

The well child and adolescent

(May 2017)

Rationale

Primary care physicians assess the dynamic stages of growth, development and behaviours of infants, children and adolescents. Physicians must be able to distinguish age-appropriate normal patterns, which require no intervention, from pathological deviations, which require further evaluation. A comprehensive awareness of the difference between normal and abnormal growth, development and/or behaviours minimizes the risks of inaccurate diagnoses and inappropriate investigations while allowing for early diagnosis and intervention in case of abnormal trajectory.

Milestones

(list not exhaustive)

- Somatic growth (head circumference, length/height, weight)
- Pubertal development
- Development
 - a. Motor skills
 - Gross motor (e.g., walking, riding a bicycle)
 - Fine motor (e.g., ability to transfer objects from one hand to another)
 - b. Communication and language
 - 1. Expressive
 - 2. Receptive
 - 3. Mixed
 - c. Cognitive

1. Problem-solving skills
 2. Rate of learning, memory, executive functioning
- d. Self-care skills
 - e. Behaviour (e.g., head banging)
 - f. Social/emotional health (e.g., stranger anxiety, relationship building)
 - g. Pre-academic/academic skills

Key Objectives

Given an infant, child or adolescent, the candidate will identify normal milestones of chronological and developmental age, with regards to growth, development and behaviours. Concerns from parents or guardians will be addressed and reassurance given if the individual is growing and developing within the expected limits. Abnormal findings should be addressed through proper investigations and referrals, when indicated.

Enabling Objectives

Given an infant, child or adolescent, the candidate will

- List and interpret relevant clinical findings, including those based on
 - a. a proper history of growth and developmental milestones appropriate for the age group of the individual;
 - b. an appropriate physical examination with particular attention to the milestones of the chronological/developmental age;
 - c. proper documentation of growth and development;
- List and interpret relevant preliminary investigations if the individual is found to have abnormal growth and/or development milestones;
- Conduct an effective initial management plan, including
 - a. reassurance in case of normal growth/development or variants of these;
 - b. referral to appropriate specialized care (e.g., pediatrics, speech and language therapy, psychology) in case of abnormal findings.