



## **Appendix 1**

**This appendix was part of the submitted manuscript and has been peer reviewed. It is posted as supplied by the authors.**

Appendix to: Thomas R, Doust JA, Vasan K, et al. Identified health concerns and changes in management resulting from the Healthy Kids Check in two Queensland practices. *Med J Aust* 2014; 201: 404-408. doi: 10.5694/mja14.00637.

## Appendix 1 Mandatory Healthy Kids Check (HKC) Components and Evidence of Effectiveness

HKC Mandatory Component	NHMRC <sup>^</sup> Childhood Screening and Surveillance recommendation *	Narrative review recommendation #
Height	Insufficient evidence	Insufficient evidence unless used to calculate BMI to identify overweight
Weight	Not recommended for obesity Insufficient for failure to thrive	Insufficient evidence unless converted to BMI to identify overweight
Vision	Insufficient evidence for vision acuity Not recommended for colour vision	Insufficient evidence
Hearing	Insufficient evidence for school entry; good evidence <i>against</i> distraction testing; good evidence <i>against</i> screening for otitis media	Recommended to ask for parental concern; good evidence <i>against</i> screening for otitis media
Oral Health	Insufficient evidence	Insufficient evidence
Toileting	Not considered	Not recommended
Notating known allergies	Not considered	Recommended (consensus-based guideline statement; below NHMRC level III-3)

<sup>^</sup> NHMRC = National Health and Medical Research Council

\* Oberklaid F, Wake M, Harris C, et al. Child Health Screening and Surveillance: A critical review of the evidence. *National Health and Medical Research Council*, 2002. (Rescinded, 2013)

# Alexander KE, Mazza D. The Healthy Kids Check – is it evidence-based? *MJA*, 2010;192;207-210.