

## Health Plan of Michigan Clinical Practice Guideline Routine Preventive Services for Children and Adolescents (Ages 2-18)

The following guideline provides recommendations for routine preventive services for children and adolescents ages 2-18 years.

Recommendation	2-6 years	7-12 years	13-18 years
Health, developmental and risk assessments	x	x	x
Parental/Child education and counseling: Nutrition, physical activity, dental health, violence and abuse, sexually transmitted infection (STI) prevention, depression, suicide threats, alcohol/drug abuse, anxiety, stress reduction, coping skills, immunizations Bicycle safety – helmet use when riding bicycle [B]. Motor vehicle safety – Car seat/booster seat/seat belt use [B]. Poison prevention – Keep National Poison Control numbers readily accessible; use child resistant containers; dispose expired/unused medications Burn prevention – Install smoke detectors and test bi-annually; carbon monoxide detectors, water heater temperature and fire prevention Injury prevention – Firearm safety; water safety; CPR training	x	x	x
Tobacco Use Screening: Establish tobacco use and secondhand exposure	x	x	x
Screening for overweight	Record height, weight and BMI annually		
Cholesterol Screening [A]	Over age 2 if increased risk for genetic forms of hypercholesterolemia		
Chlamydia Screening sexually transmitted infection (STI) [B]			All sexually active women 25 years and younger
Cervical Cancer Screening (Pap Smear) [B]			Beginning at age 21 or within three years after first sexual intercourse, whichever is earlier; every 3 years after 3 consecutive normal Pap smears over 5 years.
Preconception and Pregnancy Prevention Counseling		Preventive counseling beginning at age 12, or earlier if sexually active	
Vision Screening [A]	Children 4 years old and younger. By age 5, should be performed as part of preschool screening.		
<b>Immunizations:</b> <ul style="list-style-type: none"> <li>• Consult the Advisory Committee on Immunizations Practices (ACIP) website (<a href="http://www.cdc.gov/nip/acip/">www.cdc.gov/nip/acip/</a>) for most updated immunization schedules for routine and high risk populations.</li> <li>• Use combination vaccines to minimize the number of injections</li> <li>• Update the Michigan Care Improvement Registry (MCIR)</li> </ul>	<b>4-6 years</b>	<b>11-12 years</b>	<b>15-18 years</b>
DTaP [A]	x	Tdap	
IPV	x		
MMR (MMRV) [A]	x		
Varicella [A]	x		
Meningococcal		x	
Influenza [B]	x 6-59 months annually		
Human Papilloma Virus (females 9-26 years)		x dose series	x dose series

**Levels of Evidence for the most significant recommendations:** A =randomized controlled trials; B =controlled trials, no randomization; C =observational studies; D =opinion of expert panel

This guideline lists core management steps. It is based on several sources, including: Preventive Services for Children and Adolescents, Institute for Clinical Systems Improvement, 2006 ([www.icsi.org](http://www.icsi.org)) Individual patient considerations and advances in medical science may supersede or modify these recommendations.