

# UTAH PREVENTIVE CARE RECOMMENDATIONS

## ADOLESCENT AGES 11-18

### INTRODUCTION

Adolescence is a time to prevent injury and disease through patient and parental counseling, screening exams and immunizations. This is an important time for the physician to establish a direct patient relationship with the adolescent, because many injuries and illnesses are directly related to the patient's behaviors and choices made during these years. The physician can have a direct impact on the adolescent through behavioral counseling.

The top causes of death in ages 10-24 include: (CDC)

1. Unintentional injuries
2. Suicide
3. Homicide
4. Cancer
5. Heart disease

The top causes of morbidity in ages 5-14 ranked by Disability Adjusted Life Years (DALY) lost include: (WHO)

1. Traffic injuries
2. Asthma
3. Malignancy
4. Injuries (falls, fires, drownings)
5. Drug use
6. Obsessive/compulsive disorder
7. Dental caries
8. Endocrine disorders
9. Iron deficiency anemia
10. Infections

Because of the risk of morbidity and mortality during these years due to injuries, much of the time spent with individuals during this time period should be spent counseling both parents and the patient about injury prevention.

People develop patterns and habits in adolescence that can lead to healthier future lives. The chance of future disease is also impacted during this period. Screening exams and counseling performed during adolescence can impact current health, but are highly important for future health as listed in the following table.

## ADOLESCENT EXAMS AND COUNSELING IMPACTING FUTURE HEALTH

Future Disease	Screening Exams	Counseling
Heart Disease	Body Measurement, BP, Cholesterol, Physical Activity Vital Sign	Nutrition, Physical Activity, Tobacco Use
Cancer		Nutrition, Physical Activity, Tobacco Use, Sunscreen
Lung Disease		Tobacco Use
Osteoporosis		Nutrition, Physical Activity
Depression	Depression Questions	Psychosocial Development, Physical Activity, Sleep
Diabetes	Body Measurement, Physical Activity Vital Sign	Nutrition, Physical Activity, Sleep

The preventive care recommendations in this document include statements regarding the frequency of “well-adolescent visits” (a.k.a. “H&P” or “physicals”), basic screening tests, and health issue counseling and guidance. While the “well-adolescent visit” is specifically structured to deliver preventive services, it is also appropriate to deliver some preventive services at acute care visits, when time permits, in order to avoid missed opportunities. The realities of a medical practice result in the fact that all issues cannot be covered at each visit. The specific needs of each child, their family and environment should be considered when prioritizing which issues to address at each visit.

Individuals who are insured by Medicaid tend to be classified within high risk categories for some recommendations due to requirements by the Utah Department of Health Division of Health Care Financing that these services be delivered to Medicaid adolescents as outlined in the [Child Health Evaluation and Care \\*CHEC\\* Provider Manual](#). The CHEC Manual defers to the American Academy of Pediatrics Guidelines as the definitive source for up-to-date screening recommendations.