PROCEDURE

Well-child visits

A well-child visit is a scheduled checkup of a child's growth, development, health, and preventive care needs.

PURPOSE
Support healthy development and identify concerns early

PROCEDURE TYPE
Both; bedside examination, screening, counselling, and preventive treatment

WHERE IT IS DONE
Outpatient clinic

ANAESTHESIA
None

HOW LONG IT TAKES
About 20-60 minutes, based on age and care needed

PREPARATION
Bring records, medicines, questions, and requested forms

RECOVERY
Same day; no driving restriction unless the child feels unwell

MAIN RISKS
Missed concerns, false-positive screens, distress, vaccine reactions

RESULTS
Most immediate; laboratory and referral results take days

Overview

A well-child visit is a planned health check for a baby, child, or teenager. It is sometimes called a preventive visit or routine checkup.

The visit looks at more than whether your child is sick. The healthcare professional reviews growth, physical health, development, learning, behaviour, emotional well-being, sleep, nutrition, safety, and family concerns. Vaccines, screening tests, and preventive treatments may be offered when appropriate.

Visits are more frequent during infancy and early childhood, when growth and development change quickly. They usually continue at regular intervals through adolescence. The exact schedule reflects your child's age, health needs, previous results, and local recommendations.

A well-child visit is not the same as an appointment focused on one illness or injury. Tell the clinic about important current symptoms when booking. The team may address them during the checkup, arrange extra time, or schedule a separate visit.

Why the procedure is performed

Well-child visits help your healthcare team understand how your child is doing over time. Comparing measurements and observations across several visits can reveal changes that may not be obvious from one appointment.

The visit may be used to:

The visit also gives you and your child time to raise concerns. A teenager may be offered part of the appointment in private so they can ask questions confidentially, within the limits of local law and safety requirements.

- Measure height or length, weight, and head size when age-appropriate
- Check physical health and development
- Discuss eating, sleep, activity, learning, behaviour, and relationships
- Screen for vision, hearing, dental, developmental, or mental health concerns
- Review medicines, allergies, medical history, and family history
- Provide vaccines and other preventive care
- Offer age-specific guidance about safety and healthy habits
- Complete forms or arrange referrals when needed

Who should and should not have it

Routine well-child care is intended for all children and teenagers, including those who feel well and those living with long-term medical conditions. Children with complex needs may require longer or additional appointments.

There are few reasons to avoid the whole visit. However, it may need to be changed or delayed if your child has a contagious illness, is too unwell to take part, or needs urgent assessment instead. Call the facility before arriving if your child has new infectious symptoms. A mild illness does not automatically prevent a checkup or vaccination.

Individual parts of the visit may not be appropriate for everyone. For example, a vaccine may be delayed or avoided after a serious allergic reaction to a previous dose or one of its

ingredients. Some live vaccines are unsuitable during pregnancy or for people with certain immune system problems. The healthcare team should review each vaccine separately rather than cancelling preventive care altogether.

An examination or screening test should be explained before it happens. You or your child can ask for a pause, a chaperone, more privacy, or a different approach. Consent requirements reflect the child's age, ability to understand, and local law.

How to prepare

Follow the treating facility's own instructions first, because its forms and appointment process take priority.

Most well-child visits do not require fasting or changes to medicines. Bring an up-to-date list of medicines, vitamins, supplements, and allergies. Do not stop prescribed medicine unless the treating healthcare professional has told you to do so.

It may help to bring:

Dress younger children in clothing that is easy to remove and replace. Explain in simple terms that the visit may include measurements, questions, an examination, and possibly vaccines or other tests.

Ask whether a urine sample, questionnaire, or school report is needed. If your teenager may speak with the healthcare professional alone, discuss this before the appointment so it is not unexpected.

- Vaccination and previous medical records not already held by the clinic
- Glasses, hearing devices, or other equipment your child uses
- School, childcare, sports, or medication forms
- Notes about symptoms, development, behaviour, sleep, or learning
- Questions from both you and your child

What happens during the procedure

A nurse, medical assistant, or healthcare professional usually checks your child's height or length and weight. Head size may be measured in younger children. Blood pressure, pulse, or other observations may also be taken when appropriate.

The healthcare professional asks about your child's health and daily life. Questions change with

age. They may cover feeding, toilet training, movement, language, school, sleep, mood, friendships, sexual health, substance use, or safety.

A physical examination commonly includes listening to the heart and lungs and checking the eyes, ears, mouth, abdomen, skin, joints, and nervous system. Only age-appropriate and medically relevant areas should be examined. The professional should explain more sensitive parts and provide privacy.

Screening may involve a questionnaire, vision or hearing check, laboratory test, or developmental activity. Screening does not diagnose a condition. An unusual result means that further assessment may be useful.

The visit may finish with vaccines, preventive treatments, health advice, forms, or referrals. You should have an opportunity to ask what is being recommended and why.

Recovery and what to expect afterward

Pain: Most of the visit is painless. Vaccines, finger-prick tests, or blood tests may cause brief discomfort. An injection site can be sore afterward.

Eating: Your child can usually eat and drink normally. If they feel faint after a needle, the team may suggest resting and having a drink or snack.

Activity: Normal activity can usually resume immediately. A sore arm may make vigorous activity uncomfortable for a short time.

Driving: No anaesthetic or sedation is normally used, so an adult can drive home. A teenager who drives should wait until any dizziness, faintness, or strong emotional distress has passed.

School and work: Most children can return to school or childcare the same day. Parents and caregivers can usually return to work after the appointment, unless the child feels unwell or needs further care.

Risks and possible complications

The physical examination itself has little medical risk. Some children may feel embarrassed, anxious, overstimulated, or upset, especially during an unfamiliar examination or injection. Clear explanations, privacy, and breaks can help.

Screening tests can produce a false-positive result, meaning the result suggests a possible concern that further assessment does not confirm. A false-negative result can miss a concern. Screening should therefore be considered alongside your observations, the examination, and

follow-up over time.

Blood sampling can cause short-lived pain, bruising, or fainting. Vaccines commonly cause temporary soreness and may cause mild general symptoms. Serious allergic reactions can occur but are uncommon, which is why clinics have procedures for recognizing and treating them.

There is also a risk that a concern will not be identified during one visit. Contact the healthcare team later if you notice a new issue or remain worried.

Results and follow up

Measurements, examination findings, and many screening results are discussed during the appointment. The team may plot growth on a chart to compare it with your child's earlier pattern.

Questionnaires may be scored during or after the visit. Laboratory, hearing, vision, or other test results can take several days. Ask how results will be delivered and whether the clinic contacts you about normal results as well as unexpected ones.

Routine follow-up is usually the next scheduled well-child visit. Earlier follow-up may be arranged to repeat a measurement, discuss a concern, complete vaccination, or review symptoms. A referral may be offered for services such as hearing, vision, dental, developmental, mental health, nutrition, or specialist care.

An abnormal screening result is not necessarily a diagnosis. Further assessment is often needed to understand what it means.

Alternatives

There is no single replacement that provides all parts of a comprehensive well-child visit. Alternatives address narrower needs and involve tradeoffs.

A problem-focused appointment can assess a specific symptom, but may not include full developmental screening, preventive counselling, or vaccine review.

A school or sports physical may meet form requirements, but it is often narrower than a well-child visit and may not cover all recommended preventive care.

Telehealth can improve access and may work well for discussion or some screenings. It cannot fully replace accurate growth measurements, a hands-on examination, vaccines, or specimen collection.

A pharmacy or public health vaccine clinic can provide many vaccines, but it does not replace developmental, behavioural, physical, and mental health assessment.

You may decline an individual test, examination, or vaccine after discussing it. The tradeoff may be less protection or a lower chance of finding a concern early. Ask what the proposed service is intended to detect or prevent and what happens if you postpone it.

When to call your healthcare team

For routine advice, contact the clinic if you have questions about results, referrals, vaccine reactions, growth, development, learning, behaviour, or emotional well-being. Also call if expected results do not arrive within the timeframe the clinic gave you.

Seek prompt medical advice if your child develops worsening pain, marked injection-site swelling, persistent vomiting, unusual sleepiness, or symptoms that concern you after the visit.

Call emergency services for trouble breathing, swelling of the face or throat, collapse, unresponsiveness, a seizure, or other signs of a severe allergic reaction. Emergency help is also appropriate if your child is in immediate danger of harming themselves or someone else.

Common questions

Will my child be asleep?

No. Well-child visits do not normally involve sedation or anaesthesia. Your child remains awake and can usually stay with a parent or caregiver.

Can I drive home afterward?

Yes. There is normally no driving restriction. Wait at the clinic if your child or driving teenager feels faint or unwell after a test or vaccine.

How painful is a well-child visit?

Most of the visit does not hurt. Vaccines and blood tests can cause a brief sting, and the area may feel sore afterward.

When will I know the results?

Most examination findings and measurements are explained immediately. Questionnaires may be reviewed the same day, while laboratory or referral results can take several days.

Can my child have a well-child visit when sick?

Often, yes, especially with a mild illness. Call ahead if your child may be contagious or is too

unwell for routine activities. Urgent problems may need a separate assessment.

Why does the healthcare professional want to speak with my teenager alone?

Private time gives teenagers a chance to discuss sensitive health and safety concerns. Confidentiality has limits when someone may be at risk of serious harm, and these limits should be explained.

Sources

- American Academy of Pediatrics. Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents . 4th edition. American Academy of Pediatrics; 2017.
- American Academy of Pediatrics, Committee on Practice and Ambulatory Medicine. Recommendations for Preventive Pediatric Health Care . Periodicity schedule published in Pediatrics .
- Centers for Disease Control and Prevention. Child and Adolescent Immunization Schedule by Age . 2025.
- Health Resources and Services Administration, Maternal and Child Health Bureau. Bright Futures: Health Promotion and Preventive Services for Infants, Children, Adolescents, and Their Families .
- U.S. Preventive Services Task Force. Recommendations for Children and Adolescents: Preventive Services and Screening Recommendations .