



2019 Recommendations for Preventive Pediatric Health Care

COMMITTEE ON PRACTICE AND AMBULATORY MEDICINE, BRIGHT FUTURES PERIODICITY SCHEDULE WORKGROUP

The 2019 Recommendations for Preventive Pediatric Health Care (Periodicity Schedule) have been approved by the American Academy of Pediatrics (AAP) and represent a consensus of AAP and the Bright Futures Periodicity Schedule Workgroup. Each child and family is unique; therefore, these recommendations are designed for the care of children who are receiving competent parenting, have no manifestations of any important health problems, and are growing and developing in a satisfactory fashion. Developmental, psychosocial, and chronic disease issues for children and adolescents may require frequent counseling and treatment visits separate from preventive care visits. Additional visits also may become necessary if circumstances suggest variations from the normal.

The AAP continues to emphasize the great importance of continuity of care in comprehensive health supervision and the need to avoid fragmentation of care.¹

The Periodicity Schedule will not be published in *Pediatrics*. Readers are referred to the AAP Web site (www.aap.org/periodicitieschedule) for the most recent version of the Periodicity Schedule and the full set of footnotes. This process will ensure that health care professionals have the most current recommendations. The Periodicity Schedule will be reviewed and revised annually to reflect current recommendations.

Following are the changes made to the Periodicity Schedule since it was last published in April 2017.

BLOOD PRESSURE

Footnote 6 has been updated to read, "Screening should occur per 'Clinical Practice Guideline for Screening and Management of High Blood Pressure in Children and Adolescents' (<http://pediatrics.aappublications.org/content/140/3/e20171904>). Blood pressure measurement in infants and children with specific risk conditions should be performed at visits before age 3 years."

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The guidance in this statement does not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate.

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ANEMIA

Footnote 24 has been updated to read, “Perform risk assessment or screening, as appropriate, per recommendations in the current edition of the AAP *Pediatric Nutrition: Policy of the American Academy of Pediatrics* (Iron chapter).”

LEAD

Footnote 25 has been updated to read, “For children at risk of lead exposure, see ‘Prevention of Childhood Lead Toxicity’ (<http://pediatrics.aappublications.org/content/138/1/e20161493>) and ‘Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention’ (https://www.cdc.gov/nceh/lead/ACCLPP/Final_Document_030712.pdf).”

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ABBREVIATION

AAP: American Academy of
Pediatrics

REFERENCE

1. Hagan JF, Shaw JS, Duncan PM, eds. *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents*. 4th ed. Elk Grove Village, IL: American Academy of Pediatrics; 2017

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