

Preventive Care Guidelines for Children and Teens

Recommendations apply to most children of normal risk. Additional tests and vaccines may be recommended based on specific risk factors. Preventive care for transgender individuals may require special considerations. Please talk to your child's doctor about the preventive care they may need.

Newborn 0–12 Months	Early Childhood 12 Months–4 Years	Middle Childhood 5–10 Years	Teens and Young Adults 11–21 Years
------------------------	--------------------------------------	--------------------------------	---------------------------------------

Well-Child Visits

Within the first 3–5 days after birth Again at 1, 2, 4, 6, 9, and 12 months	15, 18, 24, and 30 months	Annual checkup once each year (many find it easiest to schedule near the child's birthday, but waiting 365 days between checkups is not required)	Annual checkup once each year (many find it easiest to schedule near the child's birthday, but waiting 365 days between checkups is not required)
--	---------------------------	---	---

The following may take place during a well-child visit. These visits are also a good time for parents to ask their child's doctor any questions or concerns they may have.

Physical Exams

Length and weight Head circumference	Length/height and weight Head circumference until 24 months Body mass index starting at 24 months Blood pressure starting at age 3	Height and weight Body mass index Blood pressure	Height and weight Body mass index Blood pressure
---	---	--	--

Tests

Newborn screening at birth (blood test) Hearing screening at birth (abnormal results need follow-up) Formal developmental screening (questionnaire) at 9 months	Blood count for anemia at 12 months Lead test at 12 and 24 months Autism screening (questionnaire) at 18 and 24 months Formal developmental screening (questionnaire) at 18 and 30 months Visual acuity screening attempt at age 3 (if cooperative) and age 4 Hearing screening attempt at age 4	Vision screening at ages 5, 6, 8, and 10 Hearing screening at ages 5, 6, 8, and 10 Screening for lipid disorders once at 9–11 years of age	Vision screening at ages 12 and 15 Hearing screening once at 11–14; once at 15–17; once at 18–21 years of age Screening for lipid disorders once at 17–21 years of age Pap test starting at age 21 for females (Pap tests should not be done before age 21 regardless of sexual activity)
---	---	--	--

Immunizations/Vaccines

Vaccines can always be “caught up” if your child misses a dose. Talk to your child's doctor and get your child protected. See the other side for a detailed vaccine schedule and vaccine description.

Hepatitis B Rotavirus DTaP Hib PCV13 IPV Annual flu vaccine starting at 6 months (two doses for the first flu vaccine) COVID-19 vaccines and additional doses based on CDC recommendations	Annual flu vaccine Hepatitis B DTaP Hib PCV13 IPV MMR Varicella Hepatitis A COVID-19 vaccines and additional doses based on CDC recommendations	Annual flu vaccine DTaP MMR IPV Varicella COVID-19 vaccines and additional doses based on CDC recommendations	Annual flu vaccine HPV for males and females Meningococcal Tdap COVID-19 vaccines and additional doses based on CDC recommendations
--	---	---	--

**Newborn
0–12 Months**

**Early Childhood
12 Months–4 Years**

**Middle Childhood
5–10 Years**

**Teens and Young Adults
11–21 Years**

Counseling/Screening

Psychosocial/behavioral assessment Developmental surveillance (feeding and growing) Oral health Vitamin D and fluoride supplement, if indicated Fluoride varnish as soon as teeth erupt; then every 3–6 months based on risk Breastfeeding support for mom Depression screening for mom at baby’s checkups	Psychosocial/behavioral assessment Developmental surveillance Fluoride supplement (if home water source does not have fluoride) Diet and activity Sun exposure Dental health (start when teeth appear) Fluoride varnish Injury prevention (car seat safety, electrical protectors) Vitamin D supplement, if indicated Screen time limits	Psychosocial/behavioral assessment Developmental surveillance Fluoride supplement (if home water source does not have fluoride) Diet and activity Sun exposure Dental health Fluoride varnish Injury prevention (seat belt, helmet use) Vitamin D supplement, if indicated Screen time limits	Smoking, vaping, alcohol, and/or drug use assessment Depression screening starting at age 12, continuing annually Fluoride supplement (if home water source does not have fluoride) Sexually transmitted diseases/HIV/sexual behavior/gender identity Diet and activity Sun exposure Dental health Injury prevention (seat belt, helmet use) Driving safety/texting Safe internet/social media/cell phone practices Vitamin D supplement, if indicated Screen time limits
--	---	--	--

High Risk Children

Screening for latent tuberculosis infection in children who are not showing symptoms, but who may be at an increased risk

Additional COVID-19 doses for individuals at risk, based on CDC recommendations

Guidelines adapted from the American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care. Talk to your child’s doctor about which preventive services are right for your child. Your Plan benefits may allow for services more frequently than what is listed here.

Current information on the COVID-19 vaccine can be found at [CDC.gov/COVID](https://www.cdc.gov/COVID). Appropriate immunization is recommended.

Recommended Immunizations for Children from Birth Through 6 Years of Age

Vaccines can be given at the shown age or during the age range.

Source: The Centers for Disease Control & Prevention

Birth	1 Month	2 Month	4 Month	6 Month	12 Month	15 Month	18 Month	19–23 Month	2–3 Year	4–6 Year
Hep B	Hep B			Hep B						
		RV	RV	RV						
		DTaP	DTaP	DTaP		DTaP				DTaP
		Hib	Hib	Hib	Hib					
		PCV13	PCV13	PCV13	PCV13					
		IPV	IPV	IPV						IPV
				Influenza (Flu) Annually						
					MMR					MMR
					Varicella					Varicella
					HepA					

Vaccines and the Diseases They Prevent

Varicella Chickenpox	Hib Haemophilus Influenza Type B	Flu Influenza (Flu)	RV Rotavirus
DTaP, Tdap Diphtheria, Pertussis (Whooping cough) Tetanus	Hep A Hepatitis A	MMR Measles, Mumps, Rubella	MenACWY, MenB Meningococcal
	Hep B Hepatitis B	IPV Polio	HPV Human Papillomovirus
		PCV13 Pneumococcal	