

The Rourke Baby Record

Anticipatory guidance, health maintenance, periodic health examination, well baby care – Is an ounce of prevention really worth a pound of cure? There is no doubt that the plethora of new pharmacological agents, life support systems for the critically ill or injured, and highly specialized medical and surgical advances, along with greatly improved living conditions, have improved survival rates and the quality of life in childhood. Yet, do healthy infants and children need preventive health services to maximize their health outcomes?

Recommendations for guiding paediatric clinicians in the practice of 'health supervision' have been well established and published in the medical literature (1-6). The recent articles entitled "Evidence-based well-baby care. Part 1: Overview of the next generation of the Rourke Baby Record" and "Evidence-based well-baby care. Part 2: Education and advice section of the next generation of the Rourke Baby Record", published in *Canadian Family Physician* (7,8), consolidate the current available scientific evidence, which supports the manoeuvres most appropriate for the periodic health examination between birth and five years of age. The format of the Rourke Baby Record (pages 317-320) promotes comprehensive record keeping, is easy to follow and user-friendly, and highlights the manoeuvres that have the best evidence of efficacy (9). The only modifications that I would suggest are continuing head circumference measurements until age two years and including a head circumference chart. I would also modify the "Sleep position & SIDS" section in the *Infant Health Maintenance: Selected Guidelines* that accompanies the record to recommend on the back only, and not on the side, as the best choice of sleeping position (10).

Most paediatricians involved in primary care develop mental checklists for the birth to five-year age group because these children account for the majority of their non-

acute office visits. The Rourke Baby Record is particularly useful for family physicians because they are responsible for a wide spectrum of age groups and health issues.

Overall, this well baby record is an excellent guide for physicians caring for children in the first five years of life and provides a well designed instrument for teaching medical students and residents. It should sensitize all physicians to the pursuit of excellence in well baby care based in the identification of risk factors and the scientific evidence that supports interventions.

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