

Well Child Exam Procedure

Performance Standards

EHS/HS: 1302.42

ECEAP: FEP-6, FEP-7, FEP-8, PAO-10

Purpose

The purpose of the well child exam is to prevent and identify conditions that may interfere with a child's natural growth and development. This document explains how to make sure children are on a regular well child schedule and how to support in helping their children get on a schedule of care if they are not already.

Procedure

Well child exams are required at intervals recommended by the Washington State EPSDT guidelines. A current and most recent comprehensive well child exam (WCE) should be on file within 90 days of first day of service (FDS).

Health services staff are responsible for supporting parents/guardians in following recommended well child exams schedules, bringing a child up to date on well child exams, identifying new or recurring health concerns noted on the well child, supporting families with identified follow-up, and providing medical home resources for children who do not have a provider. If a child has already had a well child exam, health staff obtain the exam (or the parent/guardian may obtain the exam report).

To Obtain a WCE

Timeline	Process
At time of FDS	<ul style="list-style-type: none"> In partnership with families, confirm the date of the last well child exam from the Wellness Assessment, Consent forms, Application, conversation. Confirm that child has a medical home and received a WCE from that office prior to working on obtaining documentation. If a child's most recent WCE occurred out of area/state, consent to receive that WCE will occur, and procedures followed.
Within 30 days of FDS	<ul style="list-style-type: none"> Fax the physician's office to receive the most recent WCE using the Early Learning Fax Cover form. The first fax attempt does not need to be documented in CP
Within 45 days of FDS	<ul style="list-style-type: none"> If a WCE has not been received within 45 calendar days, a 2nd fax to the medical home is required. This attempt must be documented in Health Notes in CP.
Within 60 days of FDS	<ul style="list-style-type: none"> If a WCE has not been received within 60 days, a phone call to the physician to determine if there is anything needed to receive the WCE. Staff may have to visit a physician office in order to obtain WCE. If staff have ongoing challenges accessing up to date WCE, contact supervisor and Family and Health Program Manager for support.
By 90 days after FDS	<ul style="list-style-type: none"> Most recent WCE received, assessed for follow up needs and attached in Child Plus.
Ongoing	<ul style="list-style-type: none"> Support families in maintaining up to date well child visits for the enrolled child. Verify a child has attended a WCE prior to seeking information from physician. Once staff have verified the child attended a WCE, fax for the exam and enter the effort into Health Notes.

Verbal reminders or notes sent home do not meet the requirement of assisting families in getting their child on a schedule of well child and dental care as described in Performance Standards.

If a child is missing a well child exam, make sure to do the following:

- Encourage the family to have the exam completed before the child's first day of attendance or as soon as possible.
- Obtain the well child exam from the health care provider.

- If parent/guardian prefers, provide a blank well child exam form to bring to their appointment. Request for completed forms to be returned as soon as possible.
- Work with the family to identify possible barriers that prevent them from making or keeping appointments.
- Document the discussion and the plan to schedule and complete appointments in *ChildPlus- Health Notes Event under Add Action*.

Once a WCE is received staff will do the following:

Well Child Exam Review	Assessment	ECEAP	EHS/HS
<p>Check the date and type of visit. Make sure that the report is documenting a physical exam or well-babycheck, and not an illness or follow up. Verify what WCE the document identifies as completed.</p>	<p>If the form documents an illness visit, contact the parent and let them know that they need to schedule a physical exam and/or request documents reflecting the actual Well Child Exam. Do not enter this as an CP event.</p>	<p>Enter the date of the Well Child Exam in ELMS and indicate whether the child needs follow-up or treatment with doctor.</p>	<p>Event Type: Well Baby/Physical Exam. Upload the report(s). Indicate, concerns, concerns-services in place, or no concerns. Identify needs and diagnosed chronic condition. Document follow-up, treatment, and communication under Add Action.</p>
<p>Immunizations</p>	<p>Were immunizations given at the visit?</p>	<p>Select appropriate status in ELMS reflecting if CIS is updated and complete.</p>	<p>Immunization Tab: If immunizations were given at exam and noted, add to Immunization tab and add notes.</p>
<p>Parent concerns</p>	<p>Parent can guide you to look at exam tests/components the doctor may conduct or order.</p>		<p>Event Type: Well Baby/Physical Exam. Document parent concerns, follow-up, and communication under Add Action.</p>
<p>Medications – current or past</p>	<p>If there is a current medication, is a <i>Classroom Accommodation Plan</i> needed? Past medications alert you to previous illnesses and can guide you in talking with a parent about the potential need for an accommodation plan.</p>	<p>Mark appropriate boxes in ELMS under “Chronic Conditions” and indicate what medication(s) are needed.</p>	<p>Event Type: Well Baby/Physical Exam. Indicate concerns, concerns-services in place, or no concerns. Identify needs and diagnosed chronic condition. Document follow-up, treatment, and communication under Add Action.</p>
<p>Allergies</p>	<p>Are there any allergies noted on Does the child have any food, environmental, or medicine allergies? Is a <i>Classroom Accommodation Plan</i> needed?</p>	<p>Mark appropriate boxes in ELMS under “Chronic Conditions” and indicate what allergies child has.</p>	<p>Event Type: Well Baby/Physical Exam. Indicate concerns, concerns-services in place, or no concerns. Identify needs and diagnosed chronic condition. Document follow-up, treatment, and communication under Add Action.</p>

Well Child Exam Review	Assessment	ECEAP	EHS/HS
Routine Assessments – including height and weight (BMI), blood pressure, Vision, hearing, and oral health checks for EHS Well Baby Exams	BMI concerns: overweight/underweight, abnormal blood pressure Vision/ hearing screenings concerns/Referrals Oral Health Checks noted	Select “As a result of this exam, child needs further evaluation or treatment” box in ELMS.	Event Type: Well Baby/Physical Exam. Indicate concerns, concerns-services in place, or no concerns. Identify needs and diagnosed chronic condition. Document follow-up, referrals, treatment, and communication under Add Action notes. Event Type: EHS Well Baby Oral Health Screening
Lab Results – Lead test, Hematocrit/Hemoglobin screening (Anemia)	Notes regarding elevated lead levels or lead concerns and hematocrit/hemoglobin results outside the normal range should be considered a concern.	Select “As a result of this exam, child needs further evaluation or treatment” box in ELMS.	Event Type: Lead/Anemia Indicate concerns, no concerns, or not recommended. Identify needs and diagnosed chronic condition. Document follow-up, treatment, and communication under Add Action.
Review of Systems Assessment Diagnosis Plan	These exam sections may include notations such as: Normal Negative Without Abnormal Findings Well Child Exam Abnormal Findings	If an abnormal finding, screening, or condition requires follow up, select “As a result of this exam, child needs further evaluation or treatment” box in ELMS.	Event Type: Well Baby/Physical Exam. Indicate concerns, no concerns, or not recommended. Identify needs and diagnosed chronic condition. Document follow-up, treatment, and communication under Add Action.

Lead and Low Iron (Anemia) Test Results

Lead tests should be completed at twelve months and two years. Anemia tests are typically completed between 9-12 months. Based on the results, document if there were concerns, no concerns, or not recommended in *ChildPlus-Lead or Anemia Health Event*. If the Well Child exam report is missing hemoglobin or hematocrit and lead test results, you can request the results from the health care provider separately. Connect with program Nurse Consultant as needed to support follow up.

If the health care provider states that they have not completed hematocrit/hemoglobin (Anemia) or lead tests, discuss with the family to request these tests at the child’s next well child exam. Document this discussion in *ChildPlus- Health Notes Event under Add Action*.