

U.S. Department of Health
and Human Services

Agency for Healthcare
Research and Quality

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The Pocket Guide to Good Health for Children



AHRQ Pub. No. 04-IP004-A
Interim Revision
May 2004



U.S. Department of Health
and Human Services



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What’s in This Guide

This guide has information that will help you keep your child healthy and safe. Here is what is included in each section.

1. Your Child’s Doctors and Nurses. The tips in this section will help you ask your child’s doctor or nurse the right questions and get the right answers. You will see examples of questions throughout this booklet.

Note: Although we refer only to doctors and nurses here, the information in this booklet applies to all the health care professionals you consult for your child.

2. Check-Ups, Tests, and Immunizations. This section explains why it’s important to take your child to the doctor regularly, lists the immunizations (shots) your child needs, and provides other health information.

3. Growth and Development. Some of the activities children perform in infancy and early childhood are covered in this section. Information on good nutrition for babies and children is also provided.

4. Your Child in the World. Topics in this section include injury prevention, tobacco use, child abuse, and more. A safety checklist for children is included to help prevent accidental injury.

5. For More Information. This section lists organizations to contact for more information about child health and safety.

6. Keeping Track of Your Child's Health. This section offers charts and checklists to help you keep track of your child's doctor visits, immunizations and tests, and illnesses. You may want to bring this booklet with you when you take your child to the doctor and have the doctor or nurse record any care your child receives.



Your Child's Doctors and Nurses



“I take my son’s and daughter’s health very seriously. If we’re at the pediatrician’s office and I don’t understand something, I ask. I’ve probably asked more questions than any 10 parents put together. And the doctor answered every one.”

James J.

Ask

Ask questions. If you don’t understand what your child’s doctor or nurses say, ask them to explain. Always ask about any medicines or tests they say your child needs. If you don’t ask, they may think you have all the information you want or need.

Let your doctors and nurses know if you need more time to ask questions about your child’s health. If the doctor doesn’t have time that day, you may be able to talk to another doctor or nurse, schedule another appointment, or find out when you can call later to speak to someone.

Some doctors and health plans have call-in lines. If you call, you can speak to an advice nurse.

All through this booklet are Ask Your Child’s Doctor or Nurse questions. They are examples of the kinds of questions you may want to ask.

Tell

Your child’s health history. Tell your child’s doctors and nurses about your child’s health history. For example, tell them about:

- Any major diseases your child has had.
- Any operations your child has had.
- Your family’s history of diseases and conditions. For example, if diabetes runs in your family, let your child’s doctor know.

Your child’s health now. Only you can tell the doctor what your infant’s health is like. As your child gets older, he or she can let the doctor know “where it hurts,” but you will be the main source of information about your child’s health for many years. It is important to tell the doctor and nurses about:

- Any and all signs of illness that your child has.
- Any medications, herbs, or supplements such as vitamins that your child is taking.
- Any other doctor, chiropractor, acupuncturist, or therapist that your child is seeing.

- Any allergies or reactions to medicines that your child has.

Don't hesitate to report personal information. Feel free to talk about your beliefs and concerns about your child's health. You don't need to wait to be asked.

Follow Up

- Once you leave the doctor's office, follow up.
- If you have questions, call the doctor's office.
- If your child has any problems with his or her medicine, call your doctor or your pharmacist.
- If your child needs to see a specialist or get a test, make the appointment or ask your doctor's office to make the appointment.
- If you do not hear from your child's doctor or nurse about test results, call and ask. If you don't understand the results, ask what they mean.



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Check-ups, Tests, and Immunizations



“I remember how nervous I was when I had to get shots when I was a kid. Now I know how serious many childhood diseases can be and how lucky I was not to have them. I’m going to make sure that my daughter gets all of her vaccinations on schedule so she’ll be protected.”

Alice R.

Regular Check-Ups

Check-ups allow your doctor to review your child’s growth and development, perform tests, or give shots. To help your doctor get a full picture of your child’s health, bring this booklet with you to each visit and keep the forms in the Keeping Track of Your Child’s Health section starting on page 35 up to date.

Check-ups also are a good time for parents to ask questions. Make a list of your questions and concerns and bring it with you. The doctor will have answers to many questions about your child, such as whether your child is eating too much or too little,

whether he or she seems uncoordinated, or what to do if your child isn’t sleeping well.

Some authorities recommend check-ups at ages 2-4 weeks; 2, 4, 6, 9, 12, 15, and 18 months; and 2, 3, 4, 5, 6, 8, 10, 12, 14, 16, and 18 years.

Some children may need to be seen more often, others less.



Ask your child’s doctor or nurse:

How often should my child have a check-up?

When should we come back for our next check-up?

Newborn Screening

Certain blood tests should be done before your baby is 7 days old. They are usually done just before your baby leaves the hospital. If the blood tests were done earlier than 24 hours after birth, a repeat test at 1 to 2 weeks of age is recommended. Common newborn screening tests include those for phenylketonuria (PKU), thyroid, and sickle cell disease.

Immunizations

Immunizations (shots) protect your child from many serious diseases. Below is a list of immunizations and when most children should receive them. Some children, for example those with chronic illnesses or those in certain areas of the country, may need to follow a different schedule. Your child's doctor can help you decide which immunizations your child needs and when. Be sure to talk with the doctor or nurse about possible reactions and what you should do if your child has one.

- Hepatitis B: At birth, 1-4 months, and 6-18 months.
- Diphtheria, Tetanus, Pertussis: At 2 months, 4 months, 6 months, 15-18 months, and 4-6 years.
- Tetanus-Diphtheria: At 11-12 years.
- *Haemophilus Influenzae* Type B: At 2 months, 4 months, 6 months, and 12-15 months. Depending on the type of vaccine your doctor uses, the 6-month dose may not be needed.
- Inactivated Poliovirus: At 2 months, 4 months, 6-18 months, and 4-6 years
- Measles, Mumps, Rubella: At 12-15 months and 4-6 years. Children who have not previously received the second dose should receive it by 11-12 years.
- Chickenpox (Varicella): At 12-18 months if your child lacks a reliable history of chickenpox.

- Pneumococcal disease (PCV vaccine): At 2 months, 4 months, 6 months, and 12-15 months.
- Pneumococcal disease (PPV vaccine): Recommended in addition to PCV for certain high-risk groups. Ask your doctor.
- Hepatitis A: For children in selected areas or in certain high risk groups. At 2 years or older, two doses at least 6 months apart. Ask your doctor.
- Influenza: Yearly for children 6 months or older with risk factors such as asthma, cardiac disease, sickle cell disease, HIV, and diabetes; and household members of persons in groups at high risk. Government experts recently recommended that all children aged 6 to 23 months receive annual influenza vaccine starting in the fall of 2004. Immunization schedules for influenza may change. For the latest information, check with your doctor or go to: <http://www.cdc.gov/flu/>.

From time to time, other immunization schedules may change, too. Check with your doctor or go to: <http://www.cdc.gov/nip>.



Ask your child's doctor or nurse:

What should I do if my child wasn't immunized according to schedule during infancy?

Vision and Hearing

Your child's vision should be tested by the age of 5. Your child may also need vision tests as he or she grows. Some experts also recommend hearing testing beginning at 3 to 4 years of age.

If at any age your child has any of the vision or hearing warning signs listed below, be sure to talk with your child's doctor.

Vision Warning Signs

- Eyes turning inward (crossing) or outward
- Squinting
- Headaches
- Not doing as well in school work as before
- Blurred or double vision

Hearing Warning Signs

- Poor response to noise or voice
- Slow language and speech development
- Abnormal-sounding speech

Warning: Listening to very loud music, especially with earphones, can permanently damage your child's hearing.



Lead

Lead can harm your child, slowing physical and mental growth and damaging many parts of the body. The most common way children get lead poisoning is by being around old house paint that is chipping or peeling. Some authorities recommend lead tests at 1 and 2 years of age.

Look at the questions below. If you answer "yes" to any of them, it may mean that your child needs lead tests earlier and more often than other children.

Has your child:

- Lived in or regularly visited a house built before 1950? (This could include a day care center, a preschool, the home of a babysitter or relative, etc.)
- Lived in or regularly visited a house built before 1978 (the year lead-based paint was banned for residential use) with recent, ongoing, or planned renovation or remodeling?

- Had a brother or sister, housemate, or playmate been followed or treated for lead poisoning?



Ask your child's doctor or nurse:

How can I find out if lead paint was used in my home?

Turberculosis

Children may need a tuberculosis skin test if they have had close contact with a person who has tuberculosis (TB), live in an area where TB is more common than average (such as a Native American reservation, a homeless shelter, or an institution), or have recently moved from Asia, Africa, Central America, South America, the Caribbean, or the Pacific Islands.



Growth and Development



“When my son didn’t walk on his own by the time he was 18 months old, I began to worry. But the doctor told us that each child develops at his or her own pace. Sure enough, in another couple of months, we were having trouble keeping up with him!”

Adam K.

Measurements

Your child’s doctor or nurse will measure your child’s height and weight regularly. Your child’s head size will also be measured during the first 2 years of life. Keep track of the child’s growth in the Growth Record on page 44. These measurements will help you and your doctor know whether your child is growing properly.



Ask your child’s doctor or nurse:

Are my child’s height and weight normal for his or her age?

Milestones

Children develop at different rates. This table shows the ages by which most young children develop certain abilities. It is normal for a child to do some of these things later than the ages noted here. If your child does not do many of these things at the ages given or if you have questions about his or her development, talk with your child’s doctor or nurses.

2 Months

- Smiles, coos.
- Watches a person, follows with eyes.

4 Months

- Laughs out loud.
- Lifts head and chest when on stomach, grasps objects.

6 Months

- Babbles, turns to sound.
- Rolls over, supports head well when sitting.

9 Months

- Responds to name, plays peek-a-boo
- Sits alone, crawls, pulls up to standing.

1 Year

- Waves bye-bye, says mama or dada.
- Walks when holding on, picks up objects with thumb and first finger.

18 Months

- Says three words other than mama or dada, scribbles.
- Walks alone, feeds self using spoon.

2 Years

- Puts two words together, refers to self by name.
- Runs well, walks up stairs without help.

3 Years

- Knows age, helps button clothing, washes and dries hands.
- Throws ball overhand, rides tricycle.

4 Years

- Knows first and last name, tells a story, counts four objects.
- Balances on one foot, uses children's scissors.

5 Years

- Names 4 colors, counts 10 objects.
- Hops on one foot, dresses self.

Nutrition

What your child eats is important for his or her health. Follow the nutrition guidelines below.

Guidelines for a Healthy Diet

Birth to 2 Years Old:

- Breast milk is the best single food for infants from birth to 6 months of age. It provides good nutrition and protects against infection. Breast-feeding should be continued for at least the first year, if possible. If breast-feeding is not possible or not desired, iron-enriched formula (not cow's milk) should be used during the first 12 months of life. Whole cow's milk can be used to replace formula or breast milk after 12 months of age.
- Breast-fed babies, particularly if dark skinned, who do not get regular exposure to sunlight may need to receive Vitamin D supplements.
- Begin suitable solid foods at 4 to 6 months of age. Most experts recommend iron-enriched infant rice cereal as the first food.
- Start new foods one at a time to make it easier to identify problem foods. For example, wait 1 week before adding each new cereal, vegetable, or other food.
- Use iron-rich foods, such as grains, iron-enriched cereals, and meats.
- Do not give honey to infants during the first 12 months of life.

- Do not limit fat during the first 2 years of life.

Two Years and Older:

- Provide a variety of foods, including plenty of fruit, vegetables, and whole grains.
- Use salt (sodium) and sugars in moderation.
- Encourage a diet low in fat, saturated fat, and cholesterol.
- Help your child maintain a healthy weight by providing proper foods and encouraging regular exercise.



Ask your child's doctor or nurse:

How can I make sure my child eats healthy foods?

Physical Activity

Your child needs regular physical activity through play and sports to stay fit. Good physical activity habits learned early can help your child become an active and healthy adult. Adults who are physically active are less likely to be overweight or to have heart disease, high blood pressure, and other diseases. Adults and children should try to get at least 30 minutes of physical activity most days of the week.

- Encourage your child to participate in physical activities, including sports.

- Encourage involvement in activities that can be enjoyed into adulthood (for example, walking, running, swimming, basketball, tennis, golf, dancing, and bicycle riding).
- Plan physical activities with family or friends; exercise is more fun with others.
- Limit the time your child spends watching TV to less than 2 hours per day. Encourage going to the playground, park, gym, or swimming pool instead.
- Physical activity should be fun. Don't make winning the only goal.
- Many communities and schools offer exercise or sports programs—find out what is available for your child.

Dental and Oral Health

Your child needs regular dental care starting at an early age. Talk with your dentist to schedule the first visit. Good oral health requires good daily care. Follow these guidelines.

For Babies:

- If most of your child's nutrition comes from breast-feeding, or if you live in an area with too little fluoride in the drinking water (less than .3 ppm for children younger than 2 years, less than .7 ppm for children older than 2 years), your child may need fluoride drops or tablets. Ask your child's doctor or your local water department about the amount of fluoride in your water and note it here: ____ ppm.

- Don't use a baby bottle as a pacifier or put your child to sleep with a baby bottle. This can cause tooth decay and ear infections.
- Keep your infant's teeth and gums clean by wiping with a moist cloth after feeding.
- When multiple teeth appear, begin gently brushing your infant's teeth using a soft toothbrush and a very small (pea-sized) amount of toothpaste with fluoride.

For Older Children:

- Talk with your dentist about dental sealants. They can help prevent cavities in permanent teeth.
- Use dental floss to help prevent gum disease. Talk with your dentist about when to start.
- Do not permit your child to smoke or chew tobacco. Set a good example: don't use tobacco products yourself.
- If a permanent tooth is knocked out, rinse it gently and put it back into the socket or in a glass of cold milk or water. Take your child and the tooth to a dentist immediately.



Ask your child's doctor or nurse:

Does my child need a fluoride supplement?

When should my child visit the dentist for the first time?

How often should my child get dental check-ups?

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Your Child in the World



“When my daughter first got her bicycle, a helmet was part of the deal. She never gets on the bike without putting on her helmet.”

Maria G.

Injury Prevention

More children die from injuries than any other cause. The good news is that most injuries can be prevented by following simple safety guidelines. Talk with your doctor about ways to protect your child from injury.

Safety Guidelines Checklist

Read the list below and check off each guideline that you and your family already follow. Work on those you don't.

Infants and Young Children

- Use a car seat at all times until your child weighs at least 40 pounds.
- Car seats must be properly secured in the back seat, preferably in the middle.

- Keep medicines, cleaning solutions, and other dangerous substances in childproof containers, locked up and out of reach of children.
- Use safety gates across stairways (top and bottom) and guards on windows above the first floor.
- Keep hot water heater temperatures below 120 F.
- Keep unused electrical outlets covered with plastic guards.
- Provide constant supervision for babies using a baby walker. Block the access to stairways and to objects that can fall (such as lamps) or cause burns (such as stoves or electric heaters).
- Keep objects and foods that can cause choking away from your child. This includes things like coins, balloons, small toy parts, hot dogs (unmashed), peanuts, and hard candies.
- Use fences that go all the way around pools, and keep gates to pools locked.

Older Children

- Use car seat belts at all times.
- Children should use a car booster seat until they are tall enough so that the lap belt stays on their hips and the shoulder belt crosses their shoulder.
- Make sure your child wears a helmet while rollerblading or riding a bicycle.
- Make sure your child uses protective equipment for rollerblading and skateboarding (helmet, wrist and knee pads).

- Warn your child of the dangers of using alcohol and drugs. Many driving and sports-related injuries are caused by the use of alcohol and drugs.

For All Ages

- Use smoke detectors in your home. Change the batteries every year and check once a month to see that they work.
- If you have a gun in your home, make sure that the gun and ammunition are locked up separately and kept out of children's reach.
- Never drive after drinking alcohol.
- Use car seat belts at all times.
- Teach your child traffic safety. Children under 9 years of age need supervision when crossing streets.
- Teach your children how and when to call 911.
- Learn basic life-saving skills (CPR).
- Keep a bottle of ipecac at home to treat poisoning. Talk with a doctor or the local Poison Control Center before using it. Post the number of the Poison Control Center near your telephone and write it in the space on the "Important Information" form on page 36. Also, be sure to check the expiration date on the bottle of ipecac to make sure it is still good.

A Special Message About SIDS. Sudden infant death syndrome (SIDS) is the leading cause of death for infants. Put infants to sleep on their backs to decrease the risk of SIDS.



Ask your child's doctor or nurse:

Where can I learn how to perform CPR on infants and young children?

What kind of car safety seat does my child need?

Tobacco Use

Using tobacco in any form is harmful to you and can harm your child's health. Tobacco use—smoking and/or chewing tobacco—causes cancer, heart disease, and other serious illnesses. Children exposed to tobacco smoke are more likely to get infections of the ears, sinuses, and lungs. Smoking in the home may also cause lung cancer in family members who do not smoke.

Discourage your child from using tobacco in any form. If you smoke, ask your doctor about getting help to quit.

Child Abuse

Child abuse is a hidden, serious problem. It can happen in any family. The scars, both physical and emotional, can last a lifetime. Because children can't protect themselves, we must protect them.

Ways To Prevent Child Abuse

- Teach your child not to let anyone touch him or her inappropriately.
- Tell your child to say “No” and run away from sexual touches.
- Take any reports by your child of physical or sexual abuse seriously.
- Report any abuse to your local or State child protection agency.
- Local Hotline: _____
- If you feel angry and out of control, leave the room, take a walk, take deep breaths, or count to 100. Don't drink alcohol or take drugs. These can make your anger harder to control. If you are afraid you might harm your child, get help now. Call someone and ask for help. Talk with a friend or relative, other parents, your clergy, or your doctor. Take time for yourself.



- Share child care between parents, trade babysitting with friends, or use day care.

The Teen Years

As your child grows up, he or she will face many important health issues not included in this booklet. Some examples are:

- Alcohol
- Drugs
- Sexuality
- Sexually Transmitted Diseases
- Birth Control

Talk to your child's doctor about these important issues—even while your child is still young. You may want to get further assistance from the resources listed on the following pages.

Start early to teach your child to make responsible choices—irresponsible choices can have a lifelong



Ask your child's doctor or nurse:

When should I talk to my child about sex?

effect. Your child needs you. Take the time to “be there” for your child—listening, advising, and supporting. The rewards will be well worth the effort, now and in the future.

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**For More
Information**

If you would like more information about how to help your child stay healthy, talk with your child's doctor or other health care provider. You can also get information from the resources listed below.

General Child Health Information

American Academy of Pediatrics

847-228-5005, ext. 5100

<http://www.aap.org>

National Institute of Child Health and Human Development

National Institutes of Health

U.S. Department of Health and Human Services

<http://www.nichd.nih.gov/publications/health.cfm>

U.S. Department of Health and Human Services
Specific Populations
Web Site

<http://www.hhs.gov/specificpopulations/index.shtml>

(From menu, choose “adolescents and teens” or “children.”)

Alcohol and Drugs

National Clearinghouse for Alcohol and Drug Information

Substance Abuse and Mental Health Services Administration

U.S. Department of Health and Human Services

1-800-729-6686

<http://www.health.org>

National Institute on Alcohol Abuse and Alcoholism

National Institutes of Health

U.S. Department of Health and Human Services

301-443-3860

<http://www.niaaa.nih.gov>

National Institute on Drug Abuse

National Institutes of Health

U.S. Department of Health and Human Services

301-443-1124

<http://www.drugabuse.gov>

Child Abuse

National Clearinghouse on Child Abuse and Neglect Information

<http://nccanch.acf.hhs.gov/index.cfm>

Food and Drug Safety

Office of Consumer Affairs

Food and Drug Administration

U.S. Department of Health and Human Services

1-888-463-6332

<http://www.fda.gov/opacom/morecons.html>

Immunizations

Centers for Disease Control and Prevention

U.S. Department of Health and Human Resources

1-800-232-SHOT

<http://www.cdc.gov/nip>

Vaccine Adverse Event Reporting System

1-800-822-7967

<http://www.vaers.org>

Maternal and Child Health

Maternal and Child Health Bureau

U.S. Department of Health and Human Services

301-443-2170

<http://www.ask.hrsa.gov/MCH.cfm>

Safety and Injury Prevention

U. S. Consumer Product Safety Commission

1-800-638-CPSC

<http://www.cpsc.gov>

National Highway Traffic Safety Administration

Child Passenger Safety

1-800-424-9393

<http://www.nhtsa.dot.gov/CPS/>

National SAFEKIDS Campaign

202-662-0600

<http://www.safekids.org>

Sexually Transmitted Diseases (STDs) and AIDS

Centers for Disease
Control and Prevention
(CDC)
U.S. Department of Health
and Human Services
CDC National HIV, AIDS,
and STD Hotline
1-800-342-2437
1-800-458-5231 (TTY)

CDC National Prevention
Information Network
1-800-458-5231
1-800-243-7012 (TTY)
<http://www.cdcnpin.org/>



**Keeping Track
of Your Child's
Health**

Important Information

Child's Name: _____

Date of Birth: _____

Parent/Guardian Names: _____

Home Telephone: _____

Work Telephones: _____

Address: _____

Important Health Problems/Allergies: _____

Medications Taken Regularly: _____

Doctor Names and Phone Numbers: _____

Dentist's Name and Phone Number: _____

Health Insurance Numbers: _____

Pharmacy Names and Phone Numbers: _____

Poison Control Center Number: _____

Health Care Visit and Illness Record

Use this chart to keep track of your child's health care visits. Also use this chart to keep track of your child's illnesses (such as ear infections or flu) and

injuries (such as broken bones). A record of childhood illnesses and injuries will be useful even when your child is an adult.

Date	Illness/Reason for Visit	Treatment/Medication

Immunization Record

Use this chart or an official immunization card to keep track of your child's immunizations. See page 10 for more information on immunizations. Significant reactions should be recorded and reported to your health care provider immediately.

Type of Immunization		Enter Dates, Name/Initials of Provider and Other Information Below				
Hepatitis B	Dates Received Provider/Clinic					
Diphtheria Tetanus, Pertussis (DTaP)	Dates Received Provider/Clinic					
Tetanus and Diphtheria	Dates Received Provider/Clinic					
<i>Haemophilus Influenzae</i> type b	Dates Received Provider/Clinic					
Poliovirus	Dates Received Provider/Clinic					
Measels, Mumps, Rubella	Dates Received Provider/Clinic					
Chicken Pox (Varicella)						
Pneumococcal Disease (PCV)	Dates Received Provider/Clinic					
Hepatitis A	Dates Received Provider/Clinic					
Influenza	Dates Received Provider/Clinic					

Test and Exam Record

You can keep track of tests or exams your child has by using the chart below.

Type of Test or Exam		Enter Date/Age, Results and Other Information					
Newborn Screening (p. 9) Schedule: Before 7 days old*	Date/Age						
Vision Test (p. 12) Schedule: First test before 5 years old*	Date/Age						
Hearing Test (p. 12) Schedule: *	Date/Age						
Lead Test (p. 13) Schedule: First test by 1-2 years old*	Date/Age						
Tuberculosis Skin Test (p. 14) Schedule: If needed.*	Date/Age						
Dental Visit (p. 21) Schedule: *	Date/Age						

* Discuss your child's specific needs with his or her doctor or nurse.

Growth Record

Record your child's height, weight, and head size whenever your doctor measures them.

Date/Age	Weight	Height	Head Size

Date/Age	Weight	Height	Head Size

This guide was developed by the Agency for Healthcare Research and Quality (AHRQ), part of the U.S. Department of Health and Human Services.

AHRQ is the lead Federal agency charged with supporting research designed to improve the quality of health care, reduce its cost, and broaden access to essential services.

The U.S. Preventive Services Task Force (USPSTF), an independent panel of experts in primary care and prevention convened by AHRQ, systematically reviews the evidence of effectiveness of clinical preventive services—screening tests, immunizations, counseling, and chemoprevention (for example, aspirin to prevent heart disease)—and makes recommendations for their use in primary health care. This booklet is based on USPSTF recommendations.

Put Prevention Into Practice (PPIP), a national program sponsored by AHRQ, develops resources for clinicians, patients, and office systems to increase the delivery of USPSTF-recommended preventive services in the primary care setting.

To order copies of this guide, call the AHRQ Publications Clearinghouse at 1-800-358-9295 or e-mail ahrqpubs@ahrq.gov.

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The U.S. Preventive Services Task Force (USPSTF) continuously updates its recommendations on clinical preventive services and makes them available on the Agency for Healthcare Research and Quality (AHRQ) Web site. Put Prevention Into Practice (PPIP) tools are revised regularly to correspond with USPSTF updates and are also available on the AHRQ Web site.

For the most current recommendations and updates, visit the preventive services section of the AHRQ Web site at www.preventiveservices.ahrq.gov. Or, for immediate notification of new and updated recommendations from the current USPSTF and new resources from the PPIP program, join the AHRQ Prevention LISTSERV[®]. To join the LISTSERV[®] visit the AHRQ Web site at www.ahrq.gov/clinic/prev/prevlistserv.htm.