

**\*Intake****Visit Start Time**

**\*Informant/Relationship**

**Transition of Care (ARRA)**

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

**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

**Past, Social, Family History****Birth History (Chart-wide)** No Saved Notes

Edit

**Medical History (Chart-wide)** No Saved Notes

Edit

**Social History (Chart-wide)** No Saved Notes

Edit

**Family Medical History (Chart-wide)**

Edit

Condition	Relationship	Note

**Problem List (Chart-wide)**

Display: All Statuses

Edit

Status	Problem	Problem Note	Onset	Resolved

**Smoking Status (ARRA)**



**\*Immunization Review**

**Chief Complaint**

**Provider start time**

**HPI**

**\*HPI**

Select All

Consult requested by

notes

Procedure to be performed

notes

Location of procedure

notes

Date of procedure

notes

Previous surgery/anesthesia and/or problems

notes

Current concerns/symptoms

notes

add item

notes

**\*HPI**

**\*Review of Systems by system**

Make All: **Abn** **NL** **N/A**

Abn NL N/A

Constitutional

notes



**Eyes**  
 ▼

**Ears/Nose/Mouth/Throat**  
 ▼

**Respiratory**  
 ▼

**Cardiovascular**  
 ▼

**Gastrointestinal**  
 ▼

**Genitourinary**  
 ▼

**Musculoskeletal**  
 ▼

Abn NL N/A

**Integument**  
 ▼

**Neurological**  
 ▼

**Allergic/Immunologic**  
 ▼

**Hematologic/Lymphatic**  
 ▼

**Endocrine**  
 ▼

**Psychiatric**  
 ▼

**add item**  
 ▼

**Vitals**

Height  in



Length  in

Weight  lbs  oz

BMI

Temperature  °F   
 Temporal

Pulse  bpm

Blood Pressure  s /  d   
 Unspecified Location   
 Sitting

Respiratory Rate  bpm

More

**\*Physical Exam**

Make All:

ABN NL N/E

- Constitutional
- Eyes
- Ears/Nose/Throat
- Neck
- Respiratory
- Cardiovascular
- Breasts
- Gastrointestinal

ABN NL N/E

- Genitourinary (female)



notes

Genitourinary (male)

notes

Lymphatic

notes

Musculoskeletal

notes

Back/Spine

notes

Integument

notes

Neurologic

notes

Psychiatric

notes

ABN NL N/E

add item

notes

**Diagnoses**

Dental caries

Refine the diagnosis of Dental caries

Include on Patient Reports

notes

Add to Problem List

Onset: mm/dd/yy

Problem Note: problem note

select diagnosis

notes

**\*Plan**

Select All

Dental pre-operative form completed today

notes

add item



notes

**\*Plan Notes**

[Empty text box for Plan Notes]

**Visit Finish Time**

[Empty dropdown menu for Visit Finish Time]

**\*Follow-up**

Select All

Next well child exam

notes

As needed

notes

add item

notes

**Lab/Radiology/Referral**

**Lab**

Order select a lab

**Radiology**

Order select a radiology

**Referral**

Order select a referral

**Medical Procedure**

Order select a medical procedure

**Care Plan (Chart-wide)**

No Interventions

Print

Display:

All Statuses

Edit

**Prescriptions**

**Visit Documents**



## **Navigational Anchors in Sick (Dental Pre-op)**

1. Intake
2. Allergies
3. Medication History
4. Past, Social, Family History
5. Medical History
6. Problem List
7. Immunization Review
8. Chief Complaint
9. HPI
10. Review of Systems
11. Vitals
12. Physical Exam
13. Diagnoses
14. Plan
15. Lab/Radiology/Referral
16. Prescriptions
17. Visit Documents