



## Routine Preventive Pediatric Health Care – Middle Childhood

The following guideline provides recommendations for routine preventive services for children 5 years to 10 years. Children at increased risk may warrant additional services.

Age	5 yrs	6 yrs	7 yrs	8 yrs	9 yrs	10 yrs
<b>HISTORY</b> Initial/Interval	X	X	X	X	X	X
<b>MEASUREMENTS</b>						
Length/Height and Weight	X	X	X	X	X	X
Body Mass Index	X	X	X	X	X	X
Blood Pressure	X	X	X	X	X	X
<b>SENSORY SCREENING</b>						
Vision	X	X	*	X	*	X
Hearing	X	X	*	X	*	X
<b>DEVELOPMENTAL/BEHAVIORAL ASSESSMENT</b>						
Developmental Surveillance	X	X	X	X	X	X
Psychosocial/Behavioral Assessment Should be family centered; may include assessment of child social-emotional health, caregiver depression, and social determinants of health. <a href="http://pediatrics.aappublications.org/content/135/2/384">http://pediatrics.aappublications.org/content/135/2/384</a> <a href="http://pediatrics.aappublications.org/content/137/4/e20160039">http://pediatrics.aappublications.org/content/137/4/e20160039</a>	X	X	X	X	X	X
<b>PHYSICAL EXAMINATION</b>	X	X	X	X	X	X
<b>PROCEDURES</b>						
Immunization Every visit should be an opportunity to update and complete a child’s immunizations. Schedules are available at <a href="http://aapredbook.aappublications.org/site/resources/izschedules.xhtml">http://aapredbook.aappublications.org/site/resources/izschedules.xhtml</a> .	X	X	X	X	X	X
Anemia	*	*	*	*	*	*
Lead Screening	*	*				



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Tuberculosis Testing Tuberculosis testing per recommendations of the Committee on Infectious Diseases, published in the current edition of AAP Red Book: Report of the Committee on Infectious Diseases. Testing should be performed on recognition of high-risk factors.	*	*	*	*	*	*
Dyslipidemia Screening <a href="https://www.nhlbi.nih.gov/health-topics/integrated-guidelines-for-cardiovascular-health-and-risk-reduction-in-children-and-adolescents">https://www.nhlbi.nih.gov/health-topics/integrated-guidelines-for-cardiovascular-health-and-risk-reduction-in-children-and-adolescents</a>		*		*	<	X
<b>ORAL HEALTH</b> Assess if the child has a dental home. If no dental home is identified, perform a risk assessment ( <a href="http://www2.aap.org/oralhealth/docs/RiskAssessmentTool.pdf">http://www2.aap.org/oralhealth/docs/RiskAssessmentTool.pdf</a> ) and refer to a dental home	*	*				
Fluoride Varnish	>					
Fluoride Supplementation	*	*	*	*	*	*
<b>ANTICIPATORY GUIDANCE</b>	X	X	X	X	X	X
<i>This guideline is based on the Bright Futures and the American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care. Individual patient considerations and advances in medical science may supersede or modify these recommendations. July 10, 2018</i>						
KEY X = to be performed * = risk assessment to be performed with appropriate action to follow, if positive <<<X>>> = range during which a service may be provided						