

BF4 - Accompanied By:**Vitals**Weight lbs oz Length in Head Circumference cm  More**BF4 - Vital Notes****BF4 - HISTORY****BF4 - Concerns and Questions:****Select All**☐ None
☐ Details
☐ add item
BF4 - Interval History:**Select All**☐ None
☐ Details
☐ add item
BF4 - Medical History**Select All**☐ Child has special health care needs
☐ add item
BF4 - Areas reviewed and updated as needed

BF4 - Past Medical History (Chart-wide) No Saved Notes[Edit](#)**BF4 - Surgical History (Chart-wide)** No Saved Notes[Edit](#)**Problem List (Chart-wide)**

Display: All Statuses ▾

[Edit](#)

Status	Problem	Problem Note	Onset	Resolved

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

Display: All Statuses ▾

Status	Medication	Instructions	Start	Stop

[Mark as Reviewed](#)

fineprintLbl

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

BF4 - Nutrition[Select All](#)☐ Good appetite

notes

▾☐ Good variety

notes

▾☐ Daily fruits and vegetables

notes

▾☐ Iron source

notes

▾☐ Comments

notes

▾☐ Milk: Source

notes

▾☐ Drinks from: Breast

notes

▾☐ Drinks from: Bottle

notes

▾

☐ Drinks from: Cup☐ Ounces per 24 hours☐ add item**BF4 - Dental Home****Select All**☐ Dental Home (No)☐ Dental Home (Yes)☐ Brushing twice daily (Yes)☐ Brushing twice daily (No)☐ Fluoride: in water source☐ Fluoride: Oral supplement☐ Fluoride: Other☐ add item**BF4 - Elimination****Select All**☐ Regular soft stools☐ Details☐ add item**BF4 - Sleep**

Select All☐ No concerns

notes

☐ Details

notes

☐ add item

notes

BF4 - Behavior**Select All**☐ No concerns

notes

☐ Details

notes

☐ add item

notes

BF4 - Physical Activity**Select All**☐ Playtime (60 min/d) (Yes)

notes

☐ Playtime (60 min/d) (No)

notes

☐ Screen time: (None)

notes

☐ Screen time: h/d:

notes

☐ Source

notes

☐ add item

notes

BF4 - Development (Checked box= Normal development)**Select All**☐ See Previsit Questionnaire

notes

☐ Caregiver concerns about development: None

notes

☐ Caregiver concerns about development: Yes

notes

☐ add item

notes

BF4 - Development

Make All: **Yes** **No** **Unk**

Yes No Unk

☐ ☐ ☐ SOCIAL LANGUAGE AND SELF-HELP

notes

☐ ☐ ☐ Imitates scribbling

notes

☐ ☐ ☐ Drinks from cup with little spilling

notes

☐ ☐ ☐ Points to ask for something or to get help

notes

☐ ☐ ☐ VERBAL LANGUAGE

notes

☐ ☐ ☐ Uses 3 words other than names

notes

☐ ☐ ☐ Speaks in sounds that seem like an unknown language

notes

☐ ☐ ☐ Follows directions that do not include a gesture

notes

Yes No Unk

☐ ☐ ☐ Looks around when parent says, "Where is...?"

notes

☐ ☐ ☐ GROSS MOTOR

notes

☐ ☐ ☐ Squats to pick up objects

notes

☐ ☐ ☐ Crawls up a few steps

notes

☐ ☐ ☐ **Begins to run**

☐ ☐ ☐ **FINE MOTOR**

☐ ☐ ☐ **Makes mark with crayon**

☐ ☐ ☐ **Drops object into and takes object out of container**

Yes No Unk
☐ ☐ ☐

BF4 - Social and Family History

Select All

☐ **Areas reviewed and updated as needed (See Initial History Questionnaire.)**

☐ **Social History**

☐ **Family History**

☐ **Changes since last visit**

☐ **No interval change**

☐ **Smoking household (No)**

☐ **Smoking household (Yes)**

☐ **Firearms in home (No)**

☐ **Firearms in home (Yes)**

☐ **Observation of parent-child interaction**

☐ **Parents working outside home**

☐ One parent☐ Both parents☐ Child care (No)☐ Child care (Yes)☐ Child care (Type)☐ add item**BF4 - Review of Systems (Focus area)****Select All**☐ Eyes☐ Head, Ears, Nose and Throat☐ Respiratory☐ Gastrointestinal☐ Genitourinary☐ Skin☐ add item**BF4 - Review of Systems****Select All**☐ Constitutional☐ Cardiovascular

notes

☐ Musculoskeletal

notes

☐ Neurological

notes

☐ Other

notes

☐ add item

notes

BF4 - Physical Examination (Focus area)

Make All: **NL** **ABN** **NE**

NL ABN NE

☐ ☐ ☐ General

notes

☐ ☐ ☐ Normal interval growth in height, weight, and head circumference. Normal weight-for-length for age.

notes

☐ ☐ ☐ Head

notes

☐ ☐ ☐ Eyes: Fixes and follows. Extraocular eye movements intact. No strabismus. Red reflex present bilaterally. No opacification.

notes

☐ ☐ ☐ Mouth: Healthy-appearing teeth without caries, plaque, discoloration.

notes

☐ ☐ ☐ Abdomen: no palpable masses.

notes

☐ ☐ ☐ Neurological: Moves all extremities equally. Normal hand grasp and strength. Age-appropriate gait.

notes

☐ ☐ ☐ Skin: No lesions (atypical nevi, cafe-au-lait spots, or birthmarks) or bruising.

notes

NL ABN NE

☐ ☐ ☐ add item

notes

BF4 - Physical Examination

Make All: **NL** **ABN** **NE**

NL ABN NE

☐ ☐ ☐ Ears, nose, and throat

☐ ☐ ☐ Neck

☐ ☐ ☐ Heart

☐ ☐ ☐ Respiratory

☐ ☐ ☐ Genitourinary

☐ ☐ ☐ Normal female external genitalia

☐ ☐ ☐ Normal male external genitalia

☐ ☐ ☐ Musculoskeletal

NL ABN NE

☐ ☐ ☐ Other comments

☐ ☐ ☐ add item

Diagnoses
☐ select diagnosis

BF4 - Assessment**Select All**
☐ Well child

☐ Normal interval growth (See growth chart.)

☐ Normal weight-for-length percentile for age

☐ Age-appropriate development

☐ **Lab**[Generate Requisition](#)[Order](#)**Screening**[Order](#)**Medical Test**[Order](#)**Immunizations****Vaccines**[Print](#)[Ordered](#)**Diseases****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 01/16/21

Eligibility Status: **Immunization Orders**[Select Vaccine Lots](#)[Order](#)[Refuse](#)**BF4 - Anticipatory Guidance**Make All: [Yes](#) [No](#) [N/A](#)

Yes No N/A

☐ ☐ ☐ Yes= Discussed and/or handout given☐ ☐ ☐ COMMUNICATION AND SOCIAL DEVELOPMENT☐ ☐ ☐ Individuation☐ ☐ ☐ Separation

☐ ☐ ☐ Finding support

notes

☐ ☐ ☐ Attention to how child communicates wants and interests

notes

☐ ☐ ☐ TEMPERAMENT, DEVELOPMENT, BEHAVIOR, AND DISCIPLINE

notes

☐ ☐ ☐ Conflict predictors and distraction

notes

Yes No N/A

☐ ☐ ☐ Discipline and behavior management

notes

☐ ☐ ☐ SLEEP ROUTINES AND ISSUES

notes

☐ ☐ ☐ Regular bedtime routine

notes

☐ ☐ ☐ Night walking

notes

☐ ☐ ☐ No bottle in bed

notes

☐ ☐ ☐ HEALTHY TEETH

notes

☐ ☐ ☐ Brushing teeth

notes

☐ ☐ ☐ reducing caries

notes

Yes No N/A

☐ ☐ ☐ SAFETY

notes

☐ ☐ ☐ Car safety seats and parental use of seat belts

notes

☐ ☐ ☐ Safe home environment: poisoning, falls, and fire safety

notes

☐ ☐ ☐ add item

notes

BF4 - Plan**BF4 - Immunizations****Select All**☐ Vaccine Administration Record reviewed

notes

☐ Administered today

notes

☐ Up-to-date for age

notes

☐ add item

notes

BF4 - Universal ScreeningMake All: **Neg** **Pos** **NE**

Neg Pos NE

☐ ☐ ☐ Oral health

notes

☐ ☐ ☐ Fluoride varnish applied (Yes)

notes

☐ ☐ ☐ Fluoride varnish applied (No)

notes

☐ ☐ ☐ Oral fluoride supplementation (Yes)

notes

☐ ☐ ☐ Oral fluoride supplementation (No)

notes

☐ ☐ ☐ Oral fluoride supplementation (NA)

notes

☐ ☐ ☐ add item

notes

BF4 - Selective Screening (based on risk/previsit questionnaire)**Select All**☐ Anemia

notes

☐ BP

notes

☐ Hearing ▼☐ Vision ▼☐ Comments/results ▼☐ add item ▼**Followup** Routine follow-up at 18 months Next visit Referral to select a followup ▼**Visit Documents**

Navigational Anchors in BF4 - 15 Month Visit

1. Accompanied By:
2. Vitals
3. Vital Notes
4. BF4 - HISTORY
5. BF4 - Concerns and Questions:
6. BF4 - Interval History:
7. BF4 - Medical History
8. BF4 - Areas reviewed and updated as needed
9. BF4 - Past Medical History
10. BF4 - Surgical History
11. Problem List
12. Medication History
13. Allergies
14. PCC eRx Allergies
15. BF4 - Nutrition
16. BF4 - Dental Home
17. BF4 - Elimination
18. BF4 - Sleep
19. BF4 - Behavior
20. BF4 - Physical Activity
21. BF4 - Development (Checked box= Normal development)
22. BF4 - Development
23. BF4 - Social and Family History
24. BF4 - Review of Systems (Focus area)
25. BF4 - Review of Systems
26. BF4 - Physical Examination (Focus area)
27. BF4 - Physical Examination
28. Diagnoses
29. BF4 - Assessment
30. Lab Orders
31. Screening Orders
32. Medical Test Orders
33. Immunizations
34. BF4 - Anticipatory Guidance
35. BF4 - Plan
36. BF4 - Immunizations
37. BF4 - Universal Screening
38. BF4 - Selective Screening (based on risk/previsit questionnaire)
39. Followup Orders
40. Visit Documents
41. Prescriptions