

Intake

Informant/Relationship

Siblings (Chart-wide)

None

Chief Complaint

Vitals

Length in +

Height in +

Weight lbs oz +

BMI

Blood Pressure s / d +

Unspecified Location ▾

Unspecified Position ▾

Pulse bpm +

Respiratory Rate bpm +

Temperature °F +

Unspecified Method ▾

More

Comments

Growth Charts

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

Past, Family, Social 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

Problem List (Chart-wide)

Display: All Statuses

Edit

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

Transition of Care (ARRA)

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

HPI

EPPA ROS - Constitutional

Make All: Yes No N/A

Yes No N/A

- Fever

notes
- Fatigue/Lethargy

notes
- Irritability

notes
- Not Sleeping Well

notes
- add item

notes

EPPA ROS - Eyes

Make All: **Yes** **No** **N/A**

Yes No N/A

- Change in visual acuity**
 notes
- Blind Spots**
 notes
- Doubled or Blurred Vision**
 notes
- Photophobia**
 notes
- Spots/Specks/Flashing Lights**
 notes
- add item**
 notes

EPPA ROS - ENT

Make All: **Yes** **No** **N/A**

Yes No N/A

- Neck Stiffness**
 notes
- Vertigo**
 notes
- Tinnitus**
 notes
- Changes in Hearing**
 notes
- Hoarseness**
 notes
- Pressure or Fullness of Ears/Sinuses**
 notes

Sensitivity to Noise

notes

add item

notes

EPPA ROS- Cardiovascular

Make All:

Yes No N/A

Chest Pain

notes

add item

notes

EPPA ROS - Respiratory

Make All:

Yes No N/A

Pallor/Cyanosis

notes

add item

notes

EPPA ROS - GI

Make All:

Yes No N/A

Nausea

notes

Vomiting

notes

Abdominal Pain

notes

add item

notes

EPPA ROS - NeurologicMake All:

Yes No N/A

- Change in Gait/ Coordination**
- Change in Language or Academic Performance**
- Changes in Mood, Attention, or Speech**
- Changes in Orientation, Memory, Insight, or Judgement**
- Dizziness**
- Fainting**
- Fine Motor Difficulty**
- Headache Increase in Severity**

Yes No N/A

- Headache Worse in the Morning**
- Memory Changes**
- Morning Vomiting**
- Numbness or Loss of Sensation**
- Seizures**
- Tingling or " Pins and Needles"**

Tremors or other Involuntary Movements

notes ▼

Weakness

notes ▼

Yes No N/A

add item ▼

notes ▼

EPPA ROS - Musculoskeletal

Make All:

Yes No N/A

Back Pain/ Neck Pain

notes ▼

Swelling in Joints/Limbs

notes ▼

Muscle Pain (Myalgia)

notes ▼

Limitation of Motion or Activity

notes ▼

add item

notes ▼

EPPA ROS - Psychiatric

Make All:

Yes No N/A

Emotional Liability

notes ▼

Feeling worried or anxious

notes ▼

Decreased interest in Social Activities and Hobbies that use to be Pleasurable

notes ▼

add item

notes ▼

EPPA ROS - Skin

Make All:

Yes No N/A

- Rashes or Dry skin
- add item

EPPA ROS - Endocrine

Make All:

Yes No N/A

- Cold or Heat Intolerance
- Change in Weight
- add item

EPPA Pertinent Past Medical Hx

Make All:

Yes No N/A

- Migraines/frequent headaches
- Seizures
- Concussion
- Corrective lenses
- ADHD
- Anxiety



Depression

Learning disability/developmental delay

Yes No N/A

Motor/verbal tics

Sleep disorder

add item

EPPA Pertinent Family Hx

Make All:

Yes No N/A

Seizures/epilepsy

Migraine

ADHD

Anxiety

Depression

add item

EPPA Pertinent Social Hx

Make All:

Yes No N/A

Family stressors

- Pets in home**
- Recent travel**
- add item**

Physical Exam

Make All:

ABN NL N/E

- General Appearance**
- Head**
- Eyes**
- Ears**
- Nose**
- Oropharynx**
- Neck**
- Lungs**

ABN NL N/E

- Chest**
- Cardiovascular**
- Abdomen**

- Musculoskeletal
notes
- Neurologic
notes
- Skin
notes
- Extremities
notes
- add item
notes

Immunizations

Vaccines

Print

There are no immunizations recorded for this patient
Ordered

Diseases

There are no vaccine-preventable diseases for this patient

Forecasting Results Updated: NA

Show Informational Warnings(0)

Refresh

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

- FLU-IIV4 0.25ml
- FLU-IIV4pf 0.25ml
- FLU-IIV4 0.5ml
- select an immunization

Immunization Consent

Select All

Counseled on risks, benefits, and contraindications for all vaccine components. CDC VIS reviewed. All questions answered.

notes

add item

notes



Policies

Display: All Statuses ▾ Edit

Lab

Order select a lab ▾

Medical Procedure

Order select a medical procedure ▾

Screening

Order Vision Screen

Order select a screening ▾

Diagnoses

Bell's palsy
Refine the diagnosis of Bell's palsy ▾
 Include on Patient Reports
notes ▾
 Add to Problem List Onset: mm/dd/yy Problem Note: problem note

Febrile convulsion
Refine the diagnosis of Febrile convulsion ▾
 Include on Patient Reports
notes ▾
 Add to Problem List Onset: mm/dd/yy Problem Note: problem note

Headache
Refine the diagnosis of Headache ▾
 Include on Patient Reports
notes ▾
 Add to Problem List Onset: mm/dd/yy Problem Note: problem note

Head and neck injury
Refine the diagnosis of Head and neck injury ▾
 Include on Patient Reports
notes ▾
 Add to Problem List Onset: mm/dd/yy Problem Note: problem note

Seizure disorder
Refine the diagnosis of Seizure disorder ▾
 Include on Patient Reports
notes ▾

Add to Problem List Onset: Problem Note:

Tic disorder

Include on Patient Reports

Add to Problem List Onset: Problem Note:

select diagnosis

Plan and Follow-up Instructions- EPPA

Select All

Pain Management (include medication recommended)

Tylenol/Ibuprofen PRN

add item

Plan Notes

Greater than 50% of today's visit was spent in counseling

Select All

add item

Followup

Order Return to office (list reason and time frame)

Order

Follow-up

Select All

Call if no improvement over 48h or sooner if symptoms persist or worsen

add item
notes**Referral** select a referral**Care Plan (Chart-wide)**Display:

No Interventions

Prescriptions**Visit Documents****Navigational Anchors in Neuro sick EPPA**

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