

Michigan Quality Improvement Consortium 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
Parent/Child education and counseling: <ul style="list-style-type: none"> ◆ 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.		
Immunizations: <ul style="list-style-type: none"> ◆ Consult the Advisory Committee on Immunization Practices (ACIP) website (www.cdc.gov/nip/acip/) for most updated immunization schedules for routine and high risk populations. ◆ Use combination vaccines to minimize the number of injections ◆ Update the Michigan Care Improvement Registry (MCIR) 	4-6 years	11-12 years	15-18 years
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 3-dose series	X 3-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). Individual patient considerations and advances in medical science may supersede or modify these recommendations.