

2023-2024



*Preventive
Health
Guidelines*



VENTURA COUNTY
HEALTH CARE PLAN
A Department of Ventura County Health Care Agency

Well Child Visits

CHILDHOOD IS A TIME OF RAPID GROWTH and change, frequent well child visits are important to ensure proper growth and development and for preventive guidelines.

Special attention is paid to whether the child has met the normal developmental milestones. After the baby is born, the first visit should be within 2 weeks. Thereafter, visits should occur at the following points:

- By 2, 4, 6, 9 months
- 1 year
- 15 months
- 18 months
- 2, 3, 4, 5, 6, 7, 8, 9, 10 years
- Each year after until age 21

It is important that your child have at least six well child visits by 15 months old.



Contact your primary care provider to discuss the care that is appropriate for you.

2023 Recommended Immunizations for 2024 Children from Birth Through 6 Years Old

VACCINE	Birth	1 MONTH	2 MONTHS	4 MONTHS	6 MONTHS	12 MONTHS	15 MONTHS	18 MONTHS	19-23 MONTHS	2-3 YEARS	4-6 YEARS
HepB Hepatitis B	HepB	HepB			HepB						
RV* Rotavirus			RV	RV	RV*						
DTaP Diphtheria, Pertussis, & Tetanus			DTaP	DTaP	DTaP		DTaP				DTaP
Hib* <i>Haemophilus influenzae</i> type b			Hib	Hib	Hib*		Hib				
PCV13, PCV15 Pneumococcal disease			PCV	PCV	PCV		PCV				
IPV Polio			IPV	IPV			IPV				IPV
COVID-19** Coronavirus disease 2019								COVID-19**			
Flu* Influenza								Flu (One or Two Doses Yearly)*			
MMR Measles, Mumps, & Rubella							MMR				MMR
Varicella Chickenpox							Varicella				Varicella
HepA* Hepatitis A							HepA*		HepA*		

FOOTNOTES

RV* **Hib***
Administering a third dose at age 6 months depends on the brand of Hib or rotavirus vaccine used for previous dose.

COVID-19** Number of doses recommended depends on your child's age and type of COVID-19 vaccine used.

Flu* Two doses given at least 4 weeks apart are recommended for children age 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.

HepA* Two doses of Hep A vaccine are needed for lasting protection. The 2 doses should be given between age 12 and 23 months. Both doses should be separated by at least 6 months. Children 2 years and older who have not received 2 doses of Hep A should complete the series.

ADDITIONAL INFORMATION

1. If your child misses a shot recommended for their age, talk to your child's doctor as soon as possible to see when the missed shot can be given.

2. If your child has any medical conditions that put them at risk for infection (e.g., sickle cell, HIV infection, cochlear implants) or is traveling outside the United States, talk to your child's doctor about additional vaccines that they may need.

Talk with your child's doctor if you have questions about any shot recommended for your child.



FOR MORE INFORMATION
Call toll-free: 1-800-CDC-INFO (1-800-232-4636)
Or visit: cdc.gov/vaccines/parents

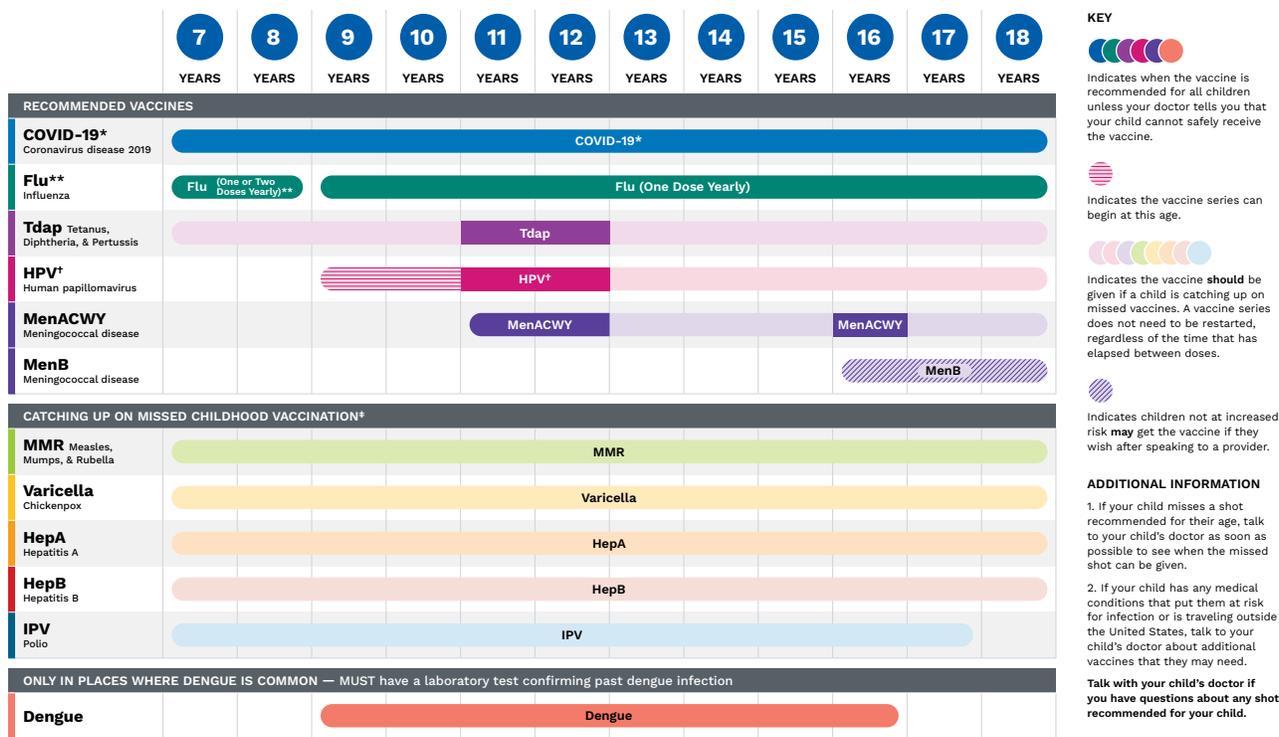


Childhood Immunization

VACCINES PREVENT DISEASE IN PEOPLE WHO OBTAIN THEM and protect those who come into contact with unvaccinated individuals. Vaccines are responsible for the control of many communicable diseases that were once widespread in this country, including polio, measles, diphtheria, pertussis (whooping cough), rubella (German measles), mumps, tetanus, and Haemophilus influenza type b (Hib). Before vaccines, many children died from diseases that vaccines now inhibit, such as whooping cough, measles, and polio. Those same germs exist today, but babies are now protected by vaccines, so we do not see these diseases as frequently. Immunizing individual children also improves the wellbeing of our community, especially those people who are not immunized. People who are not immunized include those who are too young to be vaccinated, those who cannot be vaccinated for medical reasons (example: children with leukemia), and those who cannot make a satisfactory response to vaccination.

Contact your VCHCP Primary Care Provider to discuss the vaccination that is appropriate for your child.

When Do Children and Teens Need Vaccinations?



FOOTNOTES

COVID-19* Number of doses recommended depends on your child's age and type of COVID-19 vaccine used.

Flu** Two doses given at least 4 weeks apart are recommended for children age 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.

HPV† Ages 11 through 12 years old should get a 2-shot series separated by 6 to 12 months. The series can begin at 9 years old. A 3-shot series is recommended for those with weakened immune systems and those who start the series after their 15th birthday.

*Originally recommended age ranges for missed childhood vaccinations: 2-dose series of **MMR** at 12–15 months and 4–6 years; 2-dose series of **Varicella** at 12–15 months and 4–6 years; 2-dose series of **HepA** (minimum interval: 6 months) at age 12–23 months; 3-dose series of **HepB** at birth, 1–2 months, and 6–18 months; and 4-dose series of **Polio** at 2 months, 4 months, 6–18 months, and 4–6 years.



FOR MORE INFORMATION
Call toll-free: 1-800-CDC-INFO (1-800-232-4636)
Or visit: cdc.gov/vaccines/parents



American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN™

Lead Screening

WE WOULD LIKE TO REMIND YOU OF THE IMPORTANCE OF HAVING your child screened for lead toxicity. Lead screening is recommended for children at 12 months and by age 24 months. All children under the age of 6 years old are at danger for lead poisoning because they are growing so quickly and because they have a tendency to put their hands or other objects, which may be tainted with lead dust, into their mouths. Lead exposure in young children is of particular concern because children absorb lead more easily than adults and children's developing nervous systems are mainly vulnerable to the undesirable effect of lead.

LEAD POISONING IS WHEN THERE IS TOO MUCH LEAD IN THE BODY. The body carries the lead in the blood to soft tissues and bones where it can be stored for many years. Lead harms several organs, including the nervous system and kidneys. Lead poisoning is fully preventable, and it is caused by exposure to lead that is either eaten or inhaled, in the form of dust. The key is stopping children from coming into contact with lead.

There are many ways parents can diminish a child’s exposure to lead such as:

- **Lead hazards in a child’s environment** must be recognized and controlled or removed safely. Lead-based paint and lead tainted dust are the main sources of exposures for lead in U.S. children. All houses built before 1978 are likely to contain some lead-based paint. The deterioration of this paint causes a problem. Make sure your child does not have contact to peeling paint or chewable surfaces painted with lead-based paint.
- **Frequently wash children’s hands and toys.** Stay away from using containers or cookware that is not shown to be lead free.
- **Remove recalled toys and jewelry** right away from children.

Contact your VCHCP Primary Care Provider to discuss lead screening for your child.

Well Child Visits for Adolescents

Although you/your child will be making less frequent visits to his/her primary care doctor now that your child is older, his/her growth and development will still need to be closely monitored. Check ups are generally done every year until age 21. Contact your primary care provider to discuss the care that is appropriate for you.

PEDIATRIC SCREENING AND PREVENTION GUIDELINES

This guideline is a distillation of recommendations from the medical literature, including: American Academy of Pediatrics (AAP). This U.S. Preventive Services Task Force; Institute for Clinical Systems Improvement (ICS). These guidelines apply to those who do not have symptoms of disease or illness. Each child and family is unique; therefore, recommendations for preventive pediatric health care 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 satisfactory fashion. Additional visits may be necessary if circumstances suggest variations from normal.

AGE	INFANCY									EARLY CHILDHOOD						MIDDLE CHILDHOOD						ADOLESCENCE													
	Prenatal	Newborn	3-5 d	By 1 mo	2 mo	4 mo	6 mo	9 mo	12 mo	15 mo	18 mo	24 mo	30 mo	3 y	4 y	5 y	6 y	7 y	8 y	9 y	10 y	11 y	12 y	13 y	14 y	15 y	16 y	17 y	18 y	19 y	20 y	21 y			
HISTORY Initial/Interval	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•		
MEASUREMENTS																																			
Length/Height and Weight		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•		
Head Circumference		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•		
Weight for Length		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•		
Body Mass Index														•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•		
Blood Pressure		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•		
SENSORY SCREENING																																			
Vision		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
Hearing		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
DEVELOPMENTAL/SOCIAL/ BEHAVIORAL/MENTAL HEALTH																																			
Maternal Depression Screening							•	•	•	•																									
Developmental Screening																																			
Autism Spectrum Disorder Screening																																			
Developmental Surveillance		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
Behavioral/Social/Emotional Screening		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
Tobacco, Alcohol, or Drug Use Assessment																																			
Depression and Suicide Risk Screening																																			
PHYSICAL EXAMINATION		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
PROCEDURES																																			
Newborn Blood		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
Newborn Bilirubin		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
Critical Congenital Heart Defect		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
Immunization		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
Anemia																																			
Lead																																			
Tuberculosis																																			
Dyslipidemia																																			
Sexually Transmitted Infections																																			
HIV																																			
Hepatitis B Virus Infection		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Hepatitis C Virus Infection																																			
Sudden Cardiac Arrest/Death																																			
Cervical Dysplasia																																			
ORAL HEALTH																																			
Fluoride Varnish																																			
Fluoride Supplementation																																			
ANTICIPATORY GUIDANCE	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	

Immunization for Adolescents

VACCINES PREVENT DISEASE IN PEOPLE who obtain them and protect those who come into contact with unvaccinated individuals.

Vaccines suggested for adolescents are underused, leaving our nation’s teens susceptible to serious morbidity, even death. Vaccines are responsible for the control of many communicable diseases that were once widespread in this country, including polio, measles, diphtheria, pertussis (whooping cough), rubella (German measles), mumps, tetanus, Haemophilus influenzae type b (Hib), meningitis, influenza and Human Papilloma Virus (HPV). Please note that as of October 25, 2011, the Advisory Committee on Immunization Practices (ACIP) recommends that all 11-12 year-old males be vaccinated against HPV. Please consult your Primary Care Physician.”

Contact your VCHCP Primary Care Provider to discuss the vaccination that is appropriate for your child.

Schools in California are now requiring that all adolescents in 7th to 12th grade receive the Tdap vaccine. Tdap vaccine is a covered benefit for the Plan and there is no co-payment required for this preventive service.

Vaccinations for Preteens and Teens

Age 11-19 Years

Getting immunized is a lifelong, life-protecting job. Make sure you and your healthcare provider keep your immunizations up to date. Check to be sure you’ve had all the vaccinations you need.

VACCINE	DO YOU NEED IT?
Chickenpox (varicella; Var)	Maybe. If you haven’t been vaccinated and haven’t had chickenpox, you need 2 doses of this vaccine. Anybody who was vaccinated with only 1 dose should get a second dose.
COVID-19	YES! A hepatitis A vaccine series is recommended for all people age 1–18 years. If you started a series, but didn’t complete it, you can just finish from where you left off.
Hepatitis A (HepA)	Maybe. If you haven’t been vaccinated, you need 2 doses of this vaccine. Anybody who was vaccinated with only 1 dose should get a second dose.
Hepatitis B (HepB)	Maybe. A hepatitis B vaccine series is recommended for all people age 0–18 years. If you started a series, but didn’t complete it, you can just finish from where you left off. received it.
Haemophilus influenzae type b (Hib)	Maybe. If you haven’t been vaccinated against Hib and have a high-risk condition (such as a non-functioning spleen), you need this vaccine.
Human Papillomavirus (HPV)	YES! HPV vaccine is routinely given to preteens at age 11 or 12 but may be started at age 9. Older teens who haven’t been vaccinated will need 2 or 3 doses. This vaccine protects against HPV, a common cause of several types of cancer.
Influenza (Flu)	YES! To stay healthy and active, you need an annual influenza vaccination every fall or winter for the rest of your life.
Measles, Mumps, Rubella (MMR)	Maybe. You need 2 doses of MMR vaccine if you have not already received them. MMR vaccine is usually given in childhood.
Meningococcal ACWY (MenACWY, MCV4)	YES! All preteens and teens need 2 doses of MenACWY vaccine, the first at age 11–12 years and the second at age 16 years. If you are a first-year college student living in a residence hall, you need a dose of MenACWY if you never received it or received it when you were younger than 16. If you have an on-going high-risk health condition, you will also need boosters. Ask your healthcare provider if you have a risk factor.
Meningococcal B (MenB)	YES! Teens who want to be protected from meningitis type B should receive 2 doses of MenB vaccine starting at age 16. Teens with certain risk conditions (such as a non-functioning spleen) should be vaccinated also, and receive boosters if their risk is ongoing. Ask your healthcare provider if you have a risk factor.
Pneumococcal	Maybe. Do you have an ongoing health condition? If so, check with your healthcare provider to find out if you need one or two types of pneumococcal vaccines.
Polio (IPV)	Maybe. You need a series of at least 3 doses of polio vaccine if you have not already received them. Polio vaccine is usually given in childhood.
Tetanus, diphtheria, & whooping cough (pertussis; Tdap)	YES! All preteens and teens (and adults!) need a dose of Tdap vaccine, a vaccine that protects you from tetanus, diphtheria, and whooping cough (pertussis). After getting a dose of Tdap, you will need a Tdap or tetanus-diphtheria (Td) shot every ten years. If you become pregnant, you will need another dose of Tdap during every pregnancy, preferably during the third trimester.



FOR PROFESSIONALS www.immunize.org / FOR THE PUBLIC www.vaccineinformation.org

Will you be traveling outside the United States? Visit the Centers for Disease Control and Prevention’s (CDC) website at wwwnc.cdc.gov/travel/destinations/list for travel information, or consult a travel clinic.

03/2023

Adult Preventive Care

Contact your VCHCP Primary Care Provider to make an appointment for your preventive care visit and to discuss the preventive care services that are appropriate for you.

Vaccinations for Adults - You're NEVER too old to get vaccinated!

Getting vaccinated is a lifelong, life-protecting job. Don't leave your healthcare provider's office without making sure you've had all the vaccinations you need.

VACCINE	DO YOU NEED IT?
COVID-19	YES! All adults need to be up to date on COVID-19 vaccination. Talk to your healthcare provider.
Hepatitis A (HepA)	Maybe. You need this vaccine if you have a specific risk factor for hepatitis A* or simply want to be protected from this disease. The vaccine is usually given in 2 doses, 6–18 months apart.
Hepatitis B (HepB)	YES! All adults younger than 60 are recommended to complete a 2- or 3-dose series of hepatitis B vaccine, depending on the brand. You also need this vaccine if you are 60 or older and have a specific risk factor,* or you simply want to be protected from infection. All adults should be screened for hepatitis B infection with a blood test at least one time; talk with your healthcare provider.
Hib (Haemophilus influenzae type b)	Maybe. Some adults with certain high-risk conditions,* for example, lack of a functioning spleen, need vaccination with Hib. Talk to your healthcare provider to find out if you need this vaccine.
Human Papillomavirus (HPV)	YES! You should get this vaccine if you are 26 years or younger. Adults age 27 through 45 may also be vaccinated against HPV after a discussion with their healthcare provider. The vaccine is usually given in 2 or 3 doses (depending on the age at which the first dose was given) over a 6-month period.
Influenza (Flu)	YES! You need to be vaccinated against influenza every fall or winter for your protection and for the protection of others around you.
Measles, Mumps, Rubella (MMR)	Maybe. You need at least 1 dose of MMR vaccine if you were born in 1957 or later. You may also need a second dose.* People with weakened immune systems should not get MMR vaccine.*
Meningococcal ACWY (MenACWY)	Maybe. You may need MenACWY vaccine if you have one of several health conditions,* for example, if you do not have a functioning spleen, and also boosters if your risk is ongoing. You need MenACWY if you are a first-year college student living in a residence hall and (1) you have not had a dose since turning 16, or (2) it has been more than 5 years since your last dose. Anyone age 19 through 21 can have a catch-up dose if they have not had one since turning 16.
Meningococcal B (MenB)	Maybe. You may need MenB if you have one of several health conditions,* for example, if you do not have a functioning spleen, and also boosters if your risk is ongoing. If you are age 16 through 23, you can discuss getting MenB vaccine with your healthcare provider, even if you don't have a high-risk condition.
Pneumococcal (PPSV23; PCV15, PCV20)	YES! Adults younger than 65 with certain underlying medical conditions (e.g., chronic heart disease) or other risk factors need pneumococcal vaccine. All adults age 65 and older also need to be vaccinated if they haven't previously received a pneumococcal conjugate vaccine (PCV). Your healthcare provider can determine what vaccine, if any, you may need.
Tetanus, diphtheria, whooping cough (pertussis) (Tdap, Td)	YES! If you have not received a dose of Tdap during your lifetime, you need to get a Tdap shot now. After that, you need a Tdap or Td booster dose every 10 years. Consult your healthcare provider if you haven't had at least 3 tetanus- and diphtheria-toxoid containing shots sometime in your life or if you have a deep or dirty wound.
Varicella (Chickenpox)	Maybe. If you have never had chickenpox, never were vaccinated, or were vaccinated but only received 1 dose, talk to your healthcare provider to find out if you need this vaccine.
Zoster (Shingles)	YES! If you are 19 or older and have a weakened immune system or are 50 or older, you should get a 2-dose series of the Shingrix brand of shingles vaccine.

*Consult your healthcare provider to determine your level of risk for infection and your need for this vaccine.

Are you planning to travel outside the United States? Visit the Centers for Disease Control and Prevention's (CDC) website at wwwnc.cdc.gov/travel/destinations/list for travel information, or consult a travel clinic.



FOR PROFESSIONALS www.immunize.org / FOR THE PUBLIC www.vaccineinformation.org

06/2023

Breast Cancer Screening

Contact one of the following providers to discuss the care that is appropriate for you:

- Your VCHCP Primary Care Provider
- Your VCHCP OB/GYN Provider

KEY FACTS:

- Mammograms can find breast cancer early, when it's easier to treat.
- Most breast lumps are not caused by cancer; many conditions can cause them.
- Breast cancer symptoms vary, and some women don't have symptoms.
- Men can get breast cancer, but it is not very common. For every 100 cases of breast cancer, less than 1 is in men.

PREVENTION TIPS:

- Keep a healthy weight and exercise regularly.
- Limit the amount of alcohol you drink.
- If you are taking hormone replacement therapy or birth control pills, ask your doctor about the risks and find out if it is right for you.
- Know your family history of breast cancer. If you have a close relative with breast cancer, ask your doctor how you can manage your risk.
- A mammogram can't prevent breast cancer, but it can help find it early. Talk to your health care provider about whether screening is right for you.
- Breast cancer screening means checking a woman's breasts for cancer before she has any symptoms. A mammogram is an X-ray picture of the breast. Mammograms are the best way to find breast cancer early, when it is easier to treat and before it is big enough to feel or cause symptoms.
- Most women who are 40 to 74 years old should have a screening mammogram every two years. If you think that you may have a higher risk of breast cancer, ask your doctor when to have a screening mammogram.

Colorectal Cancer Screening

Contact your VCHCP Primary Care Provider to discuss the care that is appropriate for you.

KEY FACTS:

- The best way to reduce your colorectal cancer risk is to get screened regularly beginning at age 45.
- Colorectal cancer affects men and women of all racial and ethnic groups.
- Colorectal polyps and colorectal cancer don't always cause symptoms, especially at first.

PREVENTION TIPS:

- If you're 45 years old or older, talk to your doctor about getting screened.
- If you're younger than 45 years old but may have a higher risk of colorectal cancer, ask your doctor if you should start screening before age 45.
- Learn your family history of cancer and tell your doctor if you think you may have a higher risk.
- Don't smoke.

- Get enough physical activity and limit your alcohol consumption.
- Talk to your doctor if you have blood in or on your stool (bowel movement); stomach pain, aches, or cramps that don't go away; or are losing weight and you don't know why.
- Presently, the recommendation for colorectal screening is to begin at age 45 or older, and sooner for those who are at high risk for developing colorectal cancer. Special screening programs are used for those with family history of colorectal cancer and for those who are at high risk. There are several acceptable methods for colorectal cancer screening which includes fecal occult blood testing annually, sigmoidoscopy every 5 years or colonoscopy every 10 years.

Content source: Centers for Disease Control and Prevention

Cervical Cancer Screening

KEY FACTS:

- If you're 30 years old or older, you have three options: you can get a Pap test only, an HPV test only, or both an HPV and a Pap test together. If your test results are normal, you can wait three years to be tested again if you had a Pap test only, or five years to be tested again if you had an HPV test only or both an HPV test and a Pap test together.
- If your test results are not normal, talk to your doctor. Cervical cancer is highly curable when found and treated early.
- HPV is the main cause of cervical cancer. Get kids vaccinated against HPV at age 11 to 12 to help prevent cervical and other kinds of cancer.
- Early cervical cancer may not cause symptoms. Advanced cervical cancer may cause abnormal vaginal bleeding or discharge.

VCHCP is aware that some women may need PAP tests more often than every two years or some women may not have a need for screening PAP tests. Contact one of the following providers to discuss the care that is appropriate for you:

- **Your VCHCP Primary Care Provider**
- **Your VCHCP OB/GYN Provider**

PREVENTION TIPS:

- The most important thing you can do to help prevent cervical cancer is to get screened regularly.
- If you're 26 years old or younger, get the HPV vaccine.
- Use condoms during sex.
- Limit your number of sexual partners.
- Don't smoke.

