

Pediatric Preventive Care Medical Record Audit Tool

<input type="checkbox"/> Memorial Healthcare System <input type="checkbox"/> North Broward Hospital District <input type="checkbox"/> Public Health Trust					
CENTER/PROVIDER NAME: _____		CENTER/PROVIDER #: _____			
ENROLLEE MEDICAID #:	DOB:	AGE:	SEX:		
	REVIEWER #1:	REVIEWER #2:	DATE:		
	Prevention Guidelines		YES	NO	N/A
	History and Physical Examination				
1.	Well Child Check-up/screening age appropriate: Normal newborn in hospital, 2-4 days if discharged <48 hours, 1 months, 2months, 4 months, 6 months, 9 months, 12 months, 15 months 18 months, 2-21 years annually				
2.	Allergies				
3.	Mental and emotional status (age appropriate)				
4.	Illnesses including hospitalizations and surgeries				
5.	Documentation of family history				
	Immunizations (According to Recommended Immunization Schedule)				
6.	Temperature prior to immunization				
7.	Diphtheria, Tetanus, Pertussis (DTP) or DTaP: 2, 4, 6, 15-18 months; and 4 – 6 years				
8.	Haemophilus Influenzae Type B (HIB): 2, 4, 6, 12-15 months (if PRP-OMP PedvaxHIB or Comvax is administered at ages 2 and 4 months, a dose at 6 months is not required)				
9.	Inactivated Poliovirus (IPV): 2, 4, 6-18 mos, 4-6 yrs				
10.	Measles, Mumps, Rubella (MMR): 12-15 months, 4-6 yrs (those who have not previously received the second dose should complete the schedule by the 11-12 yrs visit; for menstruating females, the pregnancy test has to be negative prior to MMR)				
11.	Hepatitis B (HEP B): Birth to 2 months, 6-18 months				
12.	Varicella Vaccine (VZV): 12-18 months; 4 – 6 years or documented history of chicken pox or patient refusal to the vaccine (on or between the first and second birthdays). Susceptible persons >13 yrs should receive two doses, given at least 4 weeks apart.				
13.	HEP A; 12-23 months (2 Doses)				
14.	Rotavirus vaccine: 2, 4 and 6 months (3 Doses). If Rotarix is administered at ages 2 and 4 months, a dose at 6 months is not indicated.				
15.	Influenza (yearly) 6 months through 18 years				
16.	Pneumococcal vaccine (PCV): 2, 4, 6, 12-15 months				
17.	Tetanus-diphtheria: 11-12 yrs if at least 5 years have elapsed since the last dose of tetanus & diphtheria toxoid-containing vaccine. Subsequent routine Td boosters recommended @ 10 years.				
18.	Human Papillomavirus Vaccine (HPV) : Females 11-12 years old (three dose series); Catch-up at 13-26 years old (For dates of service of 1/1/2007 and after)				
19.	Meningococcal conjugate vaccine: 11 or 12 years old , or age 13 through 18 if not previously vaccinated.				

Provider #: _____ **Enrollee Medicaid #:** _____

		YES	NO	N/A
	Nutritional Assessment			
20.	Height/weight			
21.	Head circumference (up to age 2)			
22.	Body Mass Index (BMI): (≥ 2 years)			
23.	Assessment of nutritional status			
	Development Assessment (Every Well Child Check-up)			
24.	Assessment of age appropriate physical, cognitive and emotional development			
	Physical Assessment (Every Well Child Check-up)			
25.	Vital signs (Blood Pressure ≥ 3 yrs) including TPR			
26.	General appearance including skin evaluation			
27.	Examination of the eyes, ears, nose, mouth, throat, teeth and gums, abdomen and urogenital.			
28.	Auscultation of heart, lungs (chest configuration and respiratory movements when appropriate)			
29.	Neurological exam (including gross and fine motor coordination)			
30.	Orthopedic evaluation (including muscle tone and scoliosis screening)			
	Sensory Assessment (Every Well Child Check-up)			
31.	Dental screening each <i>CHCU</i> (referral to dentist at 3 yrs of age)			
32.	Vision screening each <i>CHCU</i> (ages 3, 4, 5, 6, 8, 10, 12, 15, 18 years)			
33.	Hearing test each <i>CHCU</i> (Newborn through 21 years). Formal standardized hearing screening at ages 4, 5, 6, 8, 10 years			
	Laboratory Tests			
34.	Lead screening 12 months, 24 months, (36-72 months if lead screen was not done). Detailed lead poisoning prevention counseling component during each well child check-up/screening visit. (A capillary or venous blood lead test is required for all Medicaid children and other children at high risk, or at the physician's discretion.)			
	Health Education/Anticipatory Guidelines			
35.	Detailed age-specific prevention counseling related to safety			
36.	Provision of age appropriate health education including anticipatory guidance to all children and their parents or caregivers. (Behavioral risks such as smoking, alcohol abuse, substance abuse, absenteeism, Sexual Transmitted Disease's (STD), domestic violence)			
	SCORE:			
OVERALL SCORE:	%	# YES / # YES + # NO = %	TOTALS:	