

# CHaD General Pediatrics' Pathway to Prevention 2020

## What to expect at your child's preventive care visits

Visit	Immunizations	Screening/prevention
ALL visits	Review records and provide catch-up for any missed immunizations Influenza (seasonal)	Patient / parent concerns and goals for family health discussed Assessment of weight, height, development/learning, family / environment, nutrition, activity, media use Physical exam
1st Week Visit	HepB#1 if not given previously	Vitamin D supplementation for breast feeding infants Review Newborn Screen Result (hearing, bilirubin, heart, state)
2-4 week Visit	HepB#1 if not given previously	General health & safety screener (SDH) (tablet) Vitamin D supplementation for breast feeding infants Review Newborn Screen results
2 Month Visit	Pentacel#1 (includes DTaP, HIB, IPV), Hep B #2 PCV13#1 Rotavirus#1	
4 Month Visit	Pentacel#2 (includes DTaP, HIB, IPV) PCV13#2 Rotavirus#2	Assess if fluoride in water
6 Month Visit	Pentacel#3 (includes DTaP, HIB, IPV), Hep B #3 Rotavirus#3	General health & safety screener (SDH) (tablet) Start fluoride (0.25 mg/qd) if not in water (prescription given) Lift-the-lip and dental screen
9 Month Visit		Ages and Stages (ASQ) developmental Screen - parent to complete in waiting room Fluoride Varnish *only if high risk every 3 months
12 Month Visit	MMR #1 Varicella #1 Hep A #1	Lead and Anemia Screens Fluoride Varnish **low risk every 6 months
15 Month Visit	DTaP#4 , HIB#4, PCV13 #4 [Pentacel (includes DTaP, HIB, IPV) may be given in place of separate shots for DTaP #4 and HIB#4]	Fluoride Varnish

Visit	Immunizations	Screening/prevention
18 Month Visit	Hep A #2	ASQ developmental screen (paper) Autism Screen (MCHaT) (tablet) Fluoride Varnish
24 Month Visit		Autism Screen (MCHaT) (tablet) Lead and Anemia screen Fluoride Varnish
30 Month Visit		Ages and Stages (ASQ) developmental Screen (paper) Fluoride Varnish
3 Year Visit		Fluoride dose for 3-5yr = 0.5 mg (new prescription given) Dental home? If not, Fluoride varnish Optix Vision Screener
4 Year Visit	DTaP#5 [Quadracel may be given-includes DTaP and IPV ] IPV#4 [Quadracel may be given-includes DTaP and IPV ] MMR#2 [MMRV may be given: includes MMR & Varicella] Varicella#2 [MMRV may be given: includes MMR & Varicella]	Vision screen (wall chart or Optix screener) Hearing screen
5 Year Visit		Vision & Hearing screen
6-10 Year Visit		Fluoride dose >=6 yr = 1 mg Vision & hearing every 2 yr (at 6, 8,10);
11-18 Year Visit	<b>AT 11 year visit:</b> Tdap booster HPV #1 (*If <15, HPV #2 only; If >15, needs HPV #3) Menactra #1 at 11, Menactra #2 at 16	DARTscreen (12+) (tablet) Vision at 12, 15 Hearing at 12,15 (including 6000/8000 Hz) STI screen age 15+ If Pre-college may need: HR, PPD, HGB, Urine dip
18+ Visit	<b>Any catch up or travel immunizations</b> <b>Age 21: Tdap</b> <b>Consider Men B vaccine 2 dose if indicated (1-6 month interval)</b>	Tablet screener (DART 18-21; CCSA 21+) Vision/Screening once at 18 STI & HIV screen Lipid screen, Hep C screen at 21 PAP screen >21 yo female

**KEY TO IMMUNIZATIONS** (handouts are available for each)

HepB = Hepatitis B  
DTaP = Diptheria, Tetanus, Pertussis  
Tdap = Diptheria, Tetanus, Pertussis booster  
HIB = Haemophilus influenzae type b  
PCV13 (Pevnar)= pneumococcal disease

IPV = Poliomyelitis / Polio  
HepA = Hepatitis A  
MMR = Measles, Mumps, Rubella  
Varicella = Varicella (Chicken Pox)  
Menactra and MenB = Meningococcal disease  
HPV = Human Papilloma Virus