# GOAL 1: Provide health supervision for children from birth to adolescence

[Patient Care, Medical Knowledge]

<table>
<thead>
<tr>
<th>Content Area</th>
<th>Learning objectives</th>
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<tbody>
<tr>
<td>Health Supervision</td>
<td>• Describe the recommended sequence of well-child visits.</td>
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<td></td>
<td>• Perform age-appropriate histories and physical exams</td>
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<td></td>
<td>• Summarize timing and indications for common screening procedures (e.g. Hct, lead, TB, vision &amp; hearing)</td>
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<td>• Outline the recommended immunization schedule for children; order immunizations correctly.</td>
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<td>• List contraindications and side effects for each vaccine and obtain informed consent from parents.</td>
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<td>• Locate up-to-date information about vaccines and immunization recommendations</td>
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<td>• Provide individualized guidance for families who refuse immunizations</td>
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<tr>
<td></td>
<td>• Provide developmentally appropriate anticipatory guidance and parent education for families of children from birth to adolescence</td>
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<tr>
<td>Growth</td>
<td>• Distinguish normal from abnormal growth</td>
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<td>• Identify situations in which syndrome-specific growth charts should be used</td>
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<td>• Outline an initial plan for evaluation of short stature and failure to thrive</td>
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<tr>
<td>Development</td>
<td>• Perform developmental surveillance as part of each well-child visit</td>
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<td>• Summarize AAP Guidelines for Developmental Surveillance and Screening, including screening for autism</td>
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<td>• Demonstrate the use of standardized developmental screening tools at 9, 18, 24 months.</td>
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<tr>
<td></td>
<td>• Distinguish normal from abnormal development</td>
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<td></td>
<td>• Outline an initial approach to the evaluation of developmental delay.</td>
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<td>• Refer children with developmental concerns to appropriate community-based services</td>
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</table>
| Physical problems and concerns           | • Identify, evaluate, and manage common physical problems and concerns that arise in the context of well-child visits. (See Continuity Learning Topics List, below.)  
• Prioritize problems appropriately       |
| Parenting, behavioral concerns           | • Counsel parents, provide anticipatory guidance                                    
• Identify, evaluate, and manage common problems and concerns related to parenting and behavior. (See Continuity Learning Topics List, below.) |
| Obesity                                  | • Identify and manage patients who are at risk, overweight, and obese              
• List nutritional and behavioral risk factors for overweight/obesity            
• Summarize guidelines for laboratory screening for patients who are overweight or obese  
• Partner with families to identify appropriate goals for lifestyle changes      |
| ADHD & Concerns about School Performance | • Use and interpret results of commonly used tools for assessing signs and symptoms of ADHD (e.g. Vanderbilt scales) 
• Create a plan for treatment and monitoring of uncomplicated ADD/ADHD          
• Use information from schools or other community-based organizations to modify management of ADHD |
| Evidence-based practice                  | • Outline an initial differential diagnosis for problems with school performance    
• Discuss the roles and responsibilities of physicians, schools, and specialists in evaluating and treating problems with school performance |
| Interface with the broader health care system | • Locate and summarize practice guidelines relevant to health supervision and common concerns that arise in the context of well-child care. (See Continuity Learning Topics List, below.)  
• Demonstrate a flexible approach to decision-making that incorporates available evidence and individual patients’ preferences and needs |
|                                        | • Assist patients in navigating the complexities of the health care system.        
• Demonstrate an awareness of the impact of insurance status on options for care.  
• Refer patients appropriately to subspecialists or community resources.        |
**Goal 3: Communicate effectively with patients and families, during and beyond visits to clinic.**  
[Interpersonal Communication]

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| Patient-centered/family centered communication| • Deliberately elicit and address patients’ concerns, priorities, and perspectives as a foundation for providing guidance and recommendations for care  
• Provide clear, appropriate patient education and anticipatory guidance to families                                                                 |
| Communication across language barriers        | • Recognize the need for foreign language interpretation  
• Demonstrate effective use of an interpreter                                                                                                                                                                        |

**Goal 4: Work effectively as part of a multidisciplinary team**

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<tbody>
<tr>
<td>Time management</td>
<td>• Adapt to time constraints at health supervision visits by adjusting visit content – according to parental concerns, child’s health status and developmental level, environmental and social risks or other factors</td>
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</tbody>
</table>
| Professionalism and Interpersonal Communication | • Demonstrate respect for the roles, contributions, and input of all members of the care team  
• Communicate clearly with staff about scheduling, orders, clinic flow, and other aspects of patient care  
• Demonstrate accountability and a sense of primary responsibility for patient care  
• Extend oneself to help other members of the patient care team |
CONTINUITY CLINIC LEARNING TOPICS 2017-18

Common Concerns

The common concerns list includes many of the most common concerns raised by parents in the context of primary care visits.

Interns should pay particular attention to the set of concerns marked PL-1. By the end of the training year, PL-2 residents should feel comfortable identifying and addressing all of the PL-1 concerns, plus those marked PL-2, etc.

For each of the following concerns in the table:

- List key findings to elicit on history and exam
- Outline possible treatment/management plans
- Describe clinical features to consider in planning follow-up
- Discuss natural history, complications, indications for hospitalization, indications for subspecialty referral

<table>
<thead>
<tr>
<th>Training Level</th>
<th>Concerns</th>
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</table>
| PL-1           | *Physical problems and concerns*  
|                | o Dacryostenosis  
|                | o Umbilical hernia  
|                | o Eczema/Seborrhea  
|                | o Positional plagiocephaly  
|                | o Heart murmurs  
|                | o Undescended testicle  
|                | o Constipation  

|                  | *Parenting, Behavioral concerns*  
|                  | o Temper tantrums  
|                  | o Infant-toddler-preschool sleep difficulties |

| PL-2             | *Physical problems and concerns*  
|                  | o Developmental dysplasia of the hip  
|                  | o Dental caries  
|                  | o Food allergies  
|                  | o Asthma  
|                  | o Positive PPD  
|                  | o Intoeing/outtoeing  
|                  | o Bow-legs; knock-knees  
|                  | o Flat feet  
|                  | o Leg pain  
|                  | o Pre-sports physical |
Parenting, Behavioral concerns
- Nocturnal enuresis
- Biting, aggression

PL-3
Physical problems and concerns
- Abnormal head growth
- Failure to thrive
- Failed vision or hearing screen
- Visual tropias and phorias
- Recurrent acute otitis media or OME
- Snoring
- Hypertension
- Acne
- Dysmenorrhea/menstrual irregularities
- Scoliosis
- Early/late pubertal development
- Encopresis

Parenting and behavioral concerns
- School performance problems

Anticipatory Guidance and Parent Education

The follow list outlines possible topics for anticipatory guidance at various ages. Residents at each level should be able to independently provide guidance and patient education for each topic listed for that year of training.

<table>
<thead>
<tr>
<th>Training Level</th>
<th>Topic</th>
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| PL-1          | Support for breastfeeding  
                Infant formula choice and preparation for normal infants  
                Timing and approach to starting solid foods  
                Weaning from breast/bottle  
                Vitamin, iron, fluoride supplementation  
                Dental care  
                Car seat laws/recommendations  
                Sleep position  
                Sleep habits  
                Water safety  
                Child-proofing the home |
| PL-2 | Sun exposure  
|      | Pet safety  
|      | Firearms  
|      | Toilet training |
| PL-3 | Behavioral changes to expect with age (separation anxiety, exploratory behavior, limit-testing, fears...)  
|      | Discipline  
|      | School/Kindergarten readiness |

**Practice-Based Learning and Improvement**

Residents should be able to locate and summarize national practice guidelines for the following issues and concerns:

- Developmental Surveillance and Screening
- Autism
- ADHD – evaluation, management
- Constipation
- Asthma
- Developmental Dysplasia of the Hip
- Obesity
- Otitis Media with Effusion
- Hypertension