



Intake

Informant/Relationship

_____ ▾

Concerns

_____ ▾

Vitals

Weight lbs oz

Length in

Head Circumference cm

BMI

More

Vital Notes

_____ ▾

Growth Charts

Growth Charts are not available when patient's sex is unknown.

Screening

▾

Transition of Care (ARRA)

Patient transitioned to my care from another clinical setting

Medication Reconciliation performed

Past, Social, Family History

Medical History (Chart-wide) No Saved Notes

Social History (Chart-wide) No Saved Notes

Family Medical History (Chart-wide)

Condition	Relationship	Note

Problem List (Chart-wide) Display: ▾

Status	Problem	Problem Note	Onset	Resolved

**Allergies (Chart-wide)**

Display: All Statuses ▾

Edit

Status	Allergy	Reaction	Onset	Resolved

PCC eRx Allergies (Chart-wide) Last Modified N/A

Display: All Statuses ▾

Status	Allergen	Reaction	Severity	Sensitivity Type	Onset	Resolved

Medication History (Chart-wide) Last Modified N/A

Display: All Statuses ▾

Status	Medication	Instructions	Start	Stop

► Confidential Notes (Chart-wide) No Saved Notes

Edit

ROSMake All: **Abn** **NL** **NA**

Abn NL NA

- Elimination
 ▾
- Toilet training
 ▾
- Sleep
 ▾
- Behavior/Temperament
 ▾
- Physical activity (play time 60 min/d, screen time < 2 hours/day)
 ▾
- add item
 ▾

Nutrition**Select All** Balanced diet ▾



add item

Development (if not reviewed Previsit Questionnaire)

Select All

Social-Emotional (Plays pretend, Plays with other children (eg, tag))

Communicative (Other people can understand what your child is saying half of the time, When talking, puts 3 or 4 words together)

Cognitive (Points to 6 body parts, Knows correct animal sounds (eg, cat meows, dog barks))

Physical Development (Jumps up and down in place, Puts on clothes with help, Washes and dries hands without help, Brushes teeth with help)

add item

Anticipatory Guidance

Make All: Y N N/A

Y N N/A

Discussed and/or handouts given

Family Routines (Family meals, Family activities)

Language Promotion and Communication (Limit TV, Daily reading, Listen and repeat to child)

Social Development (Supervised play with other children, Setting limits, Emerging Independence)

Preschool Considerations (Group activities/preschool if possible, Toilet training)

Safety (Car safety seat, Water, Appropriate supervision, Sun exposure, Fire safety, Smoke detectors, Outdoor safety, Playground, Dogs)



add item

notes

Physical Exam

Make All: ABN NL N/E

ABN NL N/E

General Appearance

Head

Eyes

Ears

Nose

Oropharynx

Neck

Chest

ABN NL N/E

Lungs

Cardiovascular

Abdomen

Genitalia



- Neurological**
notes
- Musculoskeletal**
notes
- Skin**
notes
- Back**
notes

ABN NL N/E

- Extremities**
notes
- add item**
notes

Lab

select a lab

Medical Test

select a medical test

Medical Procedure

select a medical procedure

Immunizations

Vaccines

	There are no immunizations recorded for this patient
Ordered	

Diseases

	There are no vaccine-preventable diseases for this patient
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Forecasting Results Updated: NA

Show Informational Warnings(0)

Immunization forecasting results and warnings provided by IMMUCAST™

▼ **Vaccines For Children**

Insurance and Race as of 06/27/18

Eligibility Status: select an eligibility status

Immunization Orders

select an immunization



Immunization Consent

Select All

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

notes

- Vaccine refusal form signed

notes

- add item

notes

Radiology

Order

select a radiology

Diagnoses

- Well child visit

Refine the diagnosis of Well child visit

Include on Patient Reports

notes

Add to Problem List

Onset: mm/dd/yy

Problem Note: problem note

- select diagnosis

notes

Plan

Select All

- Immunizations (See Vaccine Administration Record)

notes

- Medication as e-prescribed

notes

- Laboratory/Screening Results

notes

- add item

notes

Plan Notes



[Empty text input field]

Followup

Order 3 year well visit

Order select a followup [dropdown arrow]

Referral

Order select a referral [dropdown arrow]

Care Plan (Chart-wide)

Display: [dropdown arrow]

No Interventions

Prescriptions

Visit Documents

Navigational Anchors in 2.5 Yr Well

1. Intake
2. Growth Charts
3. ROS
4. Nutrition
5. Development Surveillance (if not reviewed Previsit Questionnaire)
6. Anticipatory Guidance Discussed
7. Physical Exam
8. Lab
9. Medical Procedures
10. Immunizations
11. Immunization Consent
12. Radiology
13. Diagnoses
14. Plan
15. Follow Up
16. Prescriptions
17. Visit Documents