Maryland Healthy Kids Preventive Health Schedule

Components			Infa	ancy	(mont	:hs)			Early Childhood (months)								Late Childhood (yrs.)							Adolescence (yrs.)								
Health History and Development		Birth	3-5 d	1	2	4	6	9	12	15	18	24	30	36	48	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
Medical and family history/update		X	X	Х	\rightarrow	\rightarrow	\rightarrow	\rightarrow	Х	\rightarrow	\rightarrow	X	X	Χ	X	X	X	Χ	X	X	X	Х	Х	X	X	X	X	X	X	X	X	
Peri-natal history		X	X	Χ	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	,							,,	,,		,,			,,,	1		1		,,	,,	
Psycho-social/environmental assessment/update		Χ	Х	Χ	\rightarrow	\rightarrow	\rightarrow	\rightarrow	Х	\rightarrow	\rightarrow	Х	Х	Χ	Χ	Х	Х	Χ	Χ	Χ	Χ	Х	Χ	Х	Х	Х	Х	Х	Х	Χ	Χ	
Developmental Surveillance (Subjective)			Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Χ	Χ	Χ	Χ	
Developmental Screening (Standard Tools) ¹								Χ	\rightarrow	\rightarrow	Χ	Χ	\rightarrow																			
Autism Screening											Χ	Χ	\rightarrow																			
Mental health/behavioral assessment														Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Х	Х	Χ	Χ	Χ	
Substance use assessment																						Χ	Χ	Χ	Χ	Х	Х	Х	Χ	Χ	Χ	
Depression Screening																						Χ	Χ	Χ	Χ	Χ	Χ	Х	Х	Х	Χ	
Maternal Depression Screening				Χ	Χ	Х	Χ																									
Physical Exam																																
Systems exam		X	X	X	X	X	X	X	X	Χ	X	X	X	Χ	X	X	X	Х	X	Χ	X	X	X	X	X	X	X	X	X	Х	X	
Vision/hearing assessments ²		O ²	S	S	S	S	S	S	S	S	S	S	S	0	0	0	0	S	0	S	0	S	0	S	S	0	S	S	0	S	S	
Oral/dentition assessment		X	X	X	X	X	X	X	X	X	X	X	X	Χ	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
Nutrition assessme		X	X	X	X	X	X	X	Х	Х	Х	X	X	Χ	X	Х	X	X	X	X	Х	X	X	X	X	X	X	X	X	Χ	X	
Measurements	Height and Weight	Χ	Χ	Х	Х	Х	Х	Х	Х	Х	Х	Х	Χ	Χ	Χ	Х	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Х	Х	Х		Χ	
and graphing:	Head Circumference	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Χ	Χ	Χ																				
	BMI											Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Х	Χ	Χ		Χ	
Blood Pressure ³														Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Χ	Χ	Χ	Χ	
Risk Assessme	ents by Questionnaire																															
Lead assessment by questionnaire							Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ																
Tuberculosis *				Χ	\rightarrow	\rightarrow	Χ	\rightarrow	Χ	\rightarrow	\rightarrow	Χ	\rightarrow	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Χ	Χ	Χ	Χ	
Heart disease/cholesterol *												Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	
Sexually transmitted infections (STI) *																						Χ	Χ	Χ	Χ	Χ	Х	Χ	Χ	Χ	Χ	
Anemia *																						Χ	X	Χ	Χ	Х	X	Х	Х	Х	Χ	
Laboratory Tests																																
Newborn Metabolic Screening		Χ		Χ	\rightarrow																											
Blood lead Test									Χ	\rightarrow	\rightarrow	Χ	\rightarrow	\rightarrow	\rightarrow	\rightarrow																
Anemia Hgb/Hct									Χ	\rightarrow	\rightarrow	Χ	\rightarrow	\rightarrow	\rightarrow	\rightarrow																
Dyslipidemia Test																				Χ	\rightarrow	\rightarrow							Χ	\rightarrow	\rightarrow	
HIV Test																										Х	\rightarrow	\rightarrow	\rightarrow			
Immunizations																																
History of immunizations		Х	Х	Χ	Χ	Χ	Х	Χ	Х	Х	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Х	Χ	Χ	Χ	Χ	
Vaccines given pe	Vaccines given per schedule		\rightarrow	\rightarrow	Χ	Χ	Χ	\rightarrow	Χ	Χ	Χ	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	Χ	Χ	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	\rightarrow	
Fluoride V	Fluoride Varnish Program⁴							Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ																
Health Education																																
Age-appropriate education/guidance		Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Χ	Χ	Χ	Χ	
Counsel/referral for identified problems		Χ	Х	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Х	Х	Χ	Χ	Χ	
Dental education/r									Χ	Χ	Х	Χ	Х	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Χ	Х	Х	Χ	Х	Х	Х	
Scheduled return visit		Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Χ	Х	Χ	X	Χ	Χ	

Key: X Recommended; → Recommended if not previously done; S Subjective by history /observation; O Objective by standardized testing; * Counseling/testing recommended when positive

The Schedule reflects minimum standards required for all Maryland Medicaid recipients from birth to 21 years of age. The Maryland Healthy Kids Program requires yearly preventive care visits between ages 3 years through 20 years. ¹Refer to AAP 2006 Policy Statement referenced in the Healthy Kids Program Manual.-Screening required using standardized tools. ²Newborn Hearing Screen follow-up recommended for abnormal results. ³Blood Pressure measurement in infants and children with specific risk conditions should be performed at visits before age 3 years. ⁴The fluoride varnish may be administered by either a primary care provider or a dentist.