

Protecting Our Children

Knowing When To Take Your Children To The Doctor

(NAPSA)—Recommended immunizations and regular check-ups at the pediatrician's office or local health clinic are an important way to keep children healthy. Children should visit the doctor on a regular basis—how often depends on age and overall health—to check on his or her general well-being and growth.

To help busy parents get on schedule and to educate them on the importance of regular check-ups, immunizations, and growth monitoring, the American Academy of Pediatrics (AAP) has joined the Pampers Parenting Institute (PPI) and Wal-Mart to provide information to parents and caregivers through the Babies First campaign—a unique initiative to help educate families about children's health issues.

“Children need to see their pediatrician regularly in the first few years of their life, and it's difficult for many parents to keep track of check-ups, immunizations and other appointments,” said AAP president-elect Louis Cooper, M.D., FAAP. “It's also very important for children to have a ‘medical home,’—a regular doctor who knows the child as a person, his or her medical history and family environment.”

Cooper offers the following general advice for scheduling doctors' visits, and suggests that parents contact their local pediatrician for programs specific to their children.

Pre-delivery Meeting

The AAP encourages parents and pediatricians to meet before the baby is born. During this visit, parents and pediatricians can meet and learn about each other, and parents can often get answers to questions they may have about their unborn child.

Newborn

It is important that your pediatrician examine your newborn while he or she is in the hospital. If your newborn is discharged from the hospital in less than 48 hours, you will need to schedule a visit within two days of being released.

Infancy (up to 2 years old)

First Year—Schedule a doctor's visit at about 2 to 4 weeks of age and at least four other visits at regular intervals before 1 year of age.

Second Year—Schedule visits at 12, 15, and 18 months of age, or

Birth	1 mo	2 mos	4 mos	6 mos	12 mos	15 mos	18 mos	24 mos	4-6 yrs	11-12 yrs	14-18 yrs
Hepatitis B											
Hepatitis B			Hepatitis B						Hepatitis B ^{*1}		
		DTaP	DTaP	DTaP			DTaP		DTaP	Tetanus Diphtheria ^{**}	
		Hib	Hib	Hib		Hib					
		IPV	IPV			IPV			IPV		
		PCV	PCV	PCV		PCV					
						MMR			MMR	MMR ²	
						Varicella				Varicella ³	
									Hepatitis A—in selected areas		

* Italics indicate necessary immunization ONLY if one was missed or given too early

** To be given between 11 and 16 years of age

Key

Hepatitis B
 Inactivated Polio (IPV)
 Varicella
 Diphtheria, Tetanus, Pertussis (DPT)
 Pneumococcal Conjugate (PCV)
 Hepatitis A—in selected areas
 H. influenzae type B (Hib)
 Measles, Mumps, Rubella (MMR)

¹ All children and adolescents (through 18 years of age) who have not been immunized against hepatitis B may begin the series during any visit

² Those who have not previously received the second dose should complete the schedule by the 11-12-year-old visit

³ Those who have not had a documented case of chickenpox or have not been immunized should receive the vaccine



more often if recommended by your pediatrician.

Preschool Period (2 to 5 years old)

Schedule visits yearly, or more often if recommended by your pediatrician.

School-Age Period (6 to 21 years old)

Schedule visits at 6, 8, and 10 years of age and yearly visits between the ages of 11 and 21.

Doctors' visits should include the following:

(a) A review of your child's medical history since the last visit. This includes an honest discussion of how he or she is doing physically and emotionally and how he or she is performing at school.

(b) A complete physical examination of your child. After the examination, be sure to discuss any abnormalities that were discovered. At each physical exam, beginning with the first one after birth, your pediatrician will take certain measurements.

Your child's length, weight, and head circumference (the distance around his head) will be measured and plotted on growth charts.

(c) Necessary screening tests for proper growth and development. These screenings may include vision, hearing, anemia,

lead, cholesterol, urinary abnormality, tuberculosis infection, and certain inherited disorders.

(d) Necessary immunizations during infancy like pertussis (whooping cough), diphtheria, tetanus (lockjaw), polio, measles, mumps, rubella (German measles), hepatitis B, Haemophilus influenzae type b, pneumococcal infections, and varicella (chickenpox). Later in age, your child will need additional booster doses and any newly available immunizations as advised by your pediatrician.

(e) Appropriate discussion and counseling concerning your child's care and diet with recommendations for the handling of any special health problems.

(f) Discussion about your child's overall well-being. Topics might include growth and developmental patterns, obesity, discipline, the role of parents, the child's family and community, injury prevention, violence prevention, counseling about sexual development, and school readiness topics including learning difficulties, behavior problems, and attention-deficit disorder.

For more information about children's health issues, visit www.aap.org, www.pampers.com, or look for Babies First at www.walmartstores.com/news/.