

PARENTS

It's time to take control of your child's health.



Let's stay better together.

At the NALC Health Benefit Plan, we're committed to helping you and your family get and stay healthy. And providing easy-to-use tools and resources is one of the many ways we do it.

Use this checklist to stay in the know about your child's health.

Bring it with you to your child's next appointment. Your pediatrician or family practitioner will provide you with recommendations for vaccinations and help make sure your child stays up to date. Record the details here, like current and future test dates, results, and any questions you need answered.

AGE	HEIGHT/ LENGTH	WEIGHT	BODY MASS INDEX (BMI)	DATE OF VISIT	NOTES/QUESTIONS, PROVIDER'S RECOMMENDATIONS
Birth					
1 month					
2 months					
4 months					
6 months					
9 months					
12 months					
15 months					
18 months					
24 months					
30 months					
3 years					
4 years					
5 years					
6 years					
7 years					
8 years					
9 years					
10 years					
11 and 12 years					
13 and 14 years					
15 and 16 years					
17 and 18 years					

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Together, all the way.°

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Recommended screenings	Birth to 2 years	Ages 3-10	Ages 11-18				
Size measurements	Weight, length and head circumference at each visit; BMI – 24 and 30 months	Height, weight and	BMI at each visit				
Vision screening		Ages 3, 4, 5, 6, 8 and 10, or as your doctor advises	Ages 12, 15 and 18, or as your provider advises				
Hearing screening	All newborns by 1 month	Ages 4, 5, 6, 8 and 10, or as your provider advises					
Fluoride	Older than 6	6 months, evaluate for sufficient fluoride in drinking water					
Cholesterol		Screening children and adolescents (after age 2 but by age 10) at risk					
Hemoglobin or hematocrit	12 months						

Children's wellness checklist

Recommended immunization schedule	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
Hepatitis B	НерВ	He	рB		НерВ							
Rotavirus			RV	RV	RV							
Diphtheria, tetanus, pertussis			DTaP	DTaP	DTaP			DT	āP			DTaP
Haemophilus influenzae type b			Hib	Hib	Hib		Н	ib				
Pneumococcal			PCV	PCV	PCV		PCV				PPSV	
Inactivated poliovirus			IPV	IPV		IPV					IPV	
Influenza					Influenza (yearly)							
Measles, mumps, rubella							M	MR				MMR
Varicella							Vari	cella				Varicella
Hepatitis A						НерА		рA	HepA series			
Meningococcal					MCV4							

Recommended immunization schedule	7–10 years	11–12 years	13–18 years						
Tetanus, diphtheria, pertussis	Tdap	Tdap	Tdap						
Human papillomavirus		HPV (3 doses) HPV series							
Meningococcal	MCV4	MCV4	MCV4	booster at 16 yrs					
Pneumococcal	Pneumococcal								
Influenza	Influenza (yearly)								
Hepatitis A	HepA series								
Hepatitis B	HepB series								
Inactivated poliovirus	IPV series								
Measles, mumps, rubella	MMR series								
Varicella	Varicella series								
Range of recommend	led ages Range of recommended and certain high-risk gro		Certain high-risk groups						

Schedule your child's wellness visit today.

Visit **www.nalchbp.org** to find a PPO pediatrician or family practitioner near you.



For recommendations on ways to keep your family healthy, including healthy eating suggestions and exercise tips, visit the websites below:

cdc.gov/HealthyLiving • children.webmd.com • choosemyplate.gov

NOTE: These preventive health recommendations are based on recommendations from the Advisory Committee on Immunization Practices, U.S. Preventive Services Task Force, American Academy of Pediatrics, and other nationally recognized authorities. For additional information on immunizations, visit the immunization schedule section of cdc.gov. This document is a general guide. Always discuss your child's particular care needs with your doctor. The immunization schedule is reprinted with permission from the Centers for Disease Control and Prevention.

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