



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](#)

fingerprint.bl

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

Display: All Statuses ▾

Status	Medication	Instructions	Start	Stop

[Mark as Reviewed](#)

fingerprint.bl

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

Yes No N/A

<input type="radio"/> <input type="radio"/> <input type="radio"/>	Fever	<div>notes</div>
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Feeling ill, sick	<div>notes</div>
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Chills	<div>notes</div>
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Dizziness, giddiness	<div>notes</div>
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Changes in appetite	<div>notes</div>
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Changes in sleep	<div>notes</div>

<input type="radio"/> <input type="radio"/> <input type="radio"/>	add item	▼
	notes	▼

D2CP ROS EarsMake All: **Yes** **No** **N/A**

Yes No N/A

<input type="radio"/> <input type="radio"/> <input type="radio"/>	Pain in ears	notes	▼
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Trouble Hearing	notes	▼
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Swelling or redness of ear	notes	▼
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Drainage from ear	notes	▼
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Has PE tubes in ears	notes	▼
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Itching in ears	notes	▼
<input type="radio"/> <input type="radio"/> <input type="radio"/>	add item	▼	
	notes	▼	

D2CP ROS NoseMake All: **Yes** **No** **N/A**

Yes No N/A

<input type="radio"/> <input type="radio"/> <input type="radio"/>	Stuffy nose	notes	▼
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Sneezing	notes	▼
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Runny nose	notes	▼
<input type="radio"/> <input type="radio"/> <input type="radio"/>	Cloudy nasal discharge	notes	▼

☐ ☐ ☐ Clear nasal discharge
notes

☐ ☐ ☐ Loss of smell
notes

☐ ☐ ☐ Snoring when sleeping
notes

☐ ☐ ☐ add item
notes

D2CP ROS MouthMake All:

Yes No N/A

☐ ☐ ☐ Sore throat
notes

☐ ☐ ☐ Trouble swallowing
notes

☐ ☐ ☐ Halitosis/Bad odor from mouth
notes

☐ ☐ ☐ Loss of taste
notes

☐ ☐ ☐ Scratchy throat
notes

☐ ☐ ☐ add item
notes

D2CP ROS NeckMake All:

Yes No N/A

☐ ☐ ☐ Neck Pain
notes

☐ ☐ ☐ Swelling of glands in neck

☐ ☐ ☐ **D2CP ROS Allergy/Immunology**Make All:

Yes No N/A

☐ ☐ ☐ Coughing or Wheezing☐ ☐ ☐ History of Asthma, Allergies, Eczema (triad)☐ ☐ ☐ Indoor allergies: dust, molds☐ ☐ ☐ Outdoor allergies: trees, grass, insects, ragweed☐ ☐ ☐ Runny nose☐ ☐ ☐ Sneezing☐ ☐ ☐ **Physical Exam**Make All:

ABN NL N/E

☐ ☐ ☐ General Appearance☐ ☐ ☐ Head☐ ☐ ☐ Eyes

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Ears	<input type="text" value="notes"/>	<input type="button" value="▼"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Nose	<input type="text" value="notes"/>	<input type="button" value="▼"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Oropharynx	<input type="text" value="notes"/>	<input type="button" value="▼"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Neck	<input type="text" value="notes"/>	<input type="button" value="▼"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Lungs	<input type="text" value="notes"/>	<input type="button" value="▼"/>

ABN NL N/E

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Chest	<input type="text" value="notes"/>	<input type="button" value="▼"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Cardiovascular	<input type="text" value="notes"/>	<input type="button" value="▼"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Abdomen	<input type="text" value="notes"/>	<input type="button" value="▼"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Genitourinary	<input type="text" value="notes"/>	<input type="button" value="▼"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Musculoskeletal	<input type="text" value="notes"/>	<input type="button" value="▼"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Neurologic	<input type="text" value="notes"/>	<input type="button" value="▼"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Skin	<input type="text" value="notes"/>	<input type="button" value="▼"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Extremities	<input type="text" value="notes"/>	<input type="button" value="▼"/>

ABN NL N/E

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text" value="add item"/>	<input type="button" value="▼"/>
			<input type="text" value="notes"/>	<input type="button" value="▼"/>

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: select an eligibility status

Immunization Orders

Select Vaccine Lots

Order

Refuse

select an immunization

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 Spct (in office)

Order

select a lab

Medical Procedure

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

☐ Acute suppurative otitis media of bilateral ears

Refine the diagnosis of Acute suppurative otitis media of bilateral ears

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset: mm/dd/yy

Problem Note: problem note

☐ Acute suppurative otitis media of left ear

Refine the diagnosis of Acute suppurative otitis media of left ear

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset: mm/dd/yy

Problem Note: problem note

☐ Acute non-suppurative otitis media of right ear

Refine the diagnosis of Acute non-suppurative otitis media of right ear

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset: mm/dd/yy

Problem Note: problem note

☐ Acute serous otitis media of bilateral ears

Refine the diagnosis of Acute serous otitis media of bilateral ears

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset: mm/dd/yy

Problem Note: problem note

☐ Acute serous otitis media of left ear

Refine the diagnosis of Acute serous otitis media of left ear

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset: mm/dd/yy

Problem Note: problem note

☐ Acute serous otitis media of right ear



Refine the diagnosis of Acute serous otitis media of right ear

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset:

Problem Note:

☐ Recurrent acute otitis media of bilateral ears

Refine the diagnosis of Recurrent acute otitis media of bilateral ears

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset:

Problem Note:

☐ Recurrent acute otitis media of left ear

Refine the diagnosis of Recurrent acute otitis media of left ear

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset:

Problem Note:

☐ Recurrent acute otitis media of right ear

Refine the diagnosis of Recurrent acute otitis media of right ear

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset:

Problem Note:

☐ Chronic suppurative otitis media of left middle ear

Refine the diagnosis of Chronic suppurative otitis media of left middle ear

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset:

Problem Note:

☐ Chronic suppurative otitis media of right middle ear

Refine the diagnosis of Chronic suppurative otitis media of right middle ear

☒ Include on Patient Reports

notes

☐ Add to Problem List

Onset:

Problem Note:

☐ Acute suppurative otitis media with spontaneous rupture of ear drum

Refine the diagnosis of Acute suppurative otitis media with spontaneous rupture of ear drum

☒ Include on Patient Reports

notes

☐ Add to Problem ListOnset: Problem Note: ☐ Recurrent acute suppurative otitis media of left ear with spontaneous rupture of tympanic membrane☒ Include on Patient Reports☐ Add to Problem ListOnset: Problem Note: ☐ Recurrent acute suppurative otitis media of right ear with spontaneous rupture of tympanic membrane☒ Include on Patient Reports☐ Add to Problem ListOnset: Problem Note: ☐ select diagnosis**D2CP Plan Otitis Media R/L/BL****Select All**☐ Discussed causes and factors which contribute to middle ear infections☐ Demonstrated middle ear, eustachian tube and nasopharynx anatomy and discussed how to help prevent ear infections☐ Explained that a majority of middle ear infections are due to viral or allergen related triggers and antibiotics are not always necessary☐ Explained that a small percentage of ear infections are due to bacterial causes : such as s.pneumoniae, H.flu, moraxella☐ Advised frequent saline rinses of the nasal and sinus passages to encourage a reduction in swelling and congestion☐ Discussed how the ear, nose and throat are connected and nasal congestion needs to be addressed in order to help the middle ear drain☐ Advised to continue antibiotic treatment as prescribed and follow up for re evaluation☐ May use acetaminophen or ibuprofen as needed for pain/fever

- ☐ Discussed how recurrent ear infections can cause issues with hearing and sound transmission

- ☐ Explained how the adenoids and eustachian tube can affect changes in the middle ear

- ☐ Explained how pressure-equalizing (PE) tubes can help with prevention of recurrent middle ear effusions

- ☐ Discussed referral to ENT specialist for further evaluation of frequent middle ear effusions

- ☐ Follow up for any lack of improvement or worsening symptoms

- ☐ 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 Return to office (list reason and time frame)

Order

Referral

Order

Care Plan (Chart-wide)

No Interventions

Print

Display:

Edit

Time of Visit

☐ Time spent in visit:


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


☐ add item



Visit Documents

Navigational Anchors in D2CP Otitis Media R/L/BL

1. Intake
2. Past, Social, Family History
3. Medical History
4. D2CP ROS Constitutional
5. D2CP ROS Ears
6. D2CP ROS Nose
7. D2CP ROS Mouth
8. D2CP ROS Neck
9. D2CP ROS Allergy/Immunology
10. Physical Exam
11. Immunizations
12. Lab
13. Medical Procedures
14. Injection Orders
15. Screening
16. Radiology
17. Diagnoses
18. D2CP Plan Otitis Media R/L/BL
19. Forms
20. Followup Orders
21. Referral
22. Time of Visit
23. Prescriptions
24. Visit Documents