

Maryland Healthy Kids Preventive Health Schedule

Components	Infancy (months)								Early Childhood (months)								Late Childhood (yrs)						Adolescence (yrs)						
	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
Health History and Development																													
Medical and family history/update	X	X	X	→	→	→	→	X	→	→	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Peri-natal history	X	X	X	→	→	→	→	→	→	→																			
Psycho-social/environmental assessment/update	X	X	X	→	→	→	→	X	→	→	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Developmental Surveillance (Subjective)		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Developmental Screening (Standard Tools) ¹							X	→	→	X	X	→																	
Autism Screening										X	X	→																	
Mental health/behavioral assessment													X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Substance abuse assessment																					X	X	X	X	X	X	X	X	X
Depression Screening																					X	X	X	X	X	X	X	X	X
Physical Exam																													
Systems exam	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Vision/hearing assessments ²	O ²	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S
Oral/dentition assessment	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Nutrition assessment	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Measurements and graphing:	Height and Weight	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
	Head Circumference	X	X	X	X	X	X	X	X	X	X																		
	BMI										X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Blood Pressure ³												X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Risk Assessments by Questionnaire																													
Lead assessment by questionnaire						X	X	X	X	X	X	X	X	X															
Tuberculosis *		X	→	→	→	→	X					X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Heart disease/cholesterol *										X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Sexually transmitted infections (STI) *																				X	X	X	X	X	X	X	X	X	X
Anemia *																				X	X	X	X	X	X	X	X	X	X
Laboratory Tests																													
Hereditary/metabolic hemoglobinopathy	X		X	→																									
Blood lead Test							X	→	→	X	→	→	→	→															
Anemia Hgb/Hct							X	→	→	X	→	→	→	→															
Dyslipidemia Test																			X	→	→							X	→
Immunizations																													
History of immunizations	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Vaccines given per schedule	X	→	→	X	X	X	→	X	X	X	→	→	→	→	→	→	→	→	→	→	X	X	→	→	→	→	→	→	→
Health Education																													
Age-appropriate education/guidance	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Counsel/referral for identified problems	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Dental education/referral							X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Scheduled return visit	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Key : X Required → Required if not previously done S Subjective by history /observation O Objective by standardized testing * Counseling/testing required when positive	<p>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 required for abnormal results. ³Blood Pressure measurement in infants and children with specific risk conditions should be performed at visits before age 3 years.</p>																												