

Regular health care visits can help your pre-teen or teen stay healthy.



If your child is a new member, please take them to the doctor **right away**. They may be seen by a physician, physican assistant or a nurse practitioner. During the first health visit, the **Staying Healthy Assessment** will be filled out. This should happen within three (3) months of enrollment and then each year thereafter.

- ✓ Your doctor can give you advice on what to expect at different stages of your child’s growth.
- ✓ The doctor may request other services based on your child’s risk, which is based on their current health and health history.




Well-Child and Teen Health Care Services (11-19 Years)

Health Care Services	When to go to the doctor
<b>Well-Care Visits</b> Medical and Family Health History Physical Exam and Blood Pressure Eyesight and Hearing Growth, Development and Behavior, with family, school and groups Physical Activity Healthy Eating Body Mass Index (measure for a healthy weight)	Each year. The doctor may recommend visits based on your child’s risk.
<b>Anemia Test</b> Low iron can cause tiredness and headaches.	The doctor may recommend testing if at risk.
<b>Dental/Oral Checkup</b> Looks for tooth decay and gum disease.	Every 6 months.
<b>Diabetes Screening</b> HbA1c test	The doctor may recommend screening if at risk.
<b>Sexually Transmitted Infections (STIs)</b> Chlamydia, Gonorrhea, Syphilis Human Immunodeficiency Virus (HIV) Human Papillomavirus (HPV)	Each year starting at age 11. The doctor may recommend screening if at risk.
<b>Tuberculosis (TB) Test</b> Tuberculosis can cause lung and brain damage.	The doctor may recommend screening if at risk.
<b>Cholesterol Test</b> High cholesterol can damage the heart.	The doctor may recommend screening if at risk.
<b>Check for Skin Cancer Risk</b>	The doctor may recommend screening if at risk.
<b>Check for Depression and Anxiety</b>	Each year starting at age 12.
<b>Check for Alcohol, Drug Use, Tobacco, Cannabis, Vaping, Pills and Secondhand Smoke</b>	Each year starting at age 11.

? Which health topics would you like to talk with the doctor about?

- Asthma
  - Body Mass Index (BMI)
  - Breastfeeding
  - Dental Health
  - Diabetes
  - Exercise, Physical Activity, and Sports
  - Eye Health
  - Family Planning, Birth Control
- Healthy Foods and Eating
  - High Blood Pressure
  - Human Papillomavirus (HPV) Vaccine
  - Mental Health Concerns
  - Parenting
  - Pregnancy Health
  - Safety
  - Screen Time/Video Games
- Secondhand Smoke
  - STIs and HIV
  - Traumatic and Stressful Life Events (Abuse, Neglect, Household Concerns)
  - Quitting Smoking
  - Weight Concerns

**Adverse Childhood Experiences (ACES) and related stressful life events:**  
This can affect your child’s health and well-being. Please talk with your doctor if you have concerns.

			
<b>Member Services</b>	<b>L.A. Care Covered™ 24/7</b> <b>1.855.270.2327 (TTY 711)</b> <b>Medi-Cal 24/7</b> <b>1.888.839.9909 (TTY 711)</b>	<b>1.800.605.2556 (TTY 711)</b> <b>Hours of Operation</b> <b>M–F: 8am to 6pm</b>	<b>1.888.285.7801 (TTY 711)</b> <b>Hours of Operation</b> <b>M–F: 7am to 7pm</b>
<b>Nurse Advice Line 24/7 for health questions</b>	<b>1.800.249.3619 (TTY 711)</b>	<b>1.800.609.4166 (TTY 1.800.735.2929)</b>	<b>1.800.224.0336 (TTY 711)</b>
<b>Telehealth Services 24/7</b>	<b>Teladoc 1.800.TELADOC (1.800.835.2362) (TTY 711)</b>	<b>Teladoc 1.800.TELADOC (1.800.835.2362) (TTY 711)</b>	<b>1.888.LIVEHEALTH (1.888.548.3432) (TTY 711)</b>
<b>Website</b>	<b>lacare.org</b>	<b>blueshieldca.com/promise</b>	<b>anthem.com/ca</b>

You can get this information for free in your language. Please call Member Services, this call is free. L.A. Care complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

My Doctor Name: \_\_\_\_\_

My Doctor Phone Number: \_\_\_\_\_

Questions I have for my Doctor: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

My Specialist Name: \_\_\_\_\_

My Specialist Phone Number: \_\_\_\_\_

Questions I have for my Specialist: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

To order additional copies for doctors, visit: <http://healtheducation.chi.v6.pressero.com/login>.



Sources for information within these Preventive Health Guidelines: The American Academy of Pediatrics, American Academy of Pediatric Dentistry; Centers for Disease Control and Prevention, U.S. Preventive Services Task Force, California Department of Public Health, and Los Angeles County Department of Public Health.

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How to Help Keep Your Child or Teen *Healthy*  
Health Care Services for Children and Teens



Use this guide to help you:



Learn what health care services your child can get from the doctor.



Find out which ones are right for your child.



Keep track of the services your child gets.



Developed by L.A. Care Health Plan working with Blue Shield of California Promise Health Plan and Anthem Blue Cross. Together, we provide Medi-Cal Managed Care Services in Los Angeles County.





# Keep Your Child Healthy!

If your child is a new member, please go see the doctor **right away**. A physician, physician assistant or a nurse practitioner may see your child. During the first visit, the **Staying Healthy Assessment** will be filled out. This should happen within three (3) months of enrollment and then each year thereafter.

- ✓ Keeping your child healthy starts with getting the right health care services at the right time and are at no cost to you.
- ✓ These health care services look for problems early when they may be easier to treat.
- ✓ The doctor may request other services or tests based on your child’s risk, which is based on their current health and health history.

## Well-Baby and Child Health Care Services (0-10 Years)

Health Care Services	When to go to the doctor
<b>Well-Care Visits</b> – <u>Each visit is important to get the right services at the right time.</u> Medical and Family Health History Physical Exam and Blood Pressure Eyesight and Hearing Growth, Development and Behavior, with family and groups Physical Activity Healthy Eating Body Mass Index (BMI) (measure for a healthy weight)	<input type="checkbox"/> [MM/DD/YY] 2-3 days after Birth <input type="checkbox"/> [MM/DD/YY] 1 Month <input type="checkbox"/> [MM/DD/YY] 2 Months <input type="checkbox"/> [MM/DD/YY] 4 Months <input type="checkbox"/> [MM/DD/YY] 6 Months <input type="checkbox"/> [MM/DD/YY] 9 Months <input type="checkbox"/> [MM/DD/YY] 12 Months (1 year) <input type="checkbox"/> [MM/DD/YY] 15 Months <input type="checkbox"/> [MM/DD/YY] 18 Months <input type="checkbox"/> [MM/DD/YY] 24 Months (2 years) <input type="checkbox"/> [MM/DD/YY] 30 Months <input type="checkbox"/> [MM/DD/YY] Each year thereafter
<b>Autism Screening</b> Tests for communication problems.	<input type="checkbox"/> [MM/DD/YY] 18 Months <input type="checkbox"/> [MM/DD/YY] 24 Months
<b>Anemia Test</b> Low iron can cause tiredness and headaches.	<input type="checkbox"/> [MM/DD/YY] 12 Months
<b>Oral Health</b> Checks for oral and dental health.	When your baby’s first tooth shows or at 6 months, speak with your doctor about oral and dental health. Take your child to the dentist every 6 months. California law requires your child to have a dental checkup by May 31st of their first school year.
<b>Fluoride Varnish</b> Brushed on teeth to prevent tooth decay as soon as teeth are present.	This can be done 2-4 times a year until age 5 at the doctor’s or dentist’s office.
<b>Lead Screening</b> Lead poisoning can cause brain damage and learning problems.	Screen at 12 months and 24 months. If your child has not been screened, then they should be screened once before age 6.
<b>Tuberculosis (TB) Test</b> Tuberculosis can cause lung and brain damage.	The doctor may recommend screening if at risk.
<b>Cholesterol Test</b> High cholesterol can damage the heart.	The doctor may recommend screening if at risk.



# Get Your Child or Teen the Right Shots at the Right Time

- ✓ Vaccines (shots) help keep children and teens healthy.
- ✓ They can protect them from serious health problems.
- ✓ Shots are quick and can prevent years of illness.

These Shots	Help Prevent	Number of Shots	Age Birth	1 Month	2 Months	4 Months	6 Months	9 Months	12 Months	15 Months	18 Months	19-23 Months	2-3 Years	4-6 Years	7-10 Years	11-12 Years	13-15 Years	16-18 Years
★ <b>HepB</b> Hepatitis B	Liver Disease, Cancer	3	<input type="checkbox"/> HepB	<input type="checkbox"/> HepB			<input type="checkbox"/> HepB											
<b>RV</b> Rotavirus	Severe Diarrhea, Dehydration	2 or 3			<input type="checkbox"/> RV	<input type="checkbox"/> RV	<input type="checkbox"/> RV											
★ <b>DTaP/Tdap</b> Diphtheria/Tetanus/Pertussis	Breathing Problems, Muscle Spasms, Whooping Cough	5 DTaP 1 Tdap			<input type="checkbox"/> DTaP	<input type="checkbox"/> DTaP	<input type="checkbox"/> DTaP			<input type="checkbox"/> DTaP				<input type="checkbox"/> DTaP		<input type="checkbox"/> Tdap		
<b>Hib</b> Haemophilus Influenzae	Meningitis (brain infection), Pneumonia, Blood Infection	3 or 4			<input type="checkbox"/> Hib	<input type="checkbox"/> Hib	<input type="checkbox"/> Hib		<input type="checkbox"/> Hib									
<b>PCV</b> Pneumococcal	Pneumonia, Meningitis	4			<input type="checkbox"/> PCV	<input type="checkbox"/> PCV	<input type="checkbox"/> PCV		<input type="checkbox"/> PCV									
★ <b>IPV</b> Inactivated Polio Vaccine	Muscle Paralysis, Disabilities, Deformities	4			<input type="checkbox"/> IPV	<input type="checkbox"/> IPV			<input type="checkbox"/> IPV					<input type="checkbox"/> IPV				
<b>Flu</b> Influenza	Lung, Ear and Sinus Infections	Each Year					Get your child the flu shot each year											
★ <b>MMR</b> Measles, Mumps, Rubella	Pneumonia, Deafness, Brain Damage	2							<input type="checkbox"/> MMR					<input type="checkbox"/> MMR				
★ <b>VAR</b> Varicella (chickenpox)	Blisters, Skin Infections, Nerve Damage, Vision Loss (eyesight)	2							<input type="checkbox"/> VAR					<input type="checkbox"/> VAR				
<b>HepA</b> Hepatitis A	Fever, Diarrhea, Tiredness	2							<input type="checkbox"/> HEP A		<input type="checkbox"/> HEP A							
<b>HPV</b> Human Papillomavirus	Cervical Cancer, Genital Warts	2 or 3														<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> HPV		
<b>MCV4</b> Meningococcal (Meningitis)	Meningitis, Brain Damage, Hearing Loss, Learning Disabilities	2														<input type="checkbox"/> MCV4		<input type="checkbox"/> MCV4 at 16
<b>MenB</b> Meningococcal B (Meningitis)	Meningitis, Brain Damage, Hearing Loss, Learning Disabilities	2 or 3																<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> MenB
Stay up to date with your child’s vaccines. The colored boxes above show the age range when shots are recommended. Your child’s doctor may suggest different times than those listed above.																		

★ **Shots for School** California requires all children to have certain shots before attending school grades K-12. Contact your doctor with questions.