

Intake

Informant/Relationship				
				•
Concerns				
				*
Vitals				
Length		in		+
Weight	lbs	oz		+
Head Circumference		cm		+
BMI				
More				
Vital Notes				
Growth Charts Growth Charts are not av Transition of Care (ARF Patient transitioned to Medication Reconciliati	RA) my care from on performed			•
Past, Social, Family His Medical History (Chart		Saved Note	es	Edit
Social History (Chart-	wi de) No Sa	ved Notes	3	Edit

Co	ondition	Relationship		Note	
Problem List ((Chart-wide)		Display: /	All Statuses	Edit
Status	Problem		Problem Note	Onset	Resolved

Allergies (Chart-wide)

4	M	ΛJ	6
- T		~ ~	

Status	Allergy		Reaction		Onset	Resolve
PCC eRx	Allergies (Chart-wide) Last	t Modified N/A		Display:	All Status	es
Status	Allergen	Reaction	Severity	Sensitivity Type	e Onset	Resolve
Vedicati Status	on History (Chart-wide) Las Medication	st Modified N/A	Instru		All Status St	es art Ste
		÷				
Confi	dential Notes (Chart-wide)	No Saved Notes				E
000	Elimination					
0 0 0	Sleep					
	notes					
0 0 0	Behavior					
000	Behavior					
	notes					
	notes					
	notes					
	notes Tummy time notes					
000	notes Tummy time notes add item notes					
0 0 0	notes Tummy time notes add item notes					
OOO Nutritior Select A	notes Tummy time notes add item notes					
Utrition	notes Tummy time notes add item notes I I I -feedings per day					
OOO Nutritior Select A	notes Tummy time notes add item notes I I I -feedings per day					
Vutrition Select A Breast	notes Tummy time notes add item notes finites feedings per day la-oz per day					

рсс	06/27	/2018	2:15PM
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notes

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notes	5	-
add it	tem	•
notes	5	
Developi	ment	
Make All	II: Yes No N/A	
'es No N		
00	 Physical Development (Pushes chest up to elbows, Good head control to roll and reach for objects) 	, Symmetry in movements, Begins
	notes	
00	 Cognitive (Responds to affection, Indicates pleasure and displeasure) 	
	notes	
000	 Communicative (Spontaneous expressive babbling) 	
000		
	O Communicative (Spontaneous expressive babbling)	•
	O Communicative (Spontaneous expressive babbling)	wn on own)
000	 Communicative (Spontaneous expressive babbling) notes Social-Emotional (Social smile, Elicits social interactions, Can calm domination) 	wn on own)
000	 Communicative (Spontaneous expressive babbling) notes Social-Emotional (Social smile, Elicits social interactions, Can calm downotes 	wn on own)
000	 Communicative (Spontaneous expressive babbling) notes Social-Emotional (Social smile, Elicits social interactions, Can calm dor notes add item 	wn on own)
000	 Communicative (Spontaneous expressive babbling) notes Social-Emotional (Social smile, Elicits social interactions, Can calm dor notes add item 	wn on own)

0 (Discussed	and/or	handouts	given
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notes

○○ ○ Family Functioning

20		20	-	-
17	ъ	Τí		92
13		10	5	0

notes

Infant Development (Social development, Communication skills, Physical (tummy time), Daily routines, Sleep)

notes

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000	Oral Health (Don't share utensils/pacifier, Avoid bottle in bed)	
	notes	·
000	Safety (Car safety, Burns (Hot liquids, Water heaters), Falls, Wa	alkers, Choking, Drowning, Lead poisoning)
	notes	•
000	add item	×
	notes	

N/E Make All: ABN NL ABN NL N/E 🔘 🔘 🔘 General Appearance * notes ○ ○ ○ Head notes • ○ ○ ○ Eyes notes • 0 0 0 Ears • notes ○ ○ ○ Nose notes * O Oropharynx 0 notes • ○ ○ ○ Neck notes • ○ ○ ○ Chest notes ٠ ABN NL N/E ○ ○ ○ Lungs notes Ŧ ○ ○ ○ Cardiovascular • notes ○ ○ ○ Abdomen



Diseases	There are no vaccine-preventable disea	ases for this patient
Ordered		
0.1	There are no immunizations recorded	for this patient
Vaccine	S	Print
mmuniza	tions	
Order	select a screening	
Screening		
Order	select a medical procedure	
Andian D	Procedure	
Order	select a medical test	
Medical T	est	
Order	select a lab	
.ab		
	notes	
0 0 0		
ABN NL N	/E add item	
~ ~ ~	notes	
000	Back	
	notes	
0 0 0	Extremities/Hips	
0 0 1	Skin notes	
000	S S	
000	Neurological	
~ ~ ′	notes	
0 0 0	Genitourinary	

▼ Vaccines For Children



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Insurance and Race as of 06/27/18

Eligibility Status: select an eligibility status

Immunization Orders

Order	Refuse	Rotavirus - RotaTeq	
Order	Refuse	DTaP/Hib/IPV	
Order	Refuse	Prevnar 13	
Order	Refuse	select an immunization	•

Immunization Consent

S	elect All	
	Counseled on risks, benefits, CDC VIS, contraindications and obtained consent.	
	notes	-
	Vaccine refusal form signed	
	notes	•
	add item	-
	notes	•
Ra	adiology	
	Order select a radiology	-
Dia	agnoses	
	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

S	elect All	
	Immunizations (See Vaccine Administration Record)	
	notes	•

Medication as e-prescribed

notes	·
Laboratory/Screening Results	
notes	•
add item	▼
notes	×

Plan Notes

Followup		
Order	6 month well visit	
Order	select a followup	-

Referral

Order	select a referral						*
	(Chart-wide)	Print	Display:	All Statuses	•	Edi	t
No Interve	entions						

Prescriptions

Visit Documents	sit Documen	ts	s
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Navigational Anchors in 4 Mo Well
1. Intake
2. Growth Charts
3. Past, Social, Family History
4. ROS
5. Nutrition
6. Development (If not reviewed in Previsit Questionnaire)
7. Anticipatory Guidance Discussed
8. Physical Exam
9. Lab
10. Medical Procedures
11. Immunizations
12. Immunization Consent
13. Radiology
14. Diagnoses
1.5. Plan
16. Prescriptions
17. Visit Documents