



### Intake

Next Visit (Chart-wide) No Saved Notes

Edit

### Screening

Order select a screening

### Informant/Relationship

### Vitals

Temperature °F Tympanic

Weight lbs oz

Length in

Height in

### BMI

Blood Pressure s / d Unspecified Location Sitting

Pulse bpm

O<sub>2</sub> Saturation %

Respiratory Rate bpm

More

### Vital Notes

### Growth Charts

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

### Chief Complaint

### 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

**Current Medications**

**Past, Social, Family History**

**Problem List (Chart-wide)**

Display: All Statuses ▾

Edit

Status	Problem	Problem Note	Onset	Resolved

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

Edit

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

Edit

Condition	Relationship	Note

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

Edit

**► Confidential Notes (Chart-wide)** No Saved Notes

Edit

**HPI**

**Special Needs**

Make All: Yes No N/A

Yes No N/A

Speech language therapy

notes

Occupational therapy

notes

Physical therapy



notes

AAC device communication

notes

ABA (Applied Behavioral Analysis) Therapy

notes

ARFID (Avoidant Restrictive Food Intake Disorder)

notes

Aquatic therapy

notes

Equine (Horseback) Therapy

notes

Yes No N/A

Neurofeedback

notes

Interactive Metronome

notes

Social skills groups

notes

Learning difficulties

notes

Toilet training hurdles (encopresis and enuresis)

notes

ADHD comorbidity

notes

Aggressive behaviors

notes

Anxious behaviors

notes

Yes No N/A

Behavioral health struggles

notes

Chronic insomnia



- notes
- Emotional impulsivity  
notes
- Obsessive compulsive disorder  
notes
- Self- injurious behaviors  
notes
- Psychiatrist  
notes
- Medications  
notes
- add item  
notes

## Nutrition

### Select All

- Balanced diet (wide variety, fruits/veggies, limit junk food)  
notes
- Fruits  
notes
- Vegetables  
notes
- Protein Sources  
notes
- Grains: whole grains like oats, barley, quinoa. buckwheat  
notes
- Iron rich foods (meats, cereals, beans)  
notes
- Calcium/Vitamin D  
notes
- Finger foods, self feeding

 Decreased Appetite/Picky Eating Vitamins or supplements (ie MVI with folate) add item

## Physical activity

Types of movement:

Physical activity that you enjoy:

Physical activities which your family does together:

Ways stretching included in day:

What prevents physical activity from being more regular?

## Sleep Patterns

Bedtime:

Routines before bedtime:

Sleep aids (melatonin, epsom salt baths, chamomile tea, weighted blanket):

Snoring?

How long does it take to fall asleep?

How many wakings per night?



notes

What happens when waking in the middle of the night?

notes

Wake up time:

notes

## Development

Make All:  Yes  No  N/A

Yes No N/A

Appropriate Level of Alertness

notes

Cognitive

notes

Communicative

notes

Social-Emotional (Self-care skills, Imaginative Play)

notes

Physical Development

notes

Behavior, family interaction

notes

Explores environment?

notes

Peer interaction

notes

Yes No N/A

Has a caring/supportive family

notes

Interests/hobbies

notes

add item

notes



## Review of Systems by system

Make All:

Abn NL N/A

- Allergic/Immunologic
- Constitutional
- Eyes
- Ears, Nose, Mouth, Throat
- Cardiovascular
- Respiratory
- Gastrointestinal
- Genitourinary

Abn NL N/A

- Lymphatic
- Integumentary
- Endocrine
- Musculoskeletal
- Neurologic
- Psychiatric



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

Lungs

notes

ABN NL N/E

Chest

notes

Cardiovascular

notes

Abdomen

notes

Genitourinary

notes





**Musculoskeletal**

**Skin**

**Neurologic**

**Psychiatric**

**ABN NL N/E**

### Immunizations

#### Vaccines

Print

	There are no immunizations recorded for this patient
Ordered	

#### Diseases

	There are no vaccine-preventable diseases for this patient
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**Forecasting Results** Updated: NA  Show Informational Warnings(0)

Forecast results are not intended to replace clinical decision making

#### ▼ Vaccines For Children

Insurance and Race as of 03/03/25

Eligibility Status:

#### Immunization Orders

#### Immunization Consent

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

**Lab**

Print Labels    Generate Requisition

- Rapid Strep (in office)
- Rapid Flu A&B (in office)
- Mono Spot (in office)
- select a lab

**Medical Procedure**

select a medical procedure

**Medical Test**

select a medical test

**Injection**

select an injection

**Radiology**

Generate Requisition

select a radiology

**Diagnoses**

- Mixed developmental disorder  Include on Patient Reports

notes

Add to Problem List    Onset:     Problem Note:

- Mixed receptive-expressive language disorder  Include on Patient Reports

notes

Add to Problem List    Onset:     Problem Note:

- Motor skill disorder  Include on Patient Reports

notes

Add to Problem List    Onset:     Problem Note:

- Developmental delay

Refine the diagnosis of Developmental delay



Include on Patient Reports

notes

Add to Problem List    Onset: mm/dd/yy    Problem Note: problem note

Delayed milestone

Refine the diagnosis of Delayed milestone

Include on Patient Reports

notes

Add to Problem List    Onset: mm/dd/yy    Problem Note: problem note

select diagnosis

notes

### Plan Notes

### Forms

select a form

### Followup

**Order** Follow up if symptoms are not improving

**Order** Return to office (list reason and time frame)

**Order** select a followup

### Referral

**Order** select a referral

### Care Plan (Chart-wide)

Print    Display: All Statuses    Edit

No Interventions

### Care Coordination and Care Plan Management

### Visit Documents



## **Navigational Anchors in D2C Developmental Issues**

1. Intake
2. Screening
3. Growth Charts
4. Past, Social, Family History
5. Medical History
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8. Physical Exam
9. Immunizations
10. Lab
11. Medical Procedures
12. Injection Orders
13. Radiology
14. Diagnoses
15. Prescriptions
16. Forms
17. Followup Orders
18. Referral
19. Visit Documents