



BlueCross BlueShield
of Nebraska

A Not-For-Profit Mutual Insurance Company and an Independent Licensee of the Blue Cross and Blue Shield Association.

Preventive Health Guidelines

Childhood through 18 Years

These recommendations will help you achieve a healthy lifestyle and are intended as an educational reference. They do not replace the clinical judgment of your healthcare provider.

Screening indicators:	2 yrs	3 yrs	4 yrs	5 yrs	7-11 yrs	12-18 yrs
Physical exam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family History	Update as indicated					
Height	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weight (or BMI)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blood Pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amblyopia and strabismus exam	Subjectively prior to age 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral cavity assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Developmental/behavioral assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Nutritional assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exercise or physical activity assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lead Level	<input type="checkbox"/>	<input type="checkbox"/>				
Sexual maturity assessment					<input type="checkbox"/>	<input type="checkbox"/>
Sexual activity assessment					<input type="checkbox"/>	<input type="checkbox"/>
Females: Calcium intake					<input type="checkbox"/>	<input type="checkbox"/>
Males: Testicular exam					<input type="checkbox"/>	<input type="checkbox"/>
Substance abuse assessment, and cessation counseling: Tobacco - alcohol - drug abuse					<input type="checkbox"/>	<input type="checkbox"/>
IMMUNIZATIONS	UNLESS CONTRAINDICATED					
CONNECT TO CDC: www.cdc.gov/nip/recs/child-schedule.htm						
Please see Recommended Childhood and Adolescent Immunization Schedule - 2006						

Injury prevention, document education on the following:	2 yrs	3 yrs	4 yrs	5 yrs	7-11 yrs	12-18 yrs
Child safety car (until 40 lbs.)		<input type="checkbox"/>				
Belt-positioning booster seat (40-80 lbs. and 4'9" tall)				<input type="checkbox"/>		
Lap/shoulder belts &/or airbags			<input type="checkbox"/>			<input type="checkbox"/>
Bicycle safety helmets				<input type="checkbox"/>		
ATV/motorcycle safety helmets						<input type="checkbox"/>
Smoke detectors			<input type="checkbox"/>			<input type="checkbox"/>
Passive smoke damage			<input type="checkbox"/>			<input type="checkbox"/>
Window/stair guards & pool fences			<input type="checkbox"/>			
Burn protection			<input type="checkbox"/>			
Electrical cords and outlets			<input type="checkbox"/>			
Warning about strangers			<input type="checkbox"/>			
Storage of drugs, chemicals, matches and firearms			<input type="checkbox"/>			
Syrup of ipecac, poison control center information			<input type="checkbox"/>			
Unintended pregnancy						<input type="checkbox"/>
Sports injuries						<input type="checkbox"/>

Vaccinations, screenings and counseling recommendations may not be covered benefits under all Blue Cross and Blue Shield Nebraska plans. Please consult your benefits materials.

Unvaccinated or under-vaccinated children should be made current with the recommended immunizations provided on the CDC Catch-Up Schedule. www.cdc.gov/nip/recs/child-schedule.htm



**BlueCross BlueShield
of Nebraska**

A Not-For-Profit Mutual Insurance Company and an Independent Licensee of the
Blue Cross and Blue Shield Association.

Preventive Health Guidelines

Childhood through 18 Years

These recommendations will help you achieve a healthy lifestyle and are intended as an educational reference. They do not replace the clinical judgment of your healthcare provider.

ADDITIONAL RECOMMENDED GUIDELINES FOR HIGH-RISK POPULATIONS

POPULATION	RECOMMENDED GUIDELINES
Low income; immigrants	H & H; PPD
Native American/ Alaska Native, African-American, children who attend group day care	H & H; PPD; Hep A vaccine; pneumococcal vaccine
Certain chronic medical conditions	PPD; pneumococcal vaccine; influenza vaccine
Inadequate water fluoridation	Daily fluoride supplement
TB contacts	PPD
Injection or street drug use	RPR or VDRL; HIV screen; Hep A & Hep B vaccines; Hep C screen; PPD; advise to reduce risk of infection
Susceptible to varicella, measles, mumps, rubella	VAR vaccine; MMR vaccine
Blood transfusion between 1978-1985	HIV screen
Clotting factors prior to 1987, or blood transfusion prior to 1992, or Gammagard brand IVIG from 1-1-93 to 2-23-94, or hemodialysis	Screen for Hep C virus
Family hx of skin cancer; nevi; fair skin, eyes, hair	Avoid excess sun; use protective clothing and sunscreens
Increased lead exposure	Blood lead level
Sexually active (current or prior sexual activity)	RPR or VDRL; gonorrhea & chlamydia screen; HIV screen; Hep A vaccine (for males who have sex with males); Hep B vaccine; Hep C screen (for multiple sexual partners); Pap smear; microscopic examination of vaginal secretions; advise to reduce infection risk
Prior pregnancy with neural tube defect	Folic acid 4.0 mg
Children with primary relative hx of CAD <55 yrs in men and < 65 yrs in women, or a parent with a total cholesterol >300.	Measure non-fasting total cholesterol and HDL
College dorm students	Meningitis vaccine

Vaccinations, screenings and counseling recommendations may not be covered benefits under all Blue Cross and Blue Shield Nebraska plans. Please consult your benefits materials.

References: United States Preventive Services Task Force 2005 www.ahrq.gov/clinic

Department of Health and Human Services, Centers for Disease Control and Prevention www.cdc.gov

National Partnership for Immunizations (NPI) www.cdc.gov/nip/recs/adult-schedule.htm

www.cdc.gov/nip/recs/child-schedule.htm

Advisory Committee on Immunization Practices (ACIP) www.cdc.gov/nip/ACIP/default.htm

American Academy of Family Physicians (AAFP) www.aafp.org

American Academy of Pediatrics (AAP) www.aap.org

National Partnership for Immunization www.partnersforimmunization.org

American Cancer Society www.cancer.org

Preventive Health Guidelines were updated and approved by Blue Cross and Blue Shield of Nebraska's Quality Improvement Committee. Last Updated March 2006