



Routine Preventive Services for Infants and Children (Birth - 24 Months)

The following guideline provides recommendations for routine preventive services for children birth to 24 months. Children at increased risk may warrant additional services, e.g. Early Periodic Screening, Diagnosis and Treatment Program (EPSDT)¹. Personalized recommendations: to offer any patient, for age, gender and risk factor-based recommendations, see [Electronic Preventive Services Selector](#).

Visit Schedule	•Health, developmental and risk assessments at each visit (see Visit Schedule), including Social Determinants of Health via Bright Futures .
Birth	•Parental education and counseling:
Before 1 month	- Immunizations, nutrition, breast-feeding (goal one year) [A], physical activity, child abuse/trafficking (Michigan abuse and neglect hotline (855-444-3911), depression, alcohol and drug abuse, anxiety, stress reduction, coping skills.
1 month	- Dental health: limit sugars and juices, home oral care, remove bottle when asleep.
2 months	- Motor vehicle safety ² : Rear-facing car seat until 2 years. [B]
4 months	- Poison prevention: Keep the National Poison Control number (800-222-1222) readily accessible; use child resistant containers.
6 months	- Burn prevention: Install smoke detectors and test bi-annually; carbon monoxide detectors; water heater temperature and fire prevention.
9 months	- Injury prevention: Use of gates; never leave infant unattended on changing table; water safety; parent and sitter CPR training.
12 months	- Safe to sleep ³ : Back to sleep [B], no bed sharing, no over bundling.
15 months	- Tobacco use screening: Establish secondhand smoke exposure.
18 months	
24 months	

Recommendation	Birth	Before 1 month	1 month	2 months	4 months	6 months	9 months	12 months	15 months	18 months	24 months
Ocular prophylaxis for gonococcal ophthalmia neonatorum (erythromycin ointment) [A]	x										
Neonatal screening: Newborn metabolic screening > 24 hours of age [D]	x										
Hearing screening for congenital hearing loss [B]	x										
Dental screening; adequate fluoridation; establish dental home When water fluoride <0.6ppm ⁴ , apply fluoride varnish for children at risk						x					
Developmental screening ⁵							x			x	
Blood lead testing ⁶ [B] (Other high risk population or Medicaid)								x			
Autism screening ⁶ with validated tool, e.g., M-CHAT											x
Immunizations: •For updated immunization schedules, see CDC Advisory Committee on Immunization Practices (ACIP). •Use combination vaccines to minimize the number of injections. •Update the Michigan Care Improvement Registry (MCIR).											
Hep B [A]	x			x				x			
DTaP [A]				x	x	x				x	
IPV				x	x			x			
Pneumococcal (PCV13)				x	x	x			x		
Hib [A] - complete series (3 or 4 doses depending on vaccine type given)				x	x	(x)			x		
Rotavirus - complete series (2 or 3 doses depending on vaccine type given)				x	x	(x)					
Inactivated influenza vaccine [B]							First vaccination: 2 doses one month apart; one dose annually thereafter				
Hep A								x		x	
MMR (MMRV) [A]									x		
Varicella [A]									x		

¹Early Periodic Screening Diagnosis and Treatment

²AAP Policy Statement - Child Passenger Safety

³Safe to Sleep Public Education Campaign

⁴Centers for Disease Control - My Water's Fluoride - Michigan

⁵AAP Section on Developmental and Behavioral Pediatrics

⁶Lead and Autism screening is a Michigan Medicaid requirement. Autism screening recommended for all children.

Levels of Evidence of most significant recommendations: A = randomized controlled trials; B = controlled trials, no randomization; C = observational studies; D = opinion of expert panel

This guideline lists core management steps. It is based on AAP Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents, 4th Edition, 2017. Individual patient considerations and advances in medical science may supersede or modify these recommendations.