

Capital **District Physicians' Health Plan** Preventive Health Guidelines for Adolescents/Teenagers

	13 - 20 Years*
Periodic Health Visit <i>Frequency</i> <i>History</i> <i>Physical</i>	<ul style="list-style-type: none"> • Annually. • History, including screening for depression and developmental/behavioral assessment to include diet, activity, tobacco, drug abuse, and sexual practices. • Physical as appropriate to age to include weight, height, blood pressure and vision and hearing screening. Calculate BMI.
Lab/Tests	<ul style="list-style-type: none"> • Hgb or Hct x1 • H/H annually on all menstruating adolescents. • Sexually active adolescents should be screened by PAP, VDRL, HIV, GC & Chlamydia as appropriate - may be referred • Urinalysis age 16 and yearly for sexually active male and female adolescents <p><u>High Risk:</u></p> <ul style="list-style-type: none"> • Cholesterol Screening – For ages 13-21 years. • Hgb or Hct - every other year • Urinalysis – annually • Tuberculin Test yearly
Immunizations	<ul style="list-style-type: none"> • HBV – (catchup) if not previously given. • HPV -all females at age 11-12; may be given as early as age 9; catch up to age 26 • Hep A if not previously given. • Influenza vaccine for 6 months to 18 years old. • Meningococcal conjugate vaccine for all persons age 11-18 at earliest opportunity • MMR - second dose if no prior second dose. • PPV (high risk) • Td booster every 10 years. • Tdap booster at age 13-18 if not given at age 11-12. • At age 13 Varicella using 2 doses required if no documentation of natural disease.
Other	<ul style="list-style-type: none"> • Fluoride supplements if inadequate community water fluoridation (to age 16). • Assess TB risk/screen via PPD as needed.
Counseling	<ul style="list-style-type: none"> • Diet education; Review BMI; Ensure adequate calcium and Vit. D intake. • Exercise promotion/media limitation • Solar protection • Reading promotion/media limitation • Safety and injury prevention to include seat belt and helmet use. • Substance use/abuse prevention. • Self-exam of breasts/testes x1. • Sexual practice safety to include HIV risk review and prevention of unintended pregnancy. • Behavioral/developmental counseling. • Education regarding violence prevention • Dental care assessment.

"High Risk" - include all Select Plan members (Recommendations currently under review by NYSDOH)

Target Groups for Immunization

- Children age 7-18 years with mod-severe asthma, chronic ASA therapy - annual flu immunization
- Children with chronic heart disease, chronic lung disease (not asthma), chronic metabolic disease (DM), renal dysfunction, hemoglobinopathies, immunosuppression (HIV, steroid, organ transplant, asplenia): age 7 – 18 years+ : annual flu immunization; age 5 years+ - if not already immunized, PCV7 or 23 PS pneumococcal immunization x1.

Developed from U.S. Preventive Services Task Force 2005, and guidelines from AAFP and AAP.
Guidelines reviewed and approved by CDPHP QM Committee 07/2009
Immunizations updated and reviewed by QMC 1/20/2009

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