Summary: Pediatric Screening Tools from Getting Started Guide (AAP)

What It Identifies	Recommended Tools	Category	AAP-Recommended Screening Interval(s)	Typical Length	Cost	Age Range	Languages	Common CPT
• Communication delays • Motor delays • Early cognitive concerns +SDOH	ASQ-3	Developmental	9, 18, and 30 months; when concerns arise	10–15 min	Paid	1–66 months	Multiple	96110
	PEDS	Developmental	9, 18, and 30 months; when concerns arise	2–5 min	Paid	Birth–8 years	Multiple	96110
	SWYC (dev items)	Developmental/SDOH	9, 18, and 30 months; when concerns arise	~10 min	Free	1–65 months	English/Spanish	96110 (dev), 96160–96161 (SDOH)
• Behavioral dysregulation • Emotional concerns • Early signs of MEB disorders	ASQ-SE2	Social-Emotional	At every well visit birth–5 years	10–15 min	Paid	1–72 months	Multiple	96127
	BPSC/PPSC (SWYC)	Social-Emotional	At every well visit birth–5 years	~5 min	Free	BPSC: <18 mo.; PPSC: 18 mo.–5 yr	English/Spanish	96127
	BITSEA	Social-Emotional	At every well visit birth–3 years (as used)	~10 min	Paid	12–36 months	English/Spanish	96127
	ECSA	Social-Emotional	At every well visit (use per practice)	~10 min	Paid	18–60 months	Limited	96127
	SDQ	Social-Emotional / Global MEB	Annually ≥3 years; also when concerns arise; can be used ages 2–17	5–10 min	Free	2–17 years	40+	96127
• Social communication delay • ASD red flags	M-CHAT-R/F	Autism	18 and 24 months	5–10 min	Free	16–30 months	Multiple	96110
	POSI (SWYC)	Autism	18 and 24 months	2–3 min	Free	18–36 months	English/Spanish	96110
• Caregiver depression • Family stress impacting child health	EPDS	Perinatal Depression (caregiver)	1, 2, 4, and 6 months	~5 min	Free	Caregiver	Multiple	96161
	PHQ-2	Perinatal Depression (caregiver)	1, 2, 4, and 6 months (screen/triage)	<2 min	Free	Caregiver	Multiple	96161
	PHQ-9	Perinatal Depression (caregiver)	1, 2, 4, and 6 months (diagnostic follow-up)	~5 min	Free	Caregiver	Multiple	96161
• Food insecurity • Housing instability • Transportation needs • Safety concerns • Financial stressors	PRAPARE	Social Drivers of Health (SDOH)	Every visit or as indicated	5–10 min	Free	All ages (caregiver)	Multiple	96160
	SEEK	SDOH (risk/safety)	Every visit or as indicated (0–5)	~5 min	Free	0–5 years	English/Spanish	96160
	Health Leads	SDOH	Every visit or as indicated	5–10 min	Free	All ages	Multiple	96160
	WE CARE	SDOH	Every visit or as indicated	~5 min	Free	All ages	Multiple	96160
	Hunger Vital Sign	SDOH (food insecurity)	Every visit or as indicated	<2 min	Free	All ages	English/Spanish	96160
	IHELLP	SDOH (mnemonic)	Every visit or as indicated	~5 min	Free	All ages	Multiple	96160
	Whole Child Assessment	SDOH	Every visit or as indicated (0–5)	10–15 min	Free	0–5 years	English/Spanish	96160

Chart summarizes all tools identified in the *Getting Started Guide*, organized with:

1. Tool name
2. Category
3. Length
4. Cost
5. Age range
6. Languages available

Who:

1. Pediatricians
2. Family medicine providers caring for children
3. Nurse practitioners and physician assistants working in pediatric primary care settings

Key steps in implementing a screening process that includes:

1. Identifying current practices around screening
2. Building a practice improvement team around a practice champion
3. Identifying new tools to implement or to replace previous tools that will best serve the practice's patient population
4. Designing the workflow for the use of new tools
5. Sustaining an established screening system
6. Appropriate billing and coding for administering, scoring, and reporting screens

The key issues that predict successful screening include:

1. Ensuring all staff are trained
2. Using shared decision-making regarding decisions around screening results
3. Selecting appropriate
4. Culturally relevant screening tools
5. Combining screening and surveillance to identify children with MEB problems over time
6. Maintains updated information around constantly in-flux billing recommendations ("Coding and Valuation," available within AAP practice management resources)

General Workflow Tips

1. Offer screening **before the visit** via portal or paper
2. Ensure tools are available in **multiple languages**
3. Use EHR auto-scoring when possible
4. Discuss results with family at every visit
5. Provide warm handoffs for referrals

Sources:

• AAP/ECDHS *Getting Started Guide: Implementing a Screening Process* — screening intervals and CPTs for 0–5 (perinatal depression at 1, 2, 4, 6 months; developmental at 9, 18, 30; autism at 18 & 24; social-emotional and SDOH at every visit). ECDHSCenter@zerotothree.org

• AAP Clinical Report (Pediatrics, 2025): *Promoting Optimal Development: Screening for Mental Health, Emotional, and Behavioral Problems* — annual MEB screening ≥3 years and additional adolescent screening expectations.

Screening Tools Identified in the Guide

1. Developmental Screening Tools

- Ages & Stages Questionnaire (ASQ-3)
- Parents' Evaluation of Developmental Status (PEDS)
- Survey of Well-Being of Young Children (SWYC) (includes developmental items)

2. Social-Emotional Development Screening Tools

- ASQ-SE2 (Ages & Stages Questionnaire: Social-Emotional 2)
- BPSC / PPSC (Baby Pediatric Symptom Checklist / Preschool Pediatric Symptom Checklist) – included in SWYC
- BITSEA (Brief Infant-Toddler Social Emotional Assessment)
- ECSA (Early Childhood Screening Assessment)
- Strengths and Difficulties Questionnaire (SDQ) — also listed under SDOH tools

3. Autism Screening Tools

- M-CHAT-R/F (Modified Checklist for Autism in Toddlers – Revised/Follow-Up)
- POSI (Parent's Observations of Social Interactions) – included in SWYC

4. Perinatal Depression Screening Tools

- Edinburgh Postpartum Depression Scale (EPDS)
- PHQ-2 (Patient Health Questionnaire-2)
- PHQ-9 (Patient Health Questionnaire-9)
- Perinatal depression questions embedded in SWYC

5. Social Drivers of Health (SDOH) Screening Tools

- PRAPARE (Protocol for Responding to and Assessing Patients' Assets, Risks & Experiences)
- SEEK (Safe Environment for Every Kid Questionnaire)
- SWYC (contains SDOH questions)
- Health Leads Screening Tool
- Strengths and Difficulties Questionnaire (SDQ) — measures behavioral & emotional functioning
- Whole Child Assessment
- WE CARE Survey
- Hunger Vital Sign
- Accountable Health Communities Screening Questions
- IHELLP (Income, Housing, Education, Legal Status, Literacy, Personal Safety)

6. Integrated Tools / Platforms Supporting Screening

(Referenced as systems families may use to complete screens)

- **Well-Visit Planner -** The Well Visit Planner is a 10–15-minute online tool that helps families complete age-specific screenings, identify priorities, and generate a personalized Well Visit Guide to share with child health providers. It streamlines screening, increases family engagement, and helps providers focus on what each child and family needs most. It was created by the Child and Adolescent Health Measurement Initiative (CAHMI) in partnership with HRSA and the American Academy of Pediatrics.
- **CHADIS -** CHADIS (Comprehensive Health and Decision Information System) is a web-based pediatric screening, diagnostic, and clinical decision-support platform used by medical practices to collect standardized questionnaires from patients and caregivers before or during visits. It is widely used in pediatrics to support developmental, behavioral, mental health, and social determinants of health (SDOH) screening. (CHADIS offers 600+ validated questionnaires)
- **ASQ Online -** Parents can complete ASQ-3 or ASQ:SE-2 online using ASQ Family Access, which integrates with ASQ Online.
- **Phreesia -** Phreesia is a digital patient intake software platform that streamlines registration, check-in, forms, insurance verification, payments, and clinical questionnaires for healthcare organizations.