

INFANCY

AGE ¹	Prenatal ²	Newborn ³	3-5 D ⁴	By 1 M	2 M	4 M	6 M	9 M
HISTORY								
Initial/Interval	●	●	●	●	●	●	●	●
MEASUREMENTS								
Length/Height & Weight		●	●	●	●	●	●	●
Head Circumference		●	●	●	●	●	●	●
Weight for Length		●	●	●	●	●	●	●
Body Mass Index ⁵								
Blood Pressure ⁶		★	★	★	★	★	★	★
SENSORY SCREENING								
Vision ⁷		★	★	★	★	★	★	★
Hearing		● ⁸	● ⁹		▶	★	★	★
DEVELOPMENTAL/BEHAVIORAL HEALTH								
Developmental Screening ¹¹								●
Autism Spectrum Disorder Screening ¹²								
Developmental Surveillance		●	●	●	●	●	●	●
Psychosocial/Behavioral Assessment ¹³		●	●	●	●	●	●	●
Tobacco, Alcohol, or Drug Use Assessment ¹⁴								
Depression Screening ¹⁵								
Maternal Depression Screening ¹⁶				●	●	●	●	●
PHYSICAL EXAMINATION ¹⁷								
		●	●	●	●	●	●	●
PROCEDURES ¹⁸								
Newborn Blood		● ¹⁹	● ²⁰		▶			
Newborn Bilirubin ²¹		●						
Critical Congenital Heart Defect ²²		●						
Immunization ²³		●	●	●	●	●	●	●
Anemia ²⁴						★		
Lead ²⁵							★	★
Tuberculosis ²⁷				★			★	
Dyslipidemia ²⁸								
Sexually Transmitted Infections ²⁹								
HIV ³⁰								
Cervical Dysplasia ³¹								
ORAL HEALTH ³²								
							● ³³	● ³³
Fluoride Varnish ³⁴							◀	◀
Fluoride Supplementation ³⁵							★	★
ANTICIPATORY GUIDANCE								
	●	●	●	●	●	●	●	●

KEY: ● = to be performed ★ = risk assessment to be performed with appropriate action to follow, if positive ◀ ● ▶ = range during which a service may be provided

EARLY CHILDHOOD

AGE ¹	12 M	15 M	18 M	24 M	30 M	3 Y	4 Y
HISTORY							
Initial/Interval	●	●	●	●	●	●	●
MEASUREMENTS							
Length/Height & Weight	●	●	●	●	●	●	●
Head Circumference	●	●	●	●			
Weight for Length	●	●	●				
Body Mass Index ⁵				●	●	●	●
Blood Pressure ⁶	★	★	★	★	★	●	●
SENSORY SCREENING							
Vision ⁷	★	★	★	★	★	●	●
Hearing	★	★	★	★	★	★	●
DEVELOPMENTAL/BEHAVIORAL HEALTH							
Developmental Screening ¹¹			●		●		
Autism Spectrum Disorder Screening ¹²			●	●			
Developmental Surveillance	●	●		●		●	●
Psychosocial/Behavioral Assessment ¹³	●	●	●	●	●	●	●
Tobacco, Alcohol, or Drug Use Assessment ¹⁴							
Depression Screening ¹⁵							
Maternal Depression Screening ¹⁶							
PHYSICAL EXAMINATION ¹⁷							
	●	●	●	●	●	●	●
PROCEDURES ¹⁸							
Newborn Blood							
Newborn Bilirubin ²¹							
Critical Congenital Heart Defect ²²							
Immunization ²³	●	●	●	●	●	●	●
Anemia ²⁴	●	★	★	★	★	★	★
Lead ²⁵	● or ★ ²⁶		★	● or ★ ²⁶		★	★
Tuberculosis ²⁷	★			★		★	★
Dyslipidemia ²⁸				★			★
Sexually Transmitted Infections ²⁹							
HIV ³⁰							
Cervical Dysplasia ³¹							
ORAL HEALTH ³²							
Fluoride Varnish ³⁴	★		★	★	★	★	★
Fluoride Supplementation ³⁵	★		★	★	★	★	★
ANTICIPATORY GUIDANCE							
	●	●	●	●	●	●	●

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MIDDLE CHILDHOOD

AGE ¹	5 Y	6 Y	7 Y	8 Y	9 Y	10 Y
HISTORY						
Initial/Interval	●	●	●	●	●	●
MEASUREMENTS						
Length/Height & Weight	●	●	●	●	●	●
Head Circumference						
Weight for Length						
Body Mass Index ⁵	●	●	●	●	●	●
Blood Pressure ⁶	●	●	●	●	●	●
SENSORY SCREENING						
Vision ⁷	●	●	★	●	★	●
Hearing	●	●	★	●	★	●
DEVELOPMENTAL/BEHAVIORAL HEALTH						
Developmental Screening ¹¹						
Autism Spectrum Disorder Screening ¹²						
Developmental Surveillance	●	●	●	●	●	●
Psychosocial/Behavioral Assessment ¹³	●	●	●	●	●	●
Tobacco, Alcohol, or Drug Use Assessment ¹⁴						
Depression Screening ¹⁵						
Maternal Depression Screening ¹⁶						
PHYSICAL EXAMINATION ¹⁷	●	●	●	●	●	●
PROCEDURES ¹⁸						
Newborn Blood						
Newborn Bilirubin ²¹						
Critical Congenital Heart Defect ²²						
Immunization ²³	●	●	●	●	●	●
Anemia ²⁴	★	★	★	★	★	★
Lead ²⁵	★	★				
Tuberculosis ²⁷	★	★	★	★	★	★
Dyslipidemia ²⁸		★		★	←	● →
Sexually Transmitted Infections ²⁹						
HIV ³⁰						
Cervical Dysplasia ³¹						
ORAL HEALTH ³²	★	★				
Fluoride Varnish ³⁴	→					
Fluoride Supplementation ³⁵	★	★	★	★	★	★
ANTICIPATORY GUIDANCE	●	●	●	●	●	●

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ADOLESCENCE

AGE ¹	11 Y	12 Y	13 Y	14 Y	15 Y	16 Y	17 Y	18 Y	19 Y	20 Y	21 Y
HISTORY											
Initial/Interval	●	●	●	●	●	●	●	●	●	●	●
MEASUREMENTS											
Length/Height & Weight	●	●	●	●	●	●	●	●	●	●	●
Head Circumference											
Weight for Length											
Body Mass Index ⁵	●	●	●	●	●	●	●	●	●	●	●
Blood Pressure ⁶	●	●	●	●	●	●	●	●	●	●	●
SENSORY SCREENING											
Vision ⁷	★	●	★	★	●	★	★	★	★	★	★
Hearing	←		● ¹⁰	→	←	●	→	←		●	→
DEVELOPMENTAL/BEHAVIORAL HEALTH											
Developmental Screening ¹¹											
Autism Spectrum Disorder Screening ¹²											
Developmental Surveillance	●	●	●	●	●	●	●	●	●	●	●
Psychosocial/Behavioral Assessment ¹³	●	●	●	●	●	●	●	●	●	●	●
Tobacco, Alcohol, or Drug Use Assessment ¹⁴	★	★	★	★	★	★	★	★	★	★	★
Depression Screening ¹⁵		●	●	●	●	●	●	●	●	●	●
Maternal Depression Screening ¹⁶											
PHYSICAL EXAMINATION ¹⁷											
	●	●	●	●	●	●	●	●	●	●	●
PROCEDURES ¹⁸											
Newborn Blood											
Newborn Bilirubin ²¹											
Critical Congenital Heart Defect ²²											
Immunization ²³	●	●	●	●	●	●	●	●	●	●	●
Anemia ²⁴	★	★	★	★	★	★	★	★	★	★	★
Lead ²⁵											
Tuberculosis ²⁷	★	★	★	★	★	★	★	★	★	★	★
Dyslipidemia ²⁸	→	★	★	★	★	★	★	←		●	→
Sexually Transmitted Infections ²⁹	★	★	★	★	★	★	★	★	★	★	★
HIV ³⁰	★	★	★	★	←		●	→	★	★	★
Cervical Dysplasia ³¹											●
ORAL HEALTH ³²											
Fluoride Varnish ³⁴											
Fluoride Supplementation ³⁵	★	★	★	★	★	★					
ANTICIPATORY GUIDANCE											
	●	●	●	●	●	●	●	●	●	●	●

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