Preventive Guidelines for Children

We encourage you and your family members to receive the preventive screenings and immunizations recommended in the following guidelines.

Ages Birth through 2 Years

Physical Screenings—Your child's routine visit includes, but is not limited to:

General physical exam

Head circumference measurement

Height and weight measurements

Hip dislocation screening to 12 months

Vision and hearing screening by observation

Immunization history

Developmental screening at 9, 18 and 30 months

Autism screening at 18 and 24 months

Other Screenings

Hemoglobin and/or hematocrit or CBC by 12 months

Tuberculosis screening for high-risk members by 15 months

Lead toxicity screening for high-risk members-discuss with your PCP

Exam Schedule

Newborn	9 months
3-5 days	12 months
By 1 month	15 months
2 months	18 months
4 months	24 months
6 months	30 months



Immunizations—You should discuss all immunizations with your PCP.

Туре	Schedule
Hepatitis B (Hep B)	At birth and 1–2 months; third dose between 6 and 18 months
Polio	Two doses by 4 months; third dose between 6 and 18 months
Rotavirus	Doses at 2 and 4 months; one at 6 months, if appropriate
Pneumococcal conjugate (PCV)	Three doses by 6 months; fourth dose between 12 and 15 months
Haemophilus influenzae type B (HiB)	Three doses by 6 months; fourth dose between 12 and 15 months
Diphtheria, tetanus, pertussis (DTaP/DTP)	Three doses by 6 months; fourth dose between 15 and 18 months
Hepatitis A (Hep A)	Two doses between 12 and 23 months
Influenza	An annual flu shot is recommended for all children ages 6 months and older
Measles, mumps, rubella (MMR)	One dose between 12 and 15 months
Varicella (chicken pox)	Between 12 and 15 monthsSources: AAP and CDC

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This information does not take the place of recommendations made by your physician. Consult your physician for guidance on this and other health information. Recommendations on this chart should not be interpreted as your benefit package. Please refer to your contract for information regarding benefits and exclusions.

Preventive Guidelines for Children

We encourage you and your family members to receive the preventive screenings and immunizations recommended in the following guidelines.

Ages 3 through 17 Years

Physical Screenings—Your child's routine visit includes, but is not limited to:

Medical history update

General physical exam

Height and weight measurements

Body mass index (BMI)

Blood pressure screening, starting at age 3

Immunization history

Vision and hearing screening

Psychosocial/behavioral assessment

Lead toxicity screening for high-risk members

Tuberculosis screening for high-risk members

Cholesterol screening for high-risk members

Developmental surveillance

Chlamydia screening for sexually active females, ages 17 years and under

Depression

Early recognition of symptoms and evaluation by a health care provider

Exam Schedule

Ages 3–17, annually

Immunizations—You should discuss all immunizations with your PCP.

Туре	Schedule	
Diphtheria, tetanus, pertussis (DTaP/DTP)	Once, ages 4–6	
Tetanus-diphtheria pertussis (Tdap)	Ages 11–12, or 13–18 if not given between ages 11 and 12 years	
Human papillomavirus (HPV)	Three doses for females at ages 11–12, or 13–17 if not received by age 12; can be as early as age 9	
Meningococcal	Once, ages 11–12, or before high school entry if not previously vaccinated	
Influenza	An annual flu shot is recommended for all children ages 24 months-18 years	
Measles, mumps, rubella (MMR)	Once, ages 4–6, or 11–12 if not given at ages 4–6	
Varicella (chicken pox)	Once, between ages 4 and 6 years	
Polio	Once, between ages 4 and 6 years	
Hepatitis B (Hep B)	If not given in infancy	
Hepatitis A (Hep A)	For certain high-risk individuals	
Pneumococcal	For certain high-risk individuals Sources: AAP and CDC	

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