

Patient Name: _____

Date of Birth: _____

WELL CHILD VISIT POLICY

The well child visit is an opportunity to discuss your child's growth and development and discuss important age-related safety and behavior topics. This visit also allows us to do a complete physical exam so we can identify medical problems that may not be readily apparent without a thorough physical exam. The purpose of your child's visit is what is called "preventative care"—looking for and discussing issues that may affect your child's growth, development and general well being so that we can identify and prevent smaller issues from progressing into larger problems.

Things that are included in your child's well visit:

- Measurement of weight, height/length, head circumference (1yr and under), blood pressure (5yr and up)
- A complete head-to-toe physical exam done by your provider (doctor or nurse practitioner)
- A discussion with your provider about your child's growth and nutrition/diet
- A discussion with your provider about normal developmental milestones and your child's progression in achieving these
- A discussion with your provider about normal age-related development and safety topics
- Discussion of sports-related screening questions for student athletes and completion of related forms

If needed, your child will receive immunizations (shots) at the well child visit. Please note that these are billed separately to your insurance company. We, however, have limited access to coverage and benefit information and you are ultimately responsible for knowing your plan limitations. If the immunizations are not covered by insurance, you will receive a bill from our office.

In addition to the above, many of our visits include other screening or preventative care. The following are a list of some of the items that fall into this group. These are billed separately to your insurance company and may or may not be covered under your insurance plan. Rest assured that our recommendations for these services are made because they are a part of the American Academy of Pediatrics' Bright Futures Guidelines. These guidelines are the gold-standard of care in pediatrics and are important to identifying any issues EARLY before they become larger problems. Most, but not all, insurance companies pay for services recommended under these guidelines.

- Standardized Developmental Surveys (PHQ9, EDINBURGH, MCHAT, etc.)
- Hemoglobin, lead blood test, lipids and glucose tests.
- Vision Screening (Pediavision)
- Hearing Screening
- Depression, Anxiety, ADHD, lead, and other standardized screening questionnaires

Please also note that well child care does not include care of other chronic medical conditions (asthma, ADHD, allergies, mental health issues) or acute illnesses (ear infections, strep throat, gastrointestinal illnesses, etc) that occur at the same time as the well visit. ***If we evaluate and treat chronic or acute conditions during the course of the well visit we are mandated by your insurance company to document and bill separately for those issues.*** As such, you may be required to pay a copay. Please know that this is required by the insurance companies and we are forced to comply with this policy, as failure to do so would constitute insurance fraud.

I acknowledge I have read and understand the above policy. I agree I am responsible for any and all charges deemed to be my responsibility by my insurance carrier. These include, but are not limited to, co-pays, deductibles, co-insurance, benefits, and any services not covered by my insurance carrier

Parent/Guardian Signature

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