

Intake**Next Visit (Chart-wide)** No Saved Notes[Edit](#)**Informant/Relationship****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](#)**Vital Notes****Chief Complaint****Past, Social, Family History****Past 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

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

[Mark as Reviewed](#)

fineprintLbl

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

Display: All Statuses ▾

Status	Medication	Instructions	Start	Stop

[Mark as Reviewed](#)

fineprintLbl

► Confidential Notes (Chart-wide) No Saved Notes[Edit](#)**HPI****D2CP ROS Neurological**Make All: [Yes](#) [No](#) [N/A](#)

Yes No N/A

☐ ☐ ☐ Headaches; nature; frequency; duration if answered yes

notes

▾☐ ☐ ☐ Migraines; h/o; aura?

notes

▾☐ ☐ ☐ Light sensitivity

notes

▾☐ ☐ ☐ Sound sensitivity

notes

▾☐ ☐ ☐ Dizziness; lightheadedness

notes

▾☐ ☐ ☐ Jitteriness

notes

▾

☐ ☐ ☐ Tremors; jerking movements
notes

☐ ☐ ☐ Eyes moving rapidly up/down, right/left; nystagmus
notes

Yes No N/A

☐ ☐ ☐ Staring spells
notes

☐ ☐ ☐ Altered mental status/acute changes in behavior
notes

☐ ☐ ☐ Changes in academic performance
notes

☐ ☐ ☐ Changes in memory, cognition
notes

☐ ☐ ☐ Changes in personality, mood or behavior
notes

☐ ☐ ☐ Syncope; fainting
notes

☐ ☐ ☐ Head injury; trauma
notes

☐ ☐ ☐ Concussion: acute; multiple; post-concussion syndrome
notes

Yes No N/A

☐ ☐ ☐ Head-banging behaviors
notes

☐ ☐ ☐ Eyes bulging/proptosis
notes

☐ ☐ ☐ H/O brain tumor; brain aneurysm; AVM malformation
notes

☐ ☐ ☐ Hydrocephalus; VP shunt?
notes

☐ ☐ ☐ CNS infections; meningitis; other brain infections
notes

☐ ☐ ☐

Review of Systems by system

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

Abn NL N/A

☐ ☐ ☐

Physical Exam

Make All: **ABN** **NL** **N/E**

ABN NL N/E

☐ ☐ ☐ **Neurologic**

☐ ☐ ☐ **General Appearance**

☐ ☐ ☐ **Head**

☐ ☐ ☐ **Eyes**

☐ ☐ ☐ **Ears**

☐ ☐ ☐ **Nose**

☐ ☐ ☐ **Oropharynx**

☐ ☐ ☐ **Neck**

ABN NL N/E

☐ ☐ ☐ **Lungs**

☐ ☐ ☐ **Chest**

☐ ☐ ☐ Cardiovascular☐ ☐ ☐ Abdomen☐ ☐ ☐ Genitourinary☐ ☐ ☐ Musculoskeletal☐ ☐ ☐ Skin☐ ☐ ☐ Extremities

ABN NL N/E

☐ ☐ ☐

Immunizations

Vaccines

Vaccine Record

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 10/21/20

Eligibility Status:

Immunization Orders

Select Vaccine Lots

Order

Refuse

Immunization Consent

Select All

- ☐ I personally provided parent education about immunizations and the appropriate CDC VIS was provided for each vaccine. Parent was counseled about the risks and benefits of each antigen administered. Verbal consent was obtained for each of the vaccines given.

notes



- ☐ add item



notes

**Lab****Generate Requisition****Order** Rapid Strep (in office)**Order** Rapid Flu A&B (in office)**Order** Mono Spot (in office)**Order** select a lab**Medical Procedure****Order** Medication - Ibuprofen**Order** Medication - Acetaminophen**Order** select a medical procedure**Medical Test****Order** select a medical test**Injection****Order** select an injection**Screening****Order** select a screening**Radiology****Generate Requisition****Order** select a radiology**Diagnoses**

- ☐ Headache

Refine the diagnosis of Headache

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset: mm/dd/yy

Problem Note: problem note

☐ Intermittent headache☒ Include on Patient Reports☐ Add to Problem ListOnset: Problem Note: ☐ Migraine aura without headache☒ Include on Patient Reports☐ Add to Problem ListOnset: Problem Note: ☐ Orthostatic headache☒ Include on Patient Reports☐ Add to Problem ListOnset: Problem Note: ☐ Persistent headache due to and following injury of head☒ Include on Patient Reports☐ Add to Problem ListOnset: Problem Note: ☐ Postural headache☒ Include on Patient Reports☐ Add to Problem ListOnset: Problem Note: ☐ Sinus headache☒ Include on Patient Reports☐ Add to Problem ListOnset: Problem Note: ☐

D2CP Plan Headache List

Select All☐ Discussed common causes of headaches☐ Discussed importance of rest and sleep

notes	▼
<input type="checkbox"/> Discussed importance of hydration and nutrition	
notes	▼
<input type="checkbox"/> Discussed importance of rest for eyes, avoid excessive screen time	
notes	▼
<input type="checkbox"/> Discussed signs and symptoms of dehydration	
notes	▼
<input type="checkbox"/> Discussed sinus headaches and advised regular saline rinsing of nasal passages for relief and prevention	
notes	▼
<input type="checkbox"/> Discussed tension headaches and ways to alleviate symptoms	
notes	▼
<input type="checkbox"/> Gentle stretches of neck and shoulder muscles demonstrated	
notes	▼
<input type="checkbox"/> May use ibuprofen with food as directed for relief of pain every 6 hrs as needed for a few days	
notes	▼
<input type="checkbox"/> Use of an ergonomic head and neck pillow may be helpful	
notes	▼
<input type="checkbox"/> Methods of stress relief and deep breathing techniques discussed	
notes	▼
<input type="checkbox"/> TMJ and associated ear pain and headaches discussed	
notes	▼
<input type="checkbox"/> Discussed aura presentation and methods to help prevent onset of migraines	
notes	▼
<input type="checkbox"/> Discussed Migraines and ways to detect and alleviate	
notes	▼
<input type="checkbox"/> Discussed use of sumatriptan as treatment for acute migraine/ headaches	
notes	▼
<input type="checkbox"/> Discussed vision disturbance affects on brain and cause of headaches	
notes	▼
<input type="checkbox"/> Signs and symptoms of neurological changes discussed	

- ☐ Vomiting, vision disturbances and early morning or middle of the night headaches are signs to address immediately

- ☐ Discussed referral to Neurologist for further evaluation of headaches/migraines

- ☐ Discussed keeping a headache diary for the next 2-4 weeks with a symptoms, severity, duration, triggers and remedies that help

- ☐ add item

Plan Notes

Forms

Generate School Excuse - Sick

Generate School Nurse Meds Admin

Generate School PE Excuse

Followup

Order Follow up if symptoms are not improving

Order Follow up in 1 month

Order Return to office (list reason and time frame)

Order

Referral

Order Neurology

Order

Care Plan (Chart-wide)

No Interventions

Print

Display:

Edit

Time of Visit

Select All☐ Time spent in visit:

notes

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

notes

☐ add item

notes

**Visit Documents****Navigational Anchors in D2CP Headache**

1. Intake
2. Past, Social, Family History
3. Medical History
4. D2CP ROS Neurological
5. Physical Exam
6. Immunizations
7. Lab
8. Medical Procedures
9. Injection Orders
10. Screening
11. Radiology
12. Diagnoses
13. D2CP Plan Headache List
14. Forms
15. Followup Orders
16. Referral
17. Time of Visit
18. Prescriptions
19. Visit Documents