surveillance	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>
Developmental Screen																														
Psychosocial/Behavioral Screen(2)																														
<b>Autism Screen</b>																														
<b>Physical Exam (3)</b>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>
<b>Newborn Metabolic Screen (4)</b>	>	>																												
<b>Immunizations (5)</b>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>
<b>Hematocrit or Hemoglobin</b>																														
<b>Blood Lead Screen</b>								>	(6)	(6)	>	(6)	(6)	(6)	(6)															
<b>Oral Health Screen (7)</b>	>	>	>	>	>	>	>	(R)	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>
<b>Health Education with Anticipatory Guidance</b>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>
<b>Tuberculin Test</b>																														
<b>Dyslipidemia Screen (8) &amp; (9)</b>																														>

- (1) Well child check-ups incorporate all required components of the HealthCheck exam including: comprehensive history, history update, nutritional screening, applicable growth measurements plotted on a growth chart, blood pressure, vision screening, subjective hearing screening, oral health screening, head-to-toe physical exam, lead risk screening, Tuberculosis risk screening, health education, ordering appropriate laboratory tests, and an immunization screen. Additional screens may be necessary for high risk infants.
- (2) Alcohol and drug use screening is included in the psychosocial/behavioral screen.
- (3) All sexually active patients should be screened for sexually transmitted infections (STIs). Sexually active girls should have screening for cervical dysplasia as part of a pelvic exam beginning within 3 years of onset of sexual activity or age 21 (whichever comes first).
- (4) Newborn metabolic screening should be done according to state law. Results should be reviewed at visits and appropriate retesting or referral done as needed.
- (5) Immunizations should be reviewed and updated until complete at each visit. Immunizations should be administered in accordance with ACIP, AAP, and AAFP recommendations.
- (6) As indicated by the lead risk screen.
- (7) Referral to dentist required at age 1. Earlier initial dental evaluation may be appropriate for some children.
- (8) Recommended: risk assessment should be performed at 24 months, 4yrs, 6yrs, 8yrs, and 10-20 yrs.
- (9) In all adults aged 20 or older, a fasting lipoprotein profile should be obtained every 5 years.

**S=Subjective Exam   O=Objective Exam   R=Required Referral**

Required Screen

Selective Screen

### Iron-Deficiency Anemia Screening

#### Risk Factors:

- Low** birthweight or preterm birth
- Non-iron-fortified** formula
- Cow's** milk before age 12 months
- Diet** low in iron, inadequate nutrition
- Meal** skipping, frequent dieting
- Heavy/lengthy** menstrual periods or recent blood loss
- Intensive** physical training or participation in endurance sports
- Pregnancy** or recent pregnancy

For CDC screening recommendations for iron-deficiency anemia by age see Appendix G of the HealthCheck Provider Manual

### Tuberculosis (TB) Risk Screen:

#### Radiographic findings suggesting TB

**Contacts** with persons with confirmed or suspected TB

**Immigrant** from high prevalence areas (eg, Asia, Middle East, Africa, Latin America)

**Travel** to high prevalence areas

For other risk factors see Appendix D in the HealthCheck Provider Manual

Only children with increased risk of exposure to persons with tuberculosis should be considered for tuberculin skin testing.

### Dyslipidemia Risk Screen

**Positive** family history is defined as a history of premature ( $\leq 55$  years of age) cardiovascular disease in a parent or grandparent

**Positive** family history, elevated blood cholesterol greater than 240 mg/dl

**Unknown** family history, adopted

**Cigarette** smoking

**Elevated** blood pressure

**Overweight/Obesity** (BMI  $\geq 85\%$ )\*

**Diabetes** mellitus

**Physical** inactivity

**Poor** dietary habits

When one or more risk factors indicate that the child is high risk, then an initial fasting lipid profile should be obtained.