EPSDT Screening Form Guidelines

1. Patient’s Medical History

   • New patient - Fill in all blanks with birth weight, birth height, etc.
   • Established patient - Check if history from previous visit was reviewed and note if there are any changes.

2. Family Medical History

   • New patient – Check disease and indicate family member, i.e. parent, grandparent, brother or sister.
   • Established patient – Check if completed family history is already part of the chart or if any updates.

3. Growth/Vital Signs

   • Fill in all blanks with current height, weight, vital signs, etc.
     - If patient is < 1 year, measure head circumference (HC)
     - If patient is > 1 year, calculate Body Mass Index (BMI), if indicated.
     - Nutrition – for infants, indicate if bottle-fed, breast-fed, on solids, etc.
       for children, indicate if nutrition is poor, fair, good or excellent

4. Physical Exam – unclothed

   • Fill in each area with either an “N” – normal, “A” – abnormal, or “NE”- no exam.
   • Describe any abnormalities.

5. Developmental/Emotional Behavior

   • Check “yes” or “no” if development is age/culturally appropriate. If not, elaborate.
   • If a developmental or emotional screening tool was used, indicate the name of the tool, i.e. “Ages and Stages”, “Denver Developmental II”, “Pediatric System Checklist – PSC”.
   • If a referral was made for developmental/emotional problems, indicate the specialist.

6. Anticipatory Guidance/Nutrition/Safety

   • Check-mark each area that was discussed with the parent and/or child.
7. Impression

- Check “yes” or “no” if child is well and if growth & development are normal. If not, indicate diagnosis.
- Indicate age that next screening is due.

8. Treatment Plan/Referral

- Indicate if fluoride varnish was applied.
- Was child referred to a dentist?
- If child is referred to a specialist, indicate type of specialist.

9. Immunizations Given

- Is child up-to-date on immunizations? If not, indicate which immunizations were given, whether single or combination.

10. Laboratory Ordered

- Is child up-to-date on lab work? If not, indicate which lab tests were ordered or performed in the office.
- NOTE: Blood lead levels are required at 12 months and 24 months of age or at 36 months of age if no previous testing has been performed.

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