



**Gateway Health Plan®**  
**Your Child's Health Maintenance Schedule**  
 (Birth to under age 21)

	Infancy					Early Childhood									Adolescence			
	Birth - 1 mo	2 - 3 mo	4 - 5 mo	6 - 8 mo	9 - 11 mo	12 mo	15 mo	18 mo	24 mo	30 mo	3	4 - 6	7 - 8	9 - 10	11 - 12	13-18	19-20	
Physical & Developmental Exam	Every visit					Every visit. BMI strongly recommended 2- 20yrs.									Every visit			
Developmental Screening						9-11mo		18 mo		30mo								
Autism Screening								18 mo		24 mo		If needed			If needed			
Dental Exam and Risk Assessment – No referral needed for dental care.	Every visit by PCP – See dentist by age 12 months					Every visit					See dentist by age 3 & every 6 mos.				See a dentist every 6 months.			
Hearing & Vision Assessment	Hearing at birth	Every visit				Every visit					Testing every year starting at 3 yr				Every year			
Blood Lead Level						Test		If not done		Test		If not done						
Anemia Test						Test		If not done								Starting at 12yrs after onset of menses & as needed		
Cholesterol Screening												Assess every 2 years as needed ages 2-19 years. Test at age 20.						
Pelvic Exam/Breast Exam – No referral needed for OB/Gyn care												When sexually active or age 18, every year.						
Safety & Healthy Habits Counseling	Every visit					Every visit					Every visit							
Screening/Counseling for Tobacco, Alcohol, Substance Abuse											Every visit beginning at age 11							
Sexually Transmitted Disease Testing/Counseling											If sexually active - every year							
Chlamydia											If sexually active - every year							
HPV (Human Papillomavirus Vaccine)											3 doses		13-20 if needed					
Prenatal - No referral needed for Obstetrical midwife care											Seek prenatal care as soon as pregnancy suspected.							
TB Screening	If needed					If needed					If needed							
Sickle Cell	If needed					If needed					If needed							
Hepatitis B (Hep B)	1 <sup>st</sup> birth	2 <sup>nd</sup> dose		3 <sup>rd</sup> dose					If needed to catch up				If needed to catch up					
Hepatitis A						1 <sup>st</sup> dose		2 <sup>nd</sup> dose in 6mo										
Diphtheria/Tetanus/Pertussis (Dtap)		1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose		4 <sup>th</sup> dose					5 <sup>th</sup> dose			1 dose Tdap	1 dose Tdap age 13-18 if not had before	1 dose Tdap if not given earlier		
Rotavirus		1 <sup>st</sup> dose	2 <sup>nd</sup> dose															
Measles/Mumps/Rubella (MMR)						1 <sup>st</sup> dose					2 <sup>nd</sup> dose	If needed		If needed				
Polio		1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose – 6 mo - 18 mo							If needed	If needed	If needed					
Haemophilus B (Hib)		1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose		4 <sup>th</sup> dose												
Chicken Pox (VZV)						1 <sup>st</sup> dose					2 <sup>nd</sup> dose	If needed		If needed				
Pneumococcal		1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose		4 <sup>th</sup> dose												
Influenza						Yearly for ages 6 months -10 years									Yearly for ages 11 – 20 years			
Meningococcal															Single dose at 11-12 or 13-18 if not previously given or a freshman living in a college dorm			