



Intake

Next Visit (Chart-wide) No Saved Notes

Edit

Informant/Relationship

Concerns

Vitals

Height in

Weight lbs oz

Blood Pressure s / d

Unspecified Location

Sitting

BMI

More

Vital Notes

Growth Charts

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

Screening

Vision Screen

Hearing Screen

Nutrition Counseling

Recommendation to Exercise

Vision/Hearing notes

Transition of Care (ARRA)

Patient transitioned to my care from another clinical setting

Medication Reconciliation performed



ROS

Make All:

Abn NL NA

- Sleep
- Physical activity (play time 60 min/d, screen time < 2 hours/day)
- School grade
- School (special education)
- Home (parent-child-sibling interaction, cooperation/oppositional behavior)
- add item

Past, Social, Family History

Medical History (Chart-wide) No Saved Notes

Social History (Chart-wide) No Saved Notes

Family Medical History (Chart-wide)

Condition	Relationship	Note

Problem List (Chart-wide)

Display:

Status	Problem	Problem Note	Onset	Resolved

Allergies (Chart-wide)

Display:

Status	Allergy	Reaction	Onset	Resolved

PCC eRx Allergies (Chart-wide) Last Modified N/A

Display:



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

Balanced diet

notes ▾

Multivitamin and/or Vit D supplement discussed

notes ▾

add item

notes ▾

Development

Make All: Yes No N/A

Yes No N/A

Motor (Balances on 1 foot, Hops and skips, Able to tie a knot)

notes ▾

Language (Good articulation/language skills)

notes ▾

Learning (Draws person(6+ body parts), Prints some letters and numbers, Copies squares/triangles, Counts to 10, Names 4 or more colors, Follows simple directions, Listens and attends)

notes ▾

add item

notes ▾

Anticipatory Guidance

Make All: Y N N/A

Y N N/A



- Discussed and/or handouts given
notes
- School Readiness (Establish routines, After-school care/activities, Friends, Bullying, Communicate with teachers)
notes
- Mental Health (Family time, Anger management, Discipline for teaching not punishment, Limit TV)
notes
- Nutrition and Physical Activity (Healthy weight, Well-balanced diet including breakfast, Fruits/vegetables/ whole grains, Adequate calcium, 60 minutes of exercise/day)
notes
- Oral Health (Regular dentist visits, Brushing/flossing, Fluoride)
notes
- Safety (Sexual safety, Pedestrian safety, Safety helmets, Swimming safety, Fire escape plan, Smoke/carbon monoxide detectors, Guns, Sun, Appropriately restrained in all vehicles)
notes
- add item
notes

Physical Exam

Make All:

ABN NL N/E

- General Appearance
notes
- Head
notes
- Eyes
notes
- Ears
notes
- Nose
notes
- Oropharynx
notes



Neck

Chest

ABN NL N/E

Lungs

Cardiovascular

Abdomen

Genitalia

Musculoskeletal

Back

Extremities

Neurologic

ABN NL N/E

Skin

add item

Lab

Hemoglobin (in office)

Urine Dipstick (in office)

Lead Screen (in office)



Order Cholesterol, Total (In Office)

Order select a lab

Medical Test

Order select a medical test

Medical Procedure

Order select a 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: select an eligibility status

Immunization Orders

Select Vaccine Lots

Order **Refuse** DTaP (Infanrix)

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

Vaccine refusal form signed

notes

add item

notes



Radiology

Generate Requisition

Order select a radiology

Diagnoses

Well child visit

Refine the diagnosis of Well child visit

Include on Patient Reports

notes

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

select diagnosis

notes

Plan

Select All

add item

notes

Plan Notes

Forms

select a form

Followup

Order Annual 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 5-6 Yr Well

1. Intake
2. Growth Charts
3. Screening
4. ROS
5. Nutrition
6. Development (If not reviewed in Previsit Questionnaire)
7. Anticipatory Guidance Discussed
8. Physical Exam
9. Lab
10. Medical Procedures
11. Immunizations
12. Immunization Consent
13. Radiology
14. Diagnoses
15. Plan
16. Follow Up
17. Prescriptions
18. Visit Documents