



Reaffirmed Policy Statement—Pediatric Primary Health Care

FREE

COMMITTEE ON PEDIATRIC WORKFORCE

This policy statement first appeared in the November 1993 issue of *AAP News* and was reaffirmed in September 2010. A 1-word change has been made: “family oriented” was replaced with “family centered.”

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Primary health care is described as accessible and affordable, first contact, continuous and comprehensive, and coordinated to meet the health needs of the individual and the family being served.

Pediatric primary health care encompasses health supervision and anticipatory guidance; monitoring physical and psychosocial growth and development; age-appropriate screening; diagnosis and treatment of acute and chronic disorders; management of serious and life-threatening illness and, when appropriate, referral of more complex conditions; and provision of first contact care as well as coordinated management of health problems requiring multiple professional services.

Pediatric primary health care for children and adolescents is family centered and incorporates community resources and strengths, needs and risk factors, and sociocultural sensitivities into strategies for care delivery and clinical practice. Pediatric primary health care is best delivered within the context of a “medical home,” where comprehensive, continuously accessible and affordable care is available and delivered or supervised by qualified child health specialists.

The pediatrician, because of training (which includes 4 years of medical school education, plus an additional 3 or more years of intensive training devoted solely to all aspects of medical care for children and adolescents), coupled with the demonstrated interest in and total professional commitment to the health care of infants, children, adolescents, and young adults, is the most appropriate provider of pediatric primary health care.

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