



### Intake

Next Visit (Chart-wide) No Saved Notes

Edit

### Informant/Relationship

### Concerns

### Vitals

Length  in

Weight  lbs  oz

Head Circumference  cm

BMI

More

### Vital Notes

### Growth Charts

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

### Screening

MCHAT

Nutrition Counseling

### Transition of Care (ARRA)

Patient transitioned to my care from another clinical setting

Medication Reconciliation performed

### ROS

Make All:

Abn NL NA

Sleep

Behavior



notes

Activity

notes

add item

notes

### Past, Social, Family History

**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

### Nutrition

Select All

Off bottle

notes



- Cup  
notes
- Vitamins  
notes
- add item  
notes

### Development

Select All

- Autism specific screen: normal M Chat  
notes
- add item  
notes

### Development Surveillance

Make All:

Yes No N/A

- Social-Emotional (Helps in the house, Laughs in response to others)  
notes
- Communicative (Speaks 6 words)  
notes
- Cognitive (Knows name of favorite book, Points to one body part)  
notes
- Physical Development (Stacks 2 small blocks, Runs, Walks up steps, Uses spoon and cup without spilling most of the time)  
notes
- add item  
notes

### Anticipatory Guidance

Make All:

Y N N/A

- Discussed and/or handouts given



notes

- Family Support: family time; time for self and other children; reinforce limits; prepare for new sibling (if necessary); smoke free environment

notes

- Child Development and Behavior: anticipate anxiety, praise, consistent discipline, daily playtime

notes

- Language Promotion/Hearing: read, talk, and sing; simple words; feelings and emotions

notes

- Toilet training discussion

notes

- Safety: car safety seat; falls; burns; smoke detectors; guns; poisons

notes

- add item

notes

### Physical Exam

Make All:  ABN  NL  N/E

ABN NL N/E

- General Appearance

notes

- Head

notes

- Eyes

notes

- Ears

notes

- Nose

notes

- Oropharynx

notes

- Neck

notes



**Chest**

ABN NL N/E

**Lungs**

**Cardiovascular**

**Abdomen**

**Genitalia**

**Musculoskeletal**

**Back**

**Extremities**

**Skin**

ABN NL N/E

**Lab**

Print Labels

Generate Requisition

**Medical Test**

**Medical Procedure**

**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

Forecast results are not intended to replace clinical decision making

**▼ Vaccines For Children**

Insurance and Race as of 12/23/24

Eligibility Status:

**Immunization Orders**

Select Vaccine Lots

Order

Refuse

HepA Peds (Havrix)

Order

Refuse

Pevnar 13

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.

Vaccine refusal form signed

add item

**Radiology**

Generate Requisition

Order

**Diagnoses**

Well child

Include on Patient Reports

Add to Problem List

Onset:

Problem Note:



select diagnosis

notes

**Plan**

Select All

add item

notes

**Plan Notes**

**Followup**

Order 2 year well visit

Order select a followup

**Referral**

Order select a referral

**Care Plan (Chart-wide)**

Print Display: All Statuses Edit

No Interventions

**Visit Documents**

**Navigational Anchors in 18 Mo Well**

- 1. Intake
- 2. Growth Charts
- 3. Screening
- 4. ROS
- 5. Nutrition
- 6. Development
- 7. Anticipatory Guidance Discussed
- 8. Physical Exam
- 9. Lab
- 10. Medical Procedures
- 11. Immunizations
- 12. Immunization Consent
- 13. Radiology
- 14. Diagnoses
- 15. Plan
- 16. Prescriptions
- 17. Visit Documents