

Table 2: Convergence of Guidelines for Adolescence

	GAPS		Bright Futures		Services		Health Supervision Guidelines	
SCREENING:	Recommended?	Age(s)	Recommended?	Age(s)	Recommended?	Age(s)	Recommended?	Age(s)
Acne and other Common Dermatoses			Yes	11-21			Yes	12-17
Activities			Yes (A,P)	11-21			Yes	12-21
Alternative Medicine Treatments			Yes	11-21				
Anemia Among Females			Yes (7)	11-21	No		Yes (7)	12-21
Asymmetric Breast Development							Yes (7)	12-21
<b>Body Image</b>	Yes		Yes	11-21	Yes (H)		Yes	
Breast Exam			Yes (7)	11-21	No		Yes	12-21
Check for Kyphosis			Yes	11-14			Yes	14-17
Dental Health			*		*		Yes	11-13, 18, 19
<b>Depression</b>	Yes (A,P)	A:All	Yes (A,P)	11-21	*		Yes (A,P)	A:11-21 P:11-15
Dipstick Leukocyte Esterase for Males	Yes (1)		Yes (1)				Yes	once 11-21
Discipline			Yes (A,P)	11-14				
<b>Eating Disorders / Obesity</b>	Yes	All	Yes (A,P)	11-21	Yes (H)		Yes (A,P)	A:12-21 P:14,15
Emotional Well-Being	Yes	All	Yes (A,P)	A: 11-21 P: 15-17			Yes (A,P)	A:12-21 P:12,13
Evaluate Musculoskeletal Sys. - Sports Fitness							Yes	14-21
Evaluation of Males for Gynecomastia			Yes	11-21			Yes	12-17
Evidence of Abuse	Yes	All	Yes	11-21	*			
Examination for Hernias			Yes	11-21				
Exam. for Testicular Cancer			Yes	11-21	No		Yes	12-21
Exercise			Yes (A,P)	A:11-21 P:11-14	Yes		Yes	12-19
Family Functioning			Yes (A,P)	A: 11-21 P: 11-17			Yes (A,P)	
Future Plans			Yes (A,P)	A:15-17 P:15-21			Yes	18-21
<b>Genital Examination</b>	Yes (H)		Yes	11-21	*(females)		Yes	12-13
GI / GU Function			Yes	11-14			Yes	12-21
Goiter							Yes	12-13
Hearing Screening			Yes (H)	11-21	Yes (H)		Yes	12-13, 18-19
Hepatitis B Screening for High Risk Individuals							Yes (1)	18-19
HPV Infection in Sexually Active Adolescents	Yes (1)		Yes (1)		No			
<b>Hyperlipidemia</b>	Yes (H)		Yes (H)	11-21	Yes (H)		Yes (H)	12-21
Injury Prevention			Yes (A,P)	A:11-21 P:11-14			Yes (H)	12-21
Inspection of External Genitalia: Condyloma/Lesions	Yes (H) (1)		Yes	11-21	*		Yes	12-13
Interval History			Yes	11-21			Yes	12-21
Learning/School Problems	Yes	All	Yes (A,P)	A:11-21 P:11-17			Yes (A,P)	A:12-21 P:12-15
<b>Measure Blood Pressure / Hypertension</b>		All	Yes	11-21	Yes		Yes	12-21
<b>Measure Height and Weight</b>	Yes	All	Yes	11-21	Yes		Yes	12-21
Nutrition			Yes	11-21			Yes(A,P)	A:12-21 P:12-13
Observation of Behavior & Development							Yes (A,P)	A:12-13 P: 12-19
Observation of Parent-Adolescent Interaction			Yes	11-17				
<b>Pelvic Exam/Pap Smear for Females</b>	Yes (1)	18+ (H):All	Yes (1)	11-21	Yes (1)		Yes (1)	12-21
Rubella Serology					Yes (1)	Once		
Scoliosis			Yes	11-17	No		Yes	12-17
<b>Sexual Behavior</b>	Yes	All	Yes (A,P)	11-21	Yes		Yes (A,P)	A:12-21 P:12-13
Sexual Development			Yes	11-21			Yes (A,P)	A:12-19 P: 12-15
Sexual Education			Yes (A, P)	A:11-14 P:11-17				A: 12-13 P: 12-13
Sleep Patterns							Yes (A,P)	A: 12-21 P: 12-13
Social Relationships/Peer Influences			Yes (A,P)	A:11-21 P:11-14			Yes (A,P)	A: 12-21 P: 12-21
<b>STD's</b>	Yes (1,3)		Yes (1)	11-21	Yes (1, 7) (H)		Yes (1)	12-21
<b>STD (Gonorrhea)</b>	Yes (1,3)		Yes (1)	11-21	Yes (1, 7)		Yes (H)	11-21
<b>STD (HIV)</b>	Yes (1,3)		Yes (H)(2)	11-21	Yes (H)		Yes (H) (2)	11-21
<b>STD (Syphilis)</b>	Yes (1,3)		Yes (H)(2)	11-21	Yes (H)		Yes (1)	11-21
<b>Suicide Risk</b>	Yes (H)	All	Yes	11-21	*		Yes (A,P)	A:12-21 P:14,15
Tanner Stage or Sexual Maturity Rating (SMR)			Yes	11-21			Yes	12-19
Television			Yes (A,P)	11-21			Yes	14-17
<b>Tuberculosis</b>	Yes (H)		Yes (H)		Yes (H)		Yes (H)	12-21
Urinalysis			Yes	11-21				
<b>Use of Alcohol</b>	Yes	All	Yes (A,P)	11-21	Yes		Yes (A,P)	A:12-13 P:12-21
<b>Use of Drugs</b>	Yes	All	Yes (A,P)	11-21	Yes		Yes (A,P)	A:14-21 P:12-21
<b>Use of Tobacco</b>	Yes	All	Yes (A,P)	11-21	Yes		Yes	12-13
Violent Behavior			Yes (A,P)	11-21	*		Yes	12-19
Vision screen			Yes	11-21			Yes	12,13,18,19
Vocational Performance			Yes (A,P)	18-21			Yes	18-21

	GAPS		Bright Futures		Guide to Clinical Prev. Svcs		Health Supervision Guidelines	
<b>COUNSELING:</b>	Recommended?	Age(s)	Recommended?	Age(s)	Recommended?	Age(s)	Recommended?	Age(s)
Avoid Excess/Midday Sun			Yes	11-21	Yes (H)		Yes	12,13,18,19
Constructive Family Relations	Yes		Yes (A,P)	11-21			Yes (A,P)	A:18-19 P:121-17
Dental Care			Yes	11-21	Yes		Yes	18-21
<b>Diet</b>	Yes	All	Yes	11-21	Yes (4)		Yes	12-21
Discussing Health Related Behaviors	Yes (P)	All	Yes (P)	11-21			Yes (A,P)	12-17
<b>Drinking and Driving</b>	Yes (A,P)		Yes (A,P)	15-21	Yes		Yes	12-21
<b>Exercise</b>	Yes	All	Yes	11-21	Yes		Yes	12-21
Future Plans			Yes	11-21			Yes	18-19
Health Guidance: Growth & Development.	Yes	All	Yes	11-21			Yes (A,P)	A:12-21 P:12-13
<b>Injury Prevention</b>	Yes	All	Yes (A,P)	11-21	Yes		Yes (A,P)	21-21
Need for Privacy (Counsel Parents)			Yes	11-21			Yes	14-17
Normative Adolescent Development	Yes (P)	3x 11-21	Yes (P)	11-21			Yes (P)	21-21
Positive Role-Modeling	Yes (P)		Yes (P)	11-21			Yes (P)	14-15
Promotion of Community Interactions			Yes	11-21			Yes	16-17
Recognizing Signs of Disease (Parents)	Yes							
Recog. signs of Emotional Distress (Parents)	Yes							
Self-Esteem	Yes (P)		Yes (P)	11-21			Yes (P)	12-13
<b>Sexual Behavior</b>	Yes (A,P)	A:All	Yes	11-21	Yes		Yes	12-21
Sleep Patterns			Yes	11-21			Yes	16-21
Social Competence			Yes	11-21			Yes	14-21
Suicide (Counseling Parents)	Yes				Yes			
Television			Yes	11-21				
<b>Use of Alcohol</b>	Yes (A,P)	A:All	Yes (A,P)	11-21	Yes (H)		Yes	12-21
<b>Use of Drugs</b>	Yes (A,P)	A:All	Yes (A,P)	11-21	Yes (H)		Yes	12-21
<b>Use of Tobacco</b>	Yes (A,P)	A:All	Yes (A,P)	11-21	Yes (H)		Yes	12-21
<b>Violence Prevention</b>	Yes (A,P)		Yes	11-21	Yes (H)		Yes	12-21

  

<b>IMMUNIZATIONS:</b>	Recommended?	Age(s)	Recommended?	Age(s)	Recommended?	Age(s)	Recommended?	Age(s)
<b>MMR</b>	(8)		(8)		(8)		(8)	
<b>Td Booster</b>	(8)		(8)		(8)		(8)	
<b>Hepatitis B</b>	(8)		(8)		(8)		(8)	

**KEY:**

**Recommendations in bold** - recommended by all four guidelines.

Unless otherwise stated, recommendation refers to adolescent.

(H) - Indicated for high-risk adolescents only.

A = Recommendation made for Adolescent.

P = Recommendation made for Parent.

\* - Alert to Evidence

(1) - Recommended only for sexually active adolescents.

(2) - Perform only if requested by adolescent.

(3) - GAPS does not specify: "Sexually active teens should be screened for STDs".

(4) - Can be performed by dietician.

(5) - Recommended if adolescent has not received two prior doses.

(6) - Adolescents should receive Td vaccine 10 years after their previous DPT or Td vaccination.

(7) - Females only.

(8) - Advisory Committee on Immunization Practices (ACIP), composed of members from CDC, AAP, AAFP generally considered authoritative source for immunizations. Published each January in MMWR.

NOTE: GAPS = guidelines for adolescent preventive services

## **References:**

Elster, A. B., & Kuznets, N. J. (Eds.). (1994). *AMA guidelines for adolescent preventive services (GAPS): Recommendations and rationale*. Baltimore: Williams & Wilkins.

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Stein, M. (Ed.). (1997). *Guidelines for health supervision* (3rd ed.). Elk Grove, IL: American Academy of Pediatrics.

U.S. Preventive Services Task Force. (1996). *Guide to clinical preventive services* (2nd ed.). Alexandria, VA: International Medical Publishing.

U.S. Public Health Service. (1998). *Clinician's handbook of preventive services: Put prevention into practice* (2nd ed.). Alexandria, VA: International Medical Publishing.