



Intake

Informant/Relationship

Informant questions or concerns

Concerns

Vitals

Weight lbs oz +

Height in +

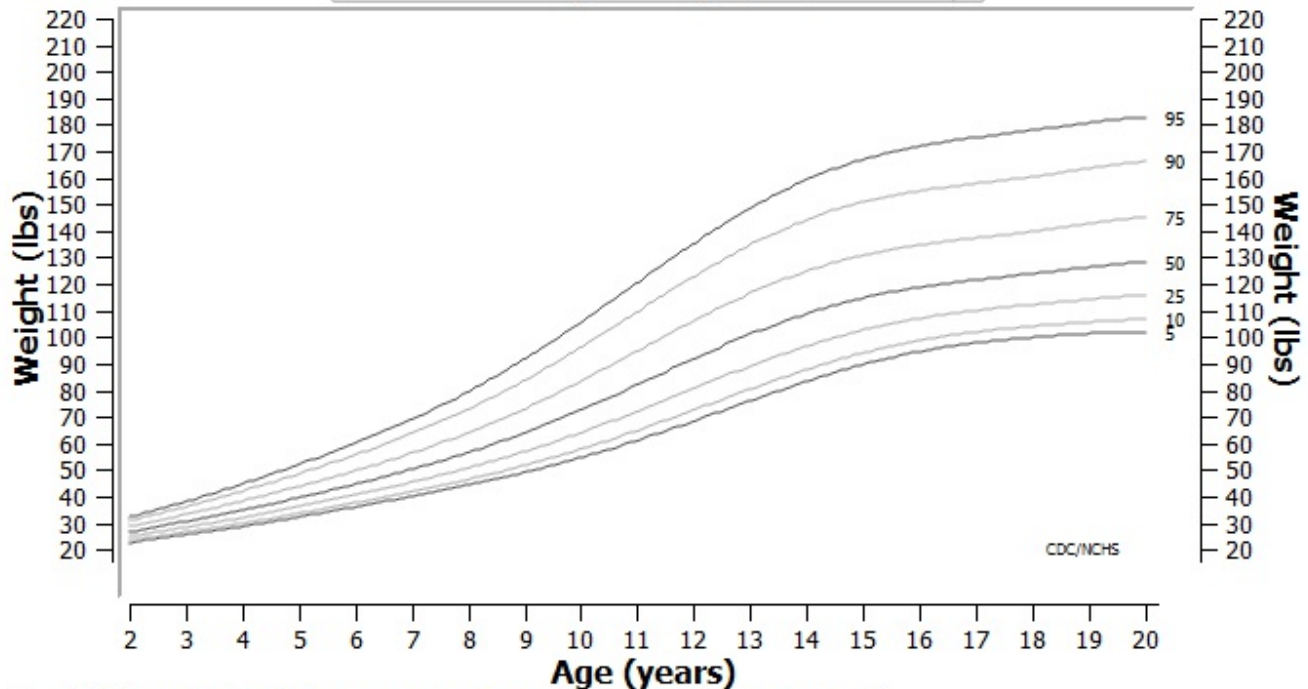
BMI kg/m²

Blood Pressure / systolic/diastolic Location Position +

[More](#)

Growth Charts

◀ ▶



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



Screening

Hearing Screen

Vision Screen

Medications

Current Medications

notes

Transition of Care (ARRA)

- Patient transitioned to my care from another clinical setting
- Medication Reconciliation performed

Medication History (Chart-wide) Updated N/A

Display:

| Active | Drug | Formula | Details |
|--------|------|---------|---------|
| | | | |

History/Review

- Wears glasses or has seen eye doctor within the year.
notes
- Child has a dental home
notes
- What school/grade level:
notes
- Physical Activity (Play time 60 min/d Yes or No, Screen time <2h/d Yes or No)
notes
- add item



notes

Nutrition

Select All

- Balanced diet (wide variety, fruits/veggies, limit junk food)

notes

- Milk (oz/type)

notes

- Juice or other sugary drinks? (the less the better)

notes

- add item

notes

Problem List (Chart-wide)

Display: All Statuses Edit

| Status | Problem | Problem Note | Onset | Resolved |
|--------|---------|--------------|-------|----------|
| | | | | |

Past, Social, Family History

Medical History (Chart-wide) No Saved Notes Edit

Family Medical History (Chart-wide) Edit



| Condition | Relationship | Note |
|-----------|--------------|------|
| | | |

Social History (Chart-wide) No Saved Notes

Edit

Review of Systems

Select All

General

notes

Sleep: NL

notes

Agree with history/ROS as above and confirmed by provider.

notes

Total of 9 or more systems reviewed and noted below or negative.

notes

add item

notes

Physical Exam

Make All: **ABN** **NL** **N/E**

ABN NL N/E

General Appearance

notes

Head

notes

Eyes

notes

Ears

notes

Nose



notes

Mouth and Throat

notes

Teeth (caries, white spots, staining)

notes

Neck

notes

ABN NL N/E

Chest/Lungs

notes

Heart

notes

Abdomen

notes

Genitalia

notes

Back

notes

Extremities

notes

Skin

notes

Neurologic

notes

ABN NL N/E

add item

notes

Lab

Order

Cholesterol



Medical Test

Medical Procedure

Radiology

Immunizations

Immunization History

There are no immunizations recorded for this patient

Ordered

Immunization Orders

Varicella

Diagnoses

Well child visit

Add to Problem List Onset: Problem Note:

Anticipatory Guidance

Make All:



Y N N/A

- TIPP sheet given covering age-appropriate nutrition, sleep, safety, behavior, and development.

notes

- add item

notes

Plan

Select All

- Annual well exam (or periodic well exam under age 2) / follow-up as noted

notes

- Immunizations discussed and vaccine information presented.

notes

- add item

notes

Referral

Followup

Navigational Anchors in 6-7-8 Yr Well - (client v. I) Bright Futures

1. Intake
2. Growth Charts
3. Screening
4. History
5. Nutrition
6. Past, Social, Family Hx
7. Review of Systems
8. Physical Exam
9. Lab
10. Immunizations
11. Diagnoses
12. Anticipatory Guidance
13. Plan