

UnitedHealthcare has adopted preventive care guidelines based on the recommendations of the U.S. Preventive Services Task Force (USPSTF). Benefit coverage for individual health services often includes age ranges or frequency of service that are more liberal than those adopted by USPSTF. Individuals with symptoms or at high risk for disease may need additional services or more frequent interventions. Please direct questions to your personal physician. The table below is only a summary.

These guidelines are recommendations for preventive health care; the services listed may or may not be included in, or covered by your benefit plan.

Clinical Preventive Services for Children and Adolescents (Birth to 18 Years)

Only if mother HBsAg(-)

Range of Recommended Ages

Catch-up Immunization

Pre-adolescent Assessment

IMMUNIZATION

Vaccine ▼	Age ►	Birth	1 mo	2 mos	4 mos	6 mos	12 mos	15 mos	18 mos	24 mos	4-6 yrs	11-12 yrs	13-18 yrs
Hepatitis B		HepB#1											
			HepB#2										
Diphtheria, Tetanus, Pertussis			DTaP	DTaP	DTaP			DTaP			DTaP	Tdap	Tdap
Haemophilus Influenzae Type b			Hib	Hib	Hib			Hib					
Inactivated Poliovirus			IPV	IPV				IPV			IPV		
Measles, Mumps, Rubella								MMR#1			MMR#2		MMR#2
Varicella								Varicella					Varicella
Pneumococcal			PCV	PCV	PCV			PCV			PCV	PPV	
Influenza								Influenza (yearly)					Influenza (yearly)
Hepatitis A													Hepatitis A Series
Meningococcal Vaccine													

▲
Age 15 for
unvaccinated

SCREENING

Age	Screening Test	Frequency
Newborn	Newborn screening (PKU, sickle cell, hemoglobinopathies, hypothyroidism)	Once
Birth-2 months	Head circumference	Periodically
Birth-18 years	Height and weight	Periodically
1 year	Lead	Once
3-4 years	Eye screening	Once
Younger than 5 years	Dental	Periodically

COUNSELING

As your child grows, talk to their doctor about:

- Development
- Dental and oral health
- Child abuse
- Sexually transmitted diseases
- Nutrition
- Safety
- Alcohol and drug abuse
- Birth control
- Physical activity
- Tobacco use
- Sexuality