Intake

Informant/Relationship

Vitals		
Weight	lbs	oz
Height		in
Blood Pressure	s /	d
	Unspecified Loca	tion 👻
	Sitting	•
Pulse		bpm
BMI		
O More		

Vital Notes

v

Growth Charts

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

Family Medical History (Chart-wide) Condition Relationship					Note	
Problem Lis	t (Chart-wide)		D	isplay: All Stat	uses	Edit
Status	Problem		Problem Note		Onset	Resolved
						_
Allergies (Cl	nart-wide)		D	isplay: All Stat	uses ·	Edit
Allergies (Cl Status	n art-wide) Allergy		D Reaction	isplay: All Stat	uses - Onset	Edit
	MUSHIN ICHNERICE	Modified N/A	123			Resolved

Edit

Confidential Notes (Chart-wide) No Saved Notes	Edit
Medical History (Chart-wide) No Saved Notes	Edit
Chief Complaint	•
Interim History	
Medications	
Current Medications	
notes	•

vieucation his	tory (Chart-wide) Last Modified N/A	Display. A	I Statuses	
Status	Medication	Instructions	Start	Stop

ADHD Past Medical/Family History

es No N	N/A	
0 0	O Birth History:	
	notes	
0 0	O Developmental History:	
	notes	
0 0	O Concerns about drug use?	
	notes	
	O Does the patient see or has ever seen a cardiologist?	
	notes	
00	O Patient history of fainting, chest pain, palpitations?	
	notes	
0 0	Patient history of chest pain or intolerance to exercise?	
	notes	

			notes	
)	0	0	Patient with high blood pressure or heart murmur?	
			notes	
	220	12121012		
S	No	N/A	Family history of academic problems or ADHD or other developmental issues?	
	~	~	notes	1
E.	0	0	Family history of SIDS, sudden death, or heart attack before the age of 50?	
	\sim	\sim	notes	
			indes .	
Ŕ.	0	0	Family history of arrhythmia, cardiomyopathy or heart defects?	
			notes	
ŝ	0	0	add item	
	\sim	~	dddrien	
			notes	
ch	امما	/Ho		
ch	ool	/Ho	notes me/Psych History	
	ool, ect			
el	ect	All		
el S	ect	All ool (g	me/Psych History	
el S	ect Scho	All ool (g	me/Psych History	
el S	ect Scho	All pol (g es pol a	me/Psych History grade, school, concerns)	
el S	ect Scho note Scho	All ool (g es ool ac	me/Psych History rade, school, concerns) ccommodations or resources currently	
el S S F	ect Scho note Scho note	All pol (g pol a pol a s tions	me/Psych History grade, school, concerns)	
iel S S	ect Scho note Scho	All pol (g pol a pol a s tions	me/Psych History rade, school, concerns) ccommodations or resources currently	
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el S I R R	ect Scho Note Scho Note	All ool (g es ool ad es tions	me/Psych History rade, school, concerns) ccommodations or resources currently hip with peers/social function	
el s r R r	ect Scho Note Scho Note Relat	All pool (g es pool ac es es tions es	me/Psych History rade, school, concerns) ccommodations or resources currently hip with peers/social function	
	ect Scho Note Scho Note Relat	All pool (g pool ac pool (g pool ac ac ac ac ac ac ac ac ac ac ac ac ac	me/Psych History rade, school, concerns) ccommodations or resources currently hip with peers/social function hip with parents/siblings)
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	ect Scho Note Scho Note Relat Note	All pool (g es pool ac es tions es es es ent r es item	me/Psych History rade, school, concerns) ccommodations or resources currently hip with peers/social function hip with parents/siblings esources used (Psychologist, CSW, Psychiatrist, Therapist, Tutor, Educational Specialists, Groups)

ADHD History

Select All

Current medication used:

notes

Prior medication used:

•

notes	3	
Diagno	osing provider and date:	
notes		
Diagno	ostic tool and date:	
notes		
add it	em	
notes	tertexu	
Abn N		
Make Al		
0 (Change in appetite	
	notes	
0 0	⊃ Mood	
000	O Mood notes	
	notes	
000	notes D Behavior/Social	
) (Dehavior/Social	
	notes Behavior/Social notes Tics	
0	notes Behavior/Social notes Tics notes	
	notes Dehavior/Social notes Tics notes Sleep disturbances	

Review of System - Notes

ADHD Physical Exam	
Make All: NI Abn N/E	
NI Abn N/E	
○ ○ ○ General appearance	77
notes	

0	0	0	Ears: Left	
			notes	*
0	0	0	Ears: Right	
			notes	•
0	0	0	Oropharynx	
			notes	¥
0	0	0	Cardiovascular	
			notes	•
0	0	0	Lungs	
			notes	*
0	0	0	Abdomen:	
			notes	•
0	0	0	Skin	

	1.2		1.4	-	-
	n	0	Т	ρ	S .
- 1	11	U	U.	е	5

NI Abn N/E	add item	•
	notes	•

ADHD Interventions Discussed Today

Se	ect All
	onsistency of medication administration
	otes
	onsistency of routine and schedule
	otes
	egular, quiet place for study
	otes
	ommunication with school re daily expectations
10	24-1-x

* notes Communication with school re overall progress notes • Child study team involvement

notes

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1	504 or IEP initiation/alteration
	notes
S	Sleep hygiene
	notes
1	ncrease nutritious, high calorie foods
	notes
0	Continue with therapist
	notes
F	Follow with developmental pediatrician
	notes
F	Follow with psychiatrist
	notes
C	Resources given - AAP/PNP handout, CHADD
r	
è	notes
	notes add item
	add item notes
	add item notes HD Goals Discussed Today lect All Continued academic progress and success notes Continued development of appropriate social skills
))))))))))))	add item notes HD Goals Discussed Today lect All Continued academic progress and success notes
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	add item notes HD Goals Discussed Today lect All Continued academic progress and success notes Continued development of appropriate social skills notes Folerance of medication without side effect notes
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	777					
Dia	agnoses					
	Attention deficit hyperactivity	y disorder, combined ty	ype			
					✓ Include on Patient Rep	orts
	notes		1000- KENER (1. 1800) (19			
	Add to Problem List	Onset: mm/dd/yy	Problem Note:	problem note		
	Attention deficit hyperactivity	y disorder, predominan	tly inattentive ty	pe		
	Refine the diagnosis of Atte	ntion deficit hyperacti	vity disorder, pre	dominantly inat	tentive type	Ŧ
					✓ Include on Patient Rep	orts
	notes	14				-
	Add to Problem List	Onset: mm/dd/yy	Problem Note:	problem note		
-	Attention deficit hyperactivity	v disorder, predominan	tly hyperactive in	nnulsive tyne in	remission	
	Attention deficit hyperactivity	y disorder, predominan	uy nyperactive in		Include on Patient Rep	orts
	notes					
	Add to Problem List	Onset: mm/dd/yy	Problem Note:	problem note		-
				(<u></u>		
	select diagnosis					-
	notes					*
As	sessment and Plan Notes					
Pla	an					
-						-
	n and Callan un Instanatia					
	an and Follow-up Instructio	JIIS				
	elect All		а 2			
	1999 - 199 - 199 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1	OHD medication discus	sed			
	Risks and benefits of ADD/AD	brib medication discus				
	Risks and benefits of ADD/AD					•
		e side effects: appetite	e suppression, sl	leep problems, e	elevation in hr/bp, rebound	



Medication changes:	17
notes	
Follow up in 3 months	
notes	
Vanderbilt scales to be completed	
Vanderbilt scales to be completed	
notes	
notes	
notes Discussed adding calorie supplements to sustain weight gain.	
notes Discussed adding calorie supplements to sustain weight gain. notes	
notes Discussed adding calorie supplements to sustain weight gain. notes Other recommended interventions:	

	> 15 minutes	total	(OV Regular/99213)	1
-	e io minuteo	to tui	ov negular/ >>210	Ì

notes

> 25 minutes total (OV Detailed 99214)

notes

> 40 minutes total (OV Complex 99215)

notes

Other

notes	*
add item	•
notes	•

Screening

Order	Vanderbilt - Parent Assessments	
Order	Vanderbilt - Teacher Assessments	
Order	select a screening	•

Lab

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	select a lab	
/ledical Pr	ocedure	
Order	select a medical procedure	
orms		
Generate	School Excuse - Appointment	
Generate	School Nurse Meds Admin	
select a foi	rm	
Referral		
Order	select a referral	
ollowup		
Order	select a followup	
mmunizat	ions	
Vaccines	The second se	Print
Ordered	There are no immunizations recorded for this patient	
D .		
Diseases		
Diseases	There are no vaccine-preventable diseases for this patient	
	There are no vaccine-preventable diseases for this patient g Results Updated: NA	0) Refresh
	g Results Updated: NA 🔽 Show Informational Warnings(· ·
Forecastin Vaccine	g Results Updated: NA Show Informational Warnings(Immunization forecasting results and warnings provided by I es For Children	· ·
Forecastin Vaccine Insurar	g Results Updated: NA Show Informational Warnings(Immunization forecasting results and warnings provided by I es For Children ince and Race as of 06/27/18	MMUCAST [™]
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notes

Post Visit Addendum

Prescriptions

Visit Documents

Navigational Anchors in ADHD

- 1. Next Visit Info
- 2. Intake
- 3. Vitals
- 4. Allergies
- 5. PCC eRx Allergies
- 6. Social History
- 7. Confidential Notes
- 8. Medical History
- 9. Chief Complaint
- 10. Interim History
- 11. Medications
- 12. Past Medical/Family History
- 13. School/Home/Psych
- 14. ADHD History
- 15. Review of Systems ADD
- 16. Physical Exam
- 17. PNP ADHD Anticipatory Guidance
- 18. Diagnoses
- 19. Plan
- 20. Screening
- 21. Time of Visit
- 22. Prescriptions
- 23. Visit Documents