

**BF4 - Accompanied By:****Vitals**Weight  lbs  oz Height  in Length  in 

BMI

 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

☐ Calcium: Source/Amount

notes

☐ Comments

notes

☐ add item

notes

**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 ▼☐ Toilet-trained (Yes) ▼☐ Toilet-trained (No) ▼☐ Toilet-trained (In process) ▼☐ Details ▼☐ add item ▼**BF4 - Sleep****Select All**

☐ No concerns☐ Details☐ add item**BF4 - Behavior****Select All**☐ No concerns☐ Details☐ add item**BF4 - Physical Activity****Select All**☐ Playtime (60 min/d) (Yes)☐ Playtime (60 min/d) (No)☐ Screen time: (None)☐ Screen time: h/d:☐ Source☐ Quality monitored (Yes)☐ Quality monitored (No)☐ add item**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

☐ ☐ ☐ Urinates in a potty or toilet

notes

☐ ☐ ☐ Plays pretend with toys or dolls

notes

☐ ☐ ☐ Pokes food with fork

notes

☐ ☐ ☐ VERBAL LANGUAGE

notes

☐ ☐ ☐ Uses pronouns correctly

notes

☐ ☐ ☐ Explains the reasons for things, such as needing a sweater when it's cold

notes

☐ ☐ ☐ Names at least one color

notes

Yes No Unk

☐ ☐ ☐ GROSS MOTOR

notes

☐ ☐ ☐ Walks up steps, using one foot, then the other

notes

☐ ☐ ☐ Runs well without falling

☐ ☐ ☐ FINE MOTOR☐ ☐ ☐ Grasps crayon with thumb and fingers instead of fist☐ ☐ ☐ Catches a large ball☐ ☐ ☐ Copies a vertical line☐ ☐ ☐ add item**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

notes

☐ One parent

notes

☐ Both parents

notes

☐ Child care (No)

notes

☐ Child care (Yes)

notes

☐ Child care (Type)

notes

☐ add item

notes

#### BF4 - Review of Systems (Focus area)

Select All

☐ Eyes

notes

☐ Head, Ears, Nose and Throat

notes

☐ Respiratory

notes

☐ Gastrointestinal

notes

☐ Genitourinary

notes

☐ Skin

notes

☐ add item

notes

#### BF4 - Review of Systems

Select All

☐ Constitutional

notes

☐ Cardiovascular☐ Musculoskeletal☐ Neurological☐ Other☐ add item**BF4 - Physical Examination (Focus area)**Make All:   

NL ABN NE

☐ ☐ ☐ General☐ ☐ ☐ Normal interval growth in height and weight. Normal weight-for-length or BMI for age.☐ ☐ ☐ Eyes: Fixes and follows. Extraocular eye movements intact. Red reflex present bilaterally. No opacification.☐ ☐ ☐ Mouth: Healthy-appearing teeth without caries, plaque, discoloration, or breakage. No gingivitis.☐ ☐ ☐ Abdomen: no palpable masses.☐ ☐ ☐ Neurological: Good coordination. Social. Vocalizes and communicates clearly.☐ ☐ ☐ Skin: No lesions (atypical nevi, cafe-au-lait spots, or birthmarks) or bruising.☐ ☐ ☐ add item**BF4 - Physical Examination**Make All:   

NL ABN NE

☐ ☐ ☐ Head



- ☐ ☐ ☐ Ears, nose, and throat

- ☐ ☐ ☐ Neck

- ☐ ☐ ☐ Heart

- ☐ ☐ ☐ Respiratory

- ☐ ☐ ☐ Genitourinary

- ☐ ☐ ☐ Normal female external genitalia

- ☐ ☐ ☐ Normal male external genitalia

NL ABN NE

- ☐ ☐ ☐ Musculoskeletal

- ☐ ☐ ☐ Other comments

- ☐ ☐ ☐ add item

### Diagnoses

- ☐ select diagnosis

### BF4 - Assessment

Select All

- ☐ Well child

- ☐ Normal interval growth (See growth chart.)

- ☐ Normal weight-for-length or BMI percentile for age

☐ Age-appropriate development☐ add item**Lab**[Generate Requisition](#)**Screening****Medical Test****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](#)

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](#)**BF4 - Anticipatory Guidance**Make All:   

Yes No N/A

☐ ☐ ☐ Yes= Discussed and/or handout given☐ ☐ ☐ FAMILY ROUTINES☐ ☐ ☐ Day and evening routines☐ ☐ ☐ Enjoyable family activities

- ☐ ☐ ☐ Parental activities outside the family

- ☐ ☐ ☐ Consistency in the child's environment

- ☐ ☐ ☐ LANGUAGE PROMOTION AND COMMUNICATION

- ☐ ☐ ☐ Use of simple words and reading together

Yes No N/A

- ☐ ☐ ☐ PROMOTING SOCIAL DEVELOPMENT

- ☐ ☐ ☐ Play with other children

- ☐ ☐ ☐ Giving choices

- ☐ ☐ ☐ Limits on TV and media use

- ☐ ☐ ☐ PRESCHOOL CONSIDERATIONS

- ☐ ☐ ☐ Readiness for early childhood programs and playgroups

- ☐ ☐ ☐ Toilet training

- ☐ ☐ ☐ SAFETY

Yes No N/A

- ☐ ☐ ☐ Car safety seats

- ☐ ☐ ☐ Outdoor safety

- ☐ ☐ ☐ Water safety

- ☐ ☐ ☐ Sun protection

☐ ☐ ☐ Fire and burns

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 Screening

Make All: **Neg** **Pos** **NE**

Neg Pos NE

☐ ☐ ☐ Developmental screening

notes

☐ ☐ ☐ Screening tool used

notes

☐ ☐ ☐ Result: Passed in all areas

notes

☐ ☐ ☐ Result: Failed in the following areas

notes

☐ ☐ ☐ Oral health

notes

☐ ☐ ☐ Fluoride varnish applied (Yes)

notes

☐ ☐ ☐ Fluoride varnish applied (No)

notes

☐ ☐ ☐ Oral fluoride supplementation (Yes)

notes

Neg Pos NE

☐ ☐ ☐ 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

notes

☐ Oral health

notes

☐ Tuberculosis

notes

☐ Comments/results

notes

☐ add item

notes

#### Followup

Order Routine follow-up at 3 years

Order Next visit

Order Referral to

Order select a followup

#### Visit Documents

## **Navigational Anchors in BF4 - 2 1/2 Year 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