



Informant/Relationship

Intake

Vitals

Weight lbs oz

Length in

Head Circumference cm

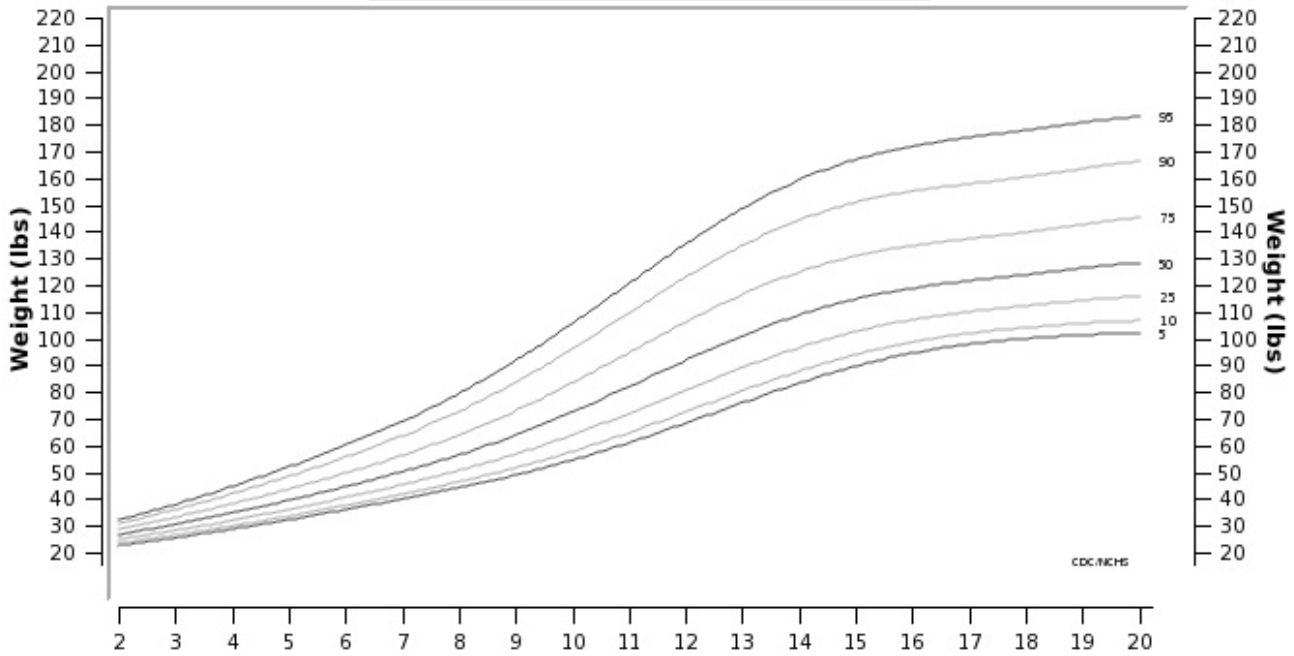
Temperature °F Method

BMI kg/m²

More

Growth Charts

◀ 2 to 20 Years: Weight-For-Age (CDC) ▶





Age (years)

▶ **Tabular Data (Weight-For-Age 2 to 20 Years: Girls Source: CDC)**

Weight/Height from previous Well Check

Medications

History

Select All

- Previsit Questionnaire reviewed

- Parents working/Daycare plans

- Carseat: rear-facing

- Toxic exposure: second hand smoke

- add item

Concerns and Questions.

Nutrition



Select All

- Breast
notes
- Milk (oz per day)
notes
- Using cup/weaning off bottle.
notes
- Table foods/finger foods/avoid choking foods
notes
- Vitamins/Fluoride
notes
- add item
notes

Review of Systems

Select All

- Activity (playtime, no TV)
notes
- Behavior
notes
- Sleep
notes
- Speech development
notes



add item ▼
notes ▼

Oral Health in Primary Care

Select All

Establishing a dental home
notes ▼

First Dental Checkup
notes ▼

Avoidance of bottle in bed
notes ▼

Brushing teeth twice a day, using non fluoridated toothpaste
notes ▼

Good family habits of brushing, flossing, not sharing utensils or cups
notes ▼

Maternal Oral Health, Maternal hx of tooth decay in past 12 month
notes ▼

add item ▼
notes ▼

Transition of Care (ARRA)

Patient transitioned to my care from another clinical setting

Medication Reconciliation performed

Birth History (Medical Summary) No Saved Notes

Edit



Problem List (Medical Summary)

Display: All Statuses

Edit

Status	Problem	Problem Note	Onset	Resolved

Medical History (Medical Summary) No Saved Notes

Edit

Social/Family History

Select All

See Initial History Questionnaire (Indicate "No Interval Changes" or note changes.)

notes

Child Care (Yes/ No and Type)

notes

add item

notes

Development (If not reviewed in Previsit Questionnaire)

Make All: Yes No N/A

Yes No N/A

Social-Emotional (Tries to do what you do, Helps in the house, Listens to a story)

notes

Communicative (Says 2 to 3 words, Brings toys over to show you)

notes

Cognitive (Scribbles, Follows simple commands)



notes

- Physical Development (Bends down without falling, Walks well, Puts block in a cup, Drinks from a cup with very little spilling)

notes

- add item

notes

Anticipatory Guidance Discussed

Make All:

Y N N/A

- Communication and Social Development (Give limited choices, Stranger anxiety, Read and talk with child)

notes

- Sleep Routines and Issues (Consistent routines, Night waking)

notes

- Temper Tantrums and Discipline (Distraction, Praise, Consistency)

notes

- Healthy Teeth (First dentist visit, Healthy oral habits, No bottle)

notes

- Safety (Car safety seat, Home safety, Poisons, Falls, Burns, Smoke detectors, Carbon monoxide detectors)

notes

- add item

notes

Physical Exam



Make All:

A N N/E

Unclothed/Gown

notes

General Appearance

notes

Head

notes

Eyes

notes

Ears

notes

Nose

notes

Oropharynx

notes

Neck

notes

A N N/E

Chest

notes

Lungs

notes

Cardiovascular



notes

Abdomen

notes

Genitourinary

notes

Neurological

notes

Musculskeletal

notes

Skin

notes

A N N/E

add item

notes

Lab

Medical Procedure

Medical Test

Supply

Radiology

Screening

Immunizations

Immunization History



	There are no immunizations recorded for this patient
Ordered	

Immunization Orders

Order	Refuse	Varicella
Order	Refuse	<input type="text" value="select an immunization"/>

Immunization Consent

Select All

Counseled on risks, benefits, CDC VIS, contraindications and obtained consent.

Assessment

Diagnoses

Plan

Select All

Routine Handouts Given to Caregivers

E-Prescribed Medications.



Plan Notes

Followup

18 month well visit

Nurse Task

Referral

Reminders (Medical Summary) No Saved Notes