

Recommended Wellness Visits Charts for Children, Adolescents, and Women

Wellness visits promote and protect the health of every individual. Scheduled with your primary care doctor or nurse, wellness visits are important because they track your health throughout your life and provide a regular time each year to receive screenings or immunizations you need to stay healthy. Wellness visits also emphasize healthy lifestyle behaviors, injury prevention, and other topics important to promoting overall health. A doctor or nurse can best see changes in your health when you are examined and given care at regular intervals.

Complete well-child care is important preventive care—it sets the stage for a lifetime of good health. However, scheduling it can be complicated. In total, well-child care requires 31 provider office visits and more than 40 immunizations between birth and age 21. Of these, 26 immunizations are given by the age of 2. The following charts and descriptions of the components of a good wellness visit are to help you understand what you or your child need at each visit.

The wellness visit schedule for children and adolescents begins at birth and goes through age 21. The adult wellness chart starts at age 18 and continues to age 75. Listed at the top of the chart are the different ages that require a wellness visit. Below each age, colors indicate whether each screening or procedure is necessary at that age and for whom it is most useful (everyone, or only people with risk factors as determined by a doctor). At the bottom of the chart, you will find a key with explanations of each color category.

For more information about each screening, procedure, or immunization, look at the descriptions beginning on page 6. If your doctor does not perform a recommended procedure or screening, use this tool to begin a discussion with him or her about your health and risk factors for diseases. If you want more information about what is recommended, see page 11 for links to more resources.

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The following charts were adapted from: Appendix C: Recommendations for preventive pediatric health care. In: Hagan JF, Shaw JS, Duncan PM, editors. *Bright futures: Guidelines for health supervision of infants, children, and adolescents*. 3rd edition. Elk Grove Village (IL): American Academy of Pediatrics; 2008, The Centers for Disease Control and Prevention, and the United States Preventive Services Task Force

Recommended Schedule of Care at Well-Child Visits: Newborn to 9 Months

		Age in Months						
		Newborn	3-5 Days	1	2	4	6	9
History								
Measurements	Head Circumference							
	Weight for Length (Obesity screening ≤ 24 months of age)							
	Blood Pressure							
Sensory Screening	Vision							
	Hearing							
Developmental/ Behavioral Assessment	Developmental Screening							
	Autism screening							
	Developmental Surveillance							
	Psychosocial/Behavioral Assessment							
Physical Examination	Examination of the Body							
Procedures	Immunization* Diphtheria, Tetanus, Pertussis (DTaP) <i>Haemophilus influenzae</i> type b (Hib) Hepatitis A (HepA) Hepatitis B (HepB) Inactivated Poliovirus Influenza Measles, Mumps, Rubella (MMR) Pneumococcal (PCV) Rotavirus (Rota) Varicella (Chicken Pox)	Given how often vaccine recommendations change, consult the Centers for Disease Control and Prevention (CDC)/Advisory Committee on Immunization Practices (ACIP) or the American Academy of Pediatrics (AAP) web sites for the most up to date information: CDC Vaccines and Immunizations: http://www.cdc.gov/vaccines/ American Academy of Pediatrics Red Book: http://aapredbook.aappublications.org/						
	Newborn Screening**							
	Iron Deficiency Screening	Recommendation Forthcoming						
	Lead Screening							
	Tuberculin Test							
	Oral Health and Dental Caries Prevention							

Preventive Care Visit		To be performed at visit.
		Recommended for those at risk as determined by healthcare provider.
Oral Health and Dental Caries Prevention		To be performed by a dentist at a separate visit.

* List of immunizations current as of May 1, 2009

** Includes metabolic, genetic, and endocrine screenings. If done under 24 hours of age, must be repeated by one week of age.

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Recommended Schedule of Care at Well-Child Visits: 12 Months to 9 Years

		Age in Months					Age in Years							
		12	15	18	24	30	3	4	5	6	7	8	9	
History														
Measurements	Length/Height and Weight													
	Head Circumference													
	Weight for Length (Obesity screening ≤ 24 months of age)													
	Body Mass Index (Obesity screening ≥ 2 years of age)													
	Blood Pressure													
Sensory Screening	Vision													
	Hearing													
Developmental/ Behavioral Assessment	Developmental Screening													
	Autism Screening													
	Developmental Surveillance													
	Psychosocial/Behavioral Assessment													
Physical Examination	Examination of the Body													
Procedures	Immunization* Diphtheria, Tetanus, Pertussis (DTaP or Tdap) <i>Haemophilus influenzae</i> type b (HepB) Hepatitis A (HepA) Hepatitis B (HepB) Inactivated Poliovirus (IPV) Influenza Measles, Mumps, Rubella (MMR) Meningococcal Pneumococcal (PCV) Varicella (Chicken Pox)	<p>Given how often vaccine recommendations change, consult the Centers for Disease Control and Prevention (CDC)/Advisory Committee on Immunization Practices (ACIP) or the American Academy of Pediatrics (AAP) web sites for the most up to date information:</p> <p>CDC Vaccines and Immunizations: http://www.cdc.gov/vaccines/</p> <p>American Academy of Pediatrics Red Book: http://aapredbook.aappublications.org/</p>												
	Iron Deficiency Screening	Recommendation Forthcoming												
	Lead Screening													
	Obesity													
	Tuberculin Test													
	Oral Health and Dental Caries Prevention													

Preventive Care Visit		To be performed at visit.
		Recommended for those at risk as determined by healthcare provider.
Oral Health and Dental Caries Prevention		To be performed by a dentist at a separate visit.

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Recommended Schedule of Care at Well-Child Visits: 10 to 21 years

		Age in Years													
		10	11	12	13	14	15	16	17	18	19	20	21		
History															
Measurements	Blood Pressure														
	Body Mass Index (Obesity screening of height and weight)														
Sensory Screening	Vision														
	Hearing														
Developmental/ Behavioral Assessment	Developmental Surveillance														
	Psychosocial/Behavioral Assessment														
	Alcohol and Drug Use Assessment														
Physical Examination	Examination of the Body														
Procedures	Immunization* Diphtheria, Tetanus, Pertussis (Dtap, Tdap or Td) Hepatitis A (HepA) Hepatitis B (HepB) Human Papillomavirus (Females) (HPV) Inactivated Poliovirus (IPV) Influenza Measles, Mumps, Rubella (MMR) Meningococcal Pneumococcal (PCV) Varicella (Chicken Pox)	<p>Given how often vaccine recommendations change, consult the Centers for Disease Control and Prevention (CDC)/Advisory Committee on Immunization Practices (ACIP) or the American Academy of Pediatrics (AAP) web sites for the most up to date information:</p> <p>CDC Vaccines and Immunizations: http://www.cdc.gov/vaccines/</p> <p>American Academy of Pediatrics Red Book: http://aapredbook.aappublications.org/</p>													
	Cervical Dysplasia														
	Iron Deficiency Screening	Recommendation Forthcoming													
	Lipid Screening														
	Tobacco Screening														
	HIV and STI Screening														
	Tuberculin Test														
	Oral Health and Dental Caries Prevention														

Preventive Care Visit		To be performed at visit.
		Recommended for those at risk as determined by healthcare provider.
Oral Health and Dental Caries Prevention		To be performed by a dentist at a separate visit.

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Recommended Schedule of Care for Women: 18 to 75 years

		Age in Years												
		18	25	30	35	40	45	50	55	60	65	70	75	
History														
Measurements	Blood Pressure					At least every 2 years								
	Body Mass Index (Obesity screening of height and weight)													
Sensory Screening	Vision					Every 2 to 4 years					Every year			
	Hearing										As Nec.			
Behavioral Assessment	Alcohol and Drug Use Assessment													
	Psychosocial/Behavioral Assessment													
Physical Examination	Examination of the Body													
Procedures	Immunization* Diphtheria, Tetanus, Pertussis (Dtap, Tdap or Td) Hepatitis A (HepA) Hepatitis B (HepB) Human Papillomavirus (Females) (HPV) Inactivated Poliovirus (IPV) Influenza Measles, Mumps, Rubella (MMR) Meningococcal Pneumococcal (PCV) Varicella (Chicken Pox) Herpes Zoster	<p>Given how often vaccine recommendations change, consult the Centers for Disease Control and Prevention (CDC)/Advisory Committee on Immunization Practices (ACIP) or the American Academy of Pediatrics (AAP) web sites for the most up to date information:</p> <p>CDC Vaccines and Immunizations: http://www.cdc.gov/vaccines/</p> <p>American Academy of Pediatrics Red Book: http://aapredbook.aappublications.org/</p>												
	Breast Cancer Screening													
	Cervical Dysplasia Screening													
	Colorectal Cancer Screening													
	Iron Deficiency Screening	For pregnant women												
	Lipid Screening: Women	Beginning at age 20												
	Osteoporosis													
	HIV and STI Screening													
	Tobacco Use Screening													
	Tuberculin Test													
	Oral Health and Dental Caries Prevention													

Preventive Care Visit		To be performed at visit.
		Recommended for those at risk as determined by healthcare provider.
Oral Health and Dental Caries Prevention		To be performed by a dentist at a separate visit.

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RECOMMENDED SCHEDULE OF CARE DESCRIPTIONS

HISTORY

A brief history of recent and past health related developments can provide the health care professional with a better understanding of you or your child's health to guide their work.¹

MEASUREMENTS

Height and Weight or Length/Height and Weight

An assessment of growth is an important indicator of health. This begins at birth.

- Persons younger than 2 years: Length and weight should also be calculated in lieu of body mass index (BMI) (see BMI below).¹
- Persons older than 2 years: Weight and height are used to calculate BMI.¹

Head Circumference

The head is measured to chart appropriate growth patterns.¹ This begins at birth and ends at 24 months.

Blood Pressure

Hypertension (abnormally high blood pressure) is related to strokes, liver failure, heart disease, congestive heart failure and peripheral vascular disease in adults. This condition can be hereditary and can begin in childhood. Screening is necessary to begin proper treatment early.²

Body Mass Index (BMI)

BMI-for-age charts are available from the Centers for Disease Control and Prevention (see the resource section). BMI should be calculated beginning at ages 2 at every visit. BMI is a good sign of being underweight or overweight and can help to begin a discussion about these problems.¹ Screening can help identify children who are at risk for becoming overweight and can help identify those who may need further assessment or treatment for a weight problem.³ This begins at 24 months.

SENSORY SCREENING

Vision

Examination of the eyes should take place beginning in the newborn period and at all later well-child care visits. All children who fail the vision assessment

or have an abnormality should be referred to an optometrist or pediatric ophthalmologist.

Hearing

Detection of hearing loss though newborn hearing screening as well as screening though adolescence is vital in preventing speech, language, brain development and mental health delays.³

DEVELOPMENTAL/BEHAVIORAL ASSESSMENT

Alcohol and Drug Use Assessment

Clinicians should ask patients about their alcohol and drug use and counseling and referring those with suspected drug or drinking problems to age-appropriate treatment.⁴ This can begin at age 11.

Psychosocial/Behavioral Assessment

Mental, emotional and behavioral disorders are most effectively treated when they are addressed early.³ Unless properly diagnosed and consistently treated, children and adolescents with mental health and behavioral problems are at risk for more serious disorders or co-occurring disorders that can become disabling in adulthood. Screenings for depression should begin at age 12.

Developmental Screening/Surveillance

Surveillance of development is a core function of every well-child visit. In addition, at 9, 18 and 30, children should receive a developmental screening using a standardized test to help identify problems in social-emotional, communication, cognitive or physical development. Screening can uncover a possible delay or disability that may require further assessment, intervention or treatment.^{1,4}

Autism screening

In addition to general developmental screening, children should be evaluated with an autism-specific screening tool at preventive care visits at 18 and 24 months.¹

PHYSICAL EXAMINATION

The clinician should examine all parts of the body to help detect any areas of concern. This should be done at each visit beginning at birth.

PROCEDURES

Immunizations

Being immune to a disease means that people have enough defenses in their bodies to avoid a disease or infection; immunizations provide that protection through one or a series of shots. Vaccines introduce weakened or dead germs into the body, giving the body an opportunity to develop resistance to a disease without needing to suffer disease symptoms or be at risk of complications.

Diphtheria, Tetanus, Pertussis

- Diphtheria is an acute bacterial illness that affects the tonsils, throat, nose or skin. It causes a thick covering in the back of the throat and can lead to breathing problems, paralysis, heart failure and even death.
- Tetanus (Lockjaw) causes painful tightening of the muscles, usually all over the body. It can lead to “locking” of the jaw so victims cannot open their mouth or swallow.
- Pertussis (Whooping Cough) causes coughing spells so extreme that it is hard to eat, drink or breathe. These spells can last for weeks. Pertussis can lead to pneumonia, seizures (jerking and staring spells), brain damage and death.

Haemophilus influenzae type b (Hib)

Hib is a dangerous disease caused by bacteria that can cause meningitis, an inflammation of the lining around the brain and spinal cord that is deadly. Hib can also cause pneumonia, severe swelling of the throat, as well as infections of the blood, joints, bones, and covering of the heart.

Hepatitis A (HepA)

Hepatitis A is an acute liver disease caused by the HepA virus, lasting from a few weeks to several months. It is a food-borne illness. HepA can include “flu-like” symptoms, yellowing of the skin and eyes, severe stomach pains and diarrhea.

Hepatitis B (HepB)

Hepatitis B is a liver disease caused by the HepB virus (HBV). It ranges in severity from a mild illness including “flu-like” symptoms, yellowing of the skin and eyes and severe stomach pains and diarrhea and can lead to a serious long-term illness, which in turn, can lead to liver disease or liver cancer.

Human Papillomavirus (HPV)

HPV is the term for more than 100 different strains of virus. More than 40 of these HPV strains can infect male and female genital areas. Most HPV infections don’t cause any symptoms and go away on their own. HPV is important mainly because it can cause cervical cancer in women.

Influenza

Influenza, often referred to as “the flu,” is an illness caused by a family of viruses. These viruses infect the respiratory tract, symptoms involving the chest, nose and throat (e.g., coughing, sneezing, runny nose) are frequently reported. Other common symptoms of influenza include fevers, headaches, body aches, nausea, lethargy and dizziness.

Measles, Mumps, Rubella (MMR)

- Measles is an acute respiratory viral disease that occurs primarily in children. This disease is characterized by a rash, fever, cough, runny nose and eye irritation. Measles may lead to encephalitis (inflammation of the brain) and death.
- Mumps is an infectious viral illness characterized by fever, headache, and swelling of the salivary glands. It can lead to deafness, meningitis, painful swelling of the testicles or ovaries, and, rarely, death.
- Rubella is a moderately contagious viral disease. Among children, the primary symptom is a rash. Adults, on the other hand, may experience a low-grade fever, a general feeling of sickness, swelling of the lymph nodes and upper respiratory symptoms before the rash appears. The rubella-associated rash appears first on the face and progresses from head to foot. If contracted during pregnancy, rubella may result in congenital rubella syndrome, which can cause brain damage and deafness in the child.

Meningococcal Disease

Meningococcal disease is a bacterial infection that can cause many health problems, including meningitis, a deadly inflammation of the lining of the brain and spinal cord.

Polio

Polio is a disease caused by a virus that enters the body through the mouth. While it is sometimes a mild disease, severe cases can cause paralysis. Paralysis can prevent the movement of arms and legs and can kill by paralyzing the muscles that help breathing.

Pneumococcal Disease

Pneumococcal pneumonia is caused by bacteria. Symptoms include pneumococcal disease (high fever, cough and shortness of breath), bacteremia (fever and feeling poorly in general) and meningitis (fever, headache, thinking slowly or not clearly).

Rotavirus

Rotavirus is a virus that causes severe diarrhea, mostly in babies and young children. It is often accompanied by vomiting and fever.

Varicella (Chicken Pox)

Varicella is a highly infectious disease caused by the varicella-zoster virus. Symptoms include generalized itchy blisters that appear on the trunk, face and scalp. Other symptoms include fever and headaches.

Zoster

Shingles, also known as herpes zoster, is a painful rash that is caused by infection with the varicella zoster virus, the virus that causes chicken pox. Early symptoms of the illness include a burning, tingling pain or itch localized on one side of the face, neck, shoulders, or trunk of the body with mild or severe pain. Within days, a rash of fluid-filled blisters will appear in the same region of the body. Other symptoms include fever, headache, chills and upset stomach.

Breast Cancer Screening

Breast cancer screening may include mammography performed by an x-ray, digital imaging or MRI and possibly a clinical/manual breast exam. The digital mammography and magnetic resonance imaging (MRI) screening methods are only recommended for women who meet specific criteria.⁵

For women at average risk of developing breast cancer, a baseline mammography at age 40 is recommended with screenings every one to two years after age 40.⁵

Women at high risk and those at moderately increased risk for breast cancer should begin mammography screenings before age 40 and combine them with an MRI.⁵

For more information about breast cancer risk factors, visit the Centers for Disease Control's website: <http://www.cdc.gov/CANCER/breast/>

Cervical Dysplasia Screening

All women who have a cervix should be screened for cervical cancer. Screening should begin within three years of the onset of sexual activity or age 21 (whichever occurs first) and continue every three years until age 65 for normal-risk women.⁴

Colorectal Cancer Screening

Men and women between the ages of 50 and 75 should be screened for colorectal cancer at appropriate time intervals. The purpose of screening for colorectal cancer is to find precancerous polyps so that they can be removed before they become cancerous, thus preventing the development of a tumor. Screening can also identify cancer early in the course of the disease when treatment is most effective and the chance of recovery is high. Approved screenings include: fecal occult blood testing (FOBT), flexible sigmoidoscopy (in combination with FOBT), or colonoscopy.⁶

Iron Deficiency Screening

Iron deficiency is a condition resulting from not enough iron in the body which can delay normal infant motor and mental functioning. Because of their rapid growth, infants and toddlers need more iron than older children. Sometimes it can be hard for them to get enough iron from their normal diet. Screening recommendation for children is forthcoming.

Human Immunodeficiency Virus (HIV) and Sexually Transmitted Infection Screening (STI)

It is recommended that clinicians routinely screen patients who are sexually active and at risk for chlamydia, gonorrhea and HIV.⁴ Pregnant women and those at higher risk should be screened for syphilis. Screening for STIs is particularly important because many STIs do not cause obvious symptoms until the disease is advanced.

Lead Screening

Routine screening for elevated blood lead levels occur at 12, 24, and 30 months. Some states require blood screening at different intervals based on geographic risks. All children should be evaluated for individual risk; additional screening of those with risk factors helps identify lead-exposed children and possible lead poisoning. Elevated lead levels in children can cause learning disabilities, behavioral problems and other serious health problems. Children are most commonly exposed to lead in homes dating from before the 1970s that have lead paint which chips away as dust particles. The dust can contaminate nearby soil. Intervention may be needed to reduce blood lead levels.³

Lipid Screening (cholesterol)

Adults with a family history of high cholesterol or heart disease, or stroke; those whose family history is unknown; and those with other risk factors for heart disease including, obesity, high blood pressure or diabetes, should have their cholesterol levels screened through a fasting lipid profile. Women at risk for coronary heart disease should be screened beginning at age 20.

Newborn Screening for Genetic and Endocrine Disorders

Newborns should be screened at birth or shortly thereafter for conditions that are harmful but not immediately apparent conditions. Newborns are screened for metabolic disorders (where the body doesn't process nutrients well enough to support healthy tissues and produce energy), hormone imbalances, hemoglobin, and other inherited disorders that affect a child's development. Most

states have their own mandatory newborn screening programs that require screening for a range of anywhere from 4 to 30 disorders.^{3,7}

Osteoporosis

Osteoporosis is a disorder that thins the bones and can lead to fractures. Common fracture sites are the wrist, hip, spine and forearm. This condition is most common in women over the age of 60.⁸ Screening can be done by a bone density scan.

Tobacco Use Screening

Children at risk for tobacco use should be screened for tobacco use. All patients should be routinely asked about their tobacco usage beginning at age 18. Those who use tobacco should be provided with counseling and tobacco cessation interventions. Tobacco use among adolescents impairs how the lungs grow and function and can increase respiratory illness. Smoking cessation lowers the risk for heart disease, stroke, cancer and lung disease.³

Tuberculin Test

People at high risk for tuberculosis (TB) as determined by their health care provider should be screened yearly to identify infection and TB disease early. Individuals with TB and latent TB infections (TB infections which do not cause any symptoms) should be treated in order to prevent transmission to others as well as progression of latent TB infections to disease.¹

Oral Health and Tooth Decay Prevention

Early dental visits with a regular source of dental care are recommended by the first birthday to establish a pattern of preventive dental maintenance among children. These visits can also detect tooth decay and reduce future dental risk by improving oral health. Tooth decay is caused by the acid byproducts of oral bacteria. It causes pain and requires restorative treatment to prevent further decay and infection. Dental sealants are used to prevent tooth decay in children.³

References

1. Hagan JF, Shaw JS, Duncan P, eds. *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents*. 3rd ed. Elk Grove Village, IL: American Academy of Pediatrics; 2007.
2. Bright Futures at Georgetown University. *Bright Futures in Practice: Physical Activity in Children and Adolescents*. Available at: http://www.brightfutures.org/physicalactivity/intro/006_011.html. Accessed September 30, 2008.
3. Campbell KP, editor. *Investing in maternal and child health: An employer's toolkit*. Washington, DC: Center for Prevention and Health Services, National Business Group on Health; 2007.
4. Campbell KP, Lanza A, Dixon R, Chattopadhyay S, Molinari N, Finch RA, editors. *A Purchaser's Guide to Clinical Preventive Services: Moving Science into Coverage*. Washington, DC: National Business Group on Health; 2006.
5. Sowa M, Flood G. *Benefit manager guide: Screening mammography: Examining the effectiveness of new technologies*. Washington, DC: Institute on Health Care Costs and Solutions, National Business Group on Health; 2008.
6. U.S. Preventive Services Task Force. *Screening for colorectal cancer*. Available at: <http://www.ahrq.gov/CLINIC/uspstf/uspscolo.htm>. Accessed On April 20, 2009.
7. Braithwaite RS, Rosen AB. Linking cost sharing to value: An unrivaled yet unrealized public health opportunity. *Ann Intern Med*. 2007;146(8):602-605.
8. U.S. Department of Health and Human Services. *Bone health and osteoporosis: A report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services, Office of the Surgeon General; 2005.

Additional Resources

General Resources for Parents:

The American Academy of Pediatrics: <http://www.aap.org>
American Academy of Family Physicians: <http://www.familydoctor.org>
Bright Futures: Resources for Families: <http://brightfutures.aap.org/>
Healthy Life Stages: <http://www.cdc.gov/LifeStages/>
Kids Health: Resources for parents, kids, and adolescents: <http://kidshealth.org/>

Cancer Prevention and Control:

<http://www.cdc.gov/cancer/>
American Cancer Society: <http://www.cancer.org/>

Vaccines and Immunizations:

<http://www.cdc.gov/vaccines/>
Immunization Action Coalition: <http://www.immunize.org/>

Overweight and Obesity:

<http://www.cdc.gov/nccdphp/dnpa/obesity/>
Healthy Weight—It's not just a diet, it's a lifestyle: <http://www.cdc.gov/healthyweight/index.html>

Sexual Health:

<http://www.cdc.gov/sexualhealth/>
The National Campaign to Prevent Teen and Unplanned Pregnancy: <http://www.thenationalcampaign.org>

Smoking and Tobacco:

<http://www.cdc.gov/tobacco/>
Campaign for Tobacco-Free Kids: <http://tobaccofreekids.org/abc/frameset.htm>

Child Development:

<http://www.cdc.gov/ncbddd/child/>
Family Voices: <http://www.familyvoices.org/>
“Learn the Signs. Act Early” to recognize developmental disabilities:
www.cdc.gov/ncbddd/autism/ActEarly/default.htm

Healthy Life Stages:

<http://www.cdc.gov/LifeStages/>



**National
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Center for Prevention and Health Services

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Written by:

Georgette Flood

Program Associate, Center for Prevention and Health Services

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The Center houses Business Group projects related to the delivery of prevention and health services through employer-sponsored health plans and worksite programs. Employers should look to the Center for:

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- Analyses of model programs from other employers.
- Findings from recent clinical and health service research.

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Center for Prevention and Health Services

National Business Group on Health

50 F Street N.W., Suite 600 • Washington, DC 20001

Phone (202) 628-9320 • Fax (202) 628-9244 • www.businessgrouphealth.org

Helen Darling, President, National Business Group on Health

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