



PROVIDER PRACTICE TOOLS

CHARTING TEMPLATES

Newborn - 12 months

**Use:**

Once one copy is purchased a physician or healthcare provider may use these templates freely in their own clinical practice. One copy must be purchased per provider.

This e-book is intended for use by physicians and care providers only.

Notes:

Many of the fields are “pre-filled” based on common answers. You can delete these if you prefer. “Plan” section is based on commonly discussed topics at these well child visits. It is NOT expected that a provider would discuss every topic.

Note that objective exam includes both male and female genital exam findings. Be sure to delete exam findings that are not pertinent.

Standard disclaimer:

This e-book is not intended for treatment or diagnosis of any condition. This e-book is provided for educational purposes only and does not constitute medical advice. This e-book is not to be a substitute for seeing a physician and in fact the author highly advises physician supervision for the evaluation of any health complaint.

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Newborn

Subjective:

***Newborn well child

[Parent/s] is/are here with [Patient name] for a well child check and to establish care.

CONCERNS:

BIRTH HISTORY:

Location:

Mode of delivery: [Vaginal]

Medications used in labor: None.

Birth story:

Neonatal complications: None.

Apgars:

Birth Length:

Birth Weight:

Birth Head Circumference:

Newborn procedures:

Hepatitis B - Yes

Erythromycin eye ointment - Yes

IM Vitamin K Yes

Hearing screen: Pass.

Newborn metabolic screening: Completed.

PRENATAL HISTORY:

- Negative GBS

- Negative Gestational diabetes

- Negative excessive weight gain

- Negative antepartum depression/mood disorders

- Negative hypertension

Alcohol use: None.

Recreational drug use including marijuana: None.

Smoking (former and current, including cigarettes, cigars, marijuana, vaping): None in past, none current.

Mother's medication use in pregnancy: No prescription medications. Prenatal vitamins, etc.

FAMILY HISTORY:

MEDICATIONS:

None.

SUPPLEMENTS:

None.

MOTHER'S MEDICATIONS:

None.

MOTHER'S SUPPLEMENTS:

None.

BREASTFEEDING:

No concerns, good latch, no clicking or gulping sounds, minimal nipple pain, no mastitis, no thrush.

Feeding frequency: On demand, every 1-3 hours.

DIAPERS: Passed meconium within 24 hours.

CORD: Good, no concerns, no redness.

SLEEP:

Sleep position:

Sleep information:

SOCIAL:

Lives with:

Siblings: None.

Pets: None.

Other caregivers: None.

PARENTS:

Mental health:

Denies seeing or hearing things that are not there (hallucinations), paranoia, suicidal thoughts or actions, disorientation, bizarre behavior, thoughts of harming self or child.

Parent health/Safety:

Feels safe at home.

No concerns with providing enough food, diapers, clothing, child care.

Mom diet:

not vegan, well balanced, taking prenatal vitamin. No medications that interfere with breastfeeding.

RELIGIOUS/SPIRITUAL:

Religious or spiritual factors that may affect healthcare, or provider's ability to provide healthcare?

Objective:

GENERAL: well nourished term neonate. Coloration: pink, well perfused.

HEAD: symmetric, no plagiocephaly. Fontanelles soft and flat. Sutures normal. Face: symmetric. No palsies noted..

EYES: symmetric, normal spacing. Sclerae white/clear. No conjunctival hemorrhage. No discharge. Red reflex present and symmetric b/l.

EARS: normal position, size. No No branchial cleft cysts, sinuses, preauricular skin tags or pits.

NOSE: nares patent.

MOUTH: symmetric, no micrognathia. No ankyloglossia. Buccal mucosa normal. Palate intact.

NECK: normal, no masses, no torticollis. Clavicles intact.

CHEST: symmetric, no abnormalities..

LUNGS: no rapid breathing, nasal flaring, use of accessory muscles. Lung fields CTA.

CARDIAC: pulse oximetry > 95% R hand, R foot. Femoral pulses symmetric. RRR, no murmurs.

ABDOMEN: no masses. No hepatosplenomegaly. Umbilical cord stump normal, no sign of infection.

GENITALIA: Female: no labial adhesion, vaginal opening patent. Male: uncircumcised penis, urethral meatus appropriately positioned. Testes down.

MUSCULOSKELETAL: normal tone, no head lag.

NEURO: Moro reflex present, plantar grasp reflex present, palmar grasp reflex present.

Assessment:

Z00.110 HEALTH EXAMINATION FOR NEWBORN UNDER 8 DAYS OLD

Plan:

DISCUSSED (Yes/No)

DIET:

Nothing but breastmilk until 4 months (Formula if breastfeeding doesn't work out).
Formula/breastmilk is primary source of calories until age 1. Yes.

No honey, corn syrup, water, cow's milk or homemade formula. No honey or sugar pacifiers. Yes.

Pacifier when breastfeeding well established (usually 3 weeks), bottle intro same time.
Mom pump to alleviate pressure. Yes.

Waking sleepy baby if necessary for feedings at least every 3 hours (with one 5 hour long stretch of sleep per day). Yes.

SAFETY:

Car seat: infant car seat only in back seat, rear facing until age 2. Yes.

Cord care. Yes.

Nail trimming. Yes.

Change from meconium to transitional stool. Yes.

Burping, spitting up. Yes.

Normal sleep patterns; sleeping arrangements. Yes.

Amount of clothing needed; exposure to hot or cold temperatures. Yes.

No smoking, no 2nd or "third" hand smoke. Yes.

Sleeping arrangement, safe sleep, crib slats, no bumpers. Yes.

Preventing sickness, no fevers under 3 mo. Yes.

PARENT SELF CARE:

Baby blues normal, PPD/PPA, postpartum psychosis not normal - contact us immediately.
Yes.

Sleep priority. Say yes to help. Yes.

No shaking baby. Yes.

REFERRALS:

IBCLC: Not needed.

WIC: Not needed.

1 week well child

Subjective

**5-7 day well child exam

[Parent] is/are here with [patient name] for a well child check.

CONCERNS:

FAMILY HISTORY:

Reviewed-no changes.

PERSONAL MEDICAL HISTORY:

No major changes. NKDA.

MEDICATIONS:

None.

SUPPLEMENTS:

None.

MOTHER'S MEDICATIONS:

None.

MOTHER'S SUPPLEMENTS:

None.

BREASTFEEDING:

No concerns, good latch, no clicking or gulping sounds, minimal nipple pain, no mastitis, no thrush.

Feeding frequency: On demand, every 1-3 hours.

DIAPERS: Good. Wet diapers q 1-3 hours, stools 4+ daily. Mustard colored stools.

CORD: Good, no concerns, no redness.

SLEEP:

Sleep position:

Sleep information:

SOCIAL:

Lives with:

Siblings: Transitioning well. No concerns.

SAFETY:

Smoke detector/carbon monoxide detector in home. Yes

Diffused essential oils, scented home products: None.

PARENTS:

Mental health:

Denies seeing or hearing things that are not there (hallucinations), paranoia, suicidal thoughts or actions, disorientation, bizarre behavior, thoughts of harming self or child.

Mom diet:

No changes.

DEVELOPMENT:

Responds to sounds. Yes

Makes eye contact. Yes

Responds to parent's face. Yes

Moves all extremities. Yes

Objective:

GENERAL: well appearing infant. Coloration: pink, well perfused.

HEAD: symmetric, no plagiocephaly. Fontanelles soft and flat. Sutures normal. Face: symmetric. No palsies noted..

EYES: symmetric, normal spacing. Sclerae white/clear. No conjunctival hemorrhage. No discharge. Red reflex present and symmetric b/l.

EARS: normal position, size. No No branchial cleft cysts, sinuses, preauricular skin tags or pits.

NOSE: nares patent.

MOUTH: symmetric, no micrognathia. No ankyloglossia. Buccal mucosa normal. Palate intact.

NECK: normal, no masses, no torticollis. Clavicles intact.

CHEST: symmetric, no abnormalities..

LUNGS: no rapid breathing, nasal flaring, use of accessory muscles. Lung fields CTA.

CARDIAC: pulse oximetry > 95% R hand, R foot. Femoral pulses symmetric. RRR, no murmurs.

ABDOMEN: no masses. No hepatosplenomegaly. Umbilical cord stump normal, no sign of infection.

GENITALIA: Female: no labial adhesion, vaginal opening patent. Male: uncircumcised penis, urethral meatus appropriately positioned. Testes down.

MUSCULOSKELETAL: normal tone, no head lag.

NEURO: Moro reflex present, plantar grasp reflex present, palmar grasp reflex present.

Assessment:

Z00.110 HEALTH EXAMINATION FOR NEWBORN UNDER 8 DAYS OLD

Z00.111 HEALTH EXAMINATION FOR NEWBORN 8 TO 28 DAYS OLD

Plan:

**5-14 Day Plan

DISCUSSED (Yes/No)

DIET:

Reviewed signs of hunger: hand to mouth, sucking, fussing, rooting. End feeding when baby turns away, closes mouth, relaxes hands. Yes.

Pacifier when breastfeeding well established (usually 3 weeks), bottle intro same time. Yes.

SAFETY:

- Reviewed: Normal sleep patterns, change of circadian rhythm, safe sleep. Yes.
- Amount of clothing needed; exposure to hot or cold temperatures. Yes.
- Crying, colic. Yes.
- Reviewed: No fevers under 3 mo. How to use temporal artery or rectal thermometer. Have everyone wash hands before touching baby. Avoid public spaces during cold/flu season. Keep baby in baby carrier or covered car seat in public spaces. Yes.
- Do not smoke (cigarette, marijuana, vaping). Also avoid essential oil diffusers (too strong for infants), scented home products (plug-ins, etc). Yes

DEVELOPMENT:

- Start tummy time, 5-15 minutes on floor or on parent's chest. Yes
- Talk to your baby. Yes
- 1 on 1 time with sibling. Yes

PARENT SELF CARE:

Reviewed: Baby blues normal, PPD/PPA, postpartum psychosis not normal - contact us immediately. Yes.

Sleep priority. Say yes to help. Yes.

Reviewed: Frustration is normal; do not shake your baby. Yes.

Use contraception immediately (if not religiously opposed to contraception), breastfeeding is not always a reliable contraception method. Yes.

Receiving unwanted advice - smile, say thanks, change the subject. Yes.

PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.

2 week well child

Subjective:

**10-16 day well child exam

[Parent] is/are here with [Patient name] for a well child check.

CONCERNS:

FAMILY HISTORY:

Reviewed-no changes.

PERSONAL MEDICAL HISTORY:

No major changes. NKDA.

MEDICATIONS:

None.

SUPPLEMENTS:

None.

MOTHER'S MEDICATIONS:

None.

MOTHER'S SUPPLEMENTS:

None.

BREASTFEEDING:

No concerns, good latch, no clicking or gulping sounds, minimal nipple pain, no mastitis, no thrush.

Feeding frequency: On demand, every 1-3 hours.

DIAPERS: Good. Wet diapers q 1-3 hours, stools 4+ daily. Mustard colored stools.

SLEEP:

Sleep position:

Sleep information:

SOCIAL:

Lives with: No changes.

Siblings: Transitioning well. No concerns.

SAFETY:

Smoke detector/carbon monoxide detector in home. Yes

Checked hot water heater (120 degrees or less). Yes

PARENTS:

Mental health:

Denies seeing or hearing things that are not there (hallucinations), paranoia, suicidal thoughts or actions, disorientation, bizarre behavior, thoughts of harming self or child.

Mom diet:

No changes.

Return to work?

DEVELOPMENT:

Responds to sounds. Yes

Makes eye contact. Yes

Responds to parent's face. Yes

Moves all extremities. Yes

Objective:

GENERAL: well appearing infant. Coloration: pink, well perfused.

HEAD: symmetric, no plagiocephaly. Fontanelles soft and flat. Sutures normal. Face: symmetric. No palsies noted..

EYES: symmetric, normal spacing. Sclerae white/clear. No conjunctival hemorrhage. No discharge. Red reflex present and symmetric b/l.

EARS: normal position, size. No No branchial cleft cysts, sinuses, preauricular skin tags or pits.

NOSE: nares patent.

MOUTH: symmetric, no micrognathia. No ankyloglossia. Buccal mucosa normal. Palate intact.

NECK: normal, no masses, no torticollis. Clavicles intact.

CHEST: symmetric, no abnormalities..

LUNGS: no rapid breathing, nasal flaring, use of accessory muscles. Lung fields CTA.

CARDIAC: pulse oximetry > 95% R hand, R foot. Femoral pulses symmetric. RRR, no murmurs.

ABDOMEN: no masses. No hepatosplenomegaly. Umbilical cord stump normal, no sign of infection.

GENITALIA: Female: no labial adhesion, vaginal opening patent. Male: uncircumcised penis, urethral meatus appropriately positioned. Testes down.

MUSCULOSKELETAL: normal tone, no head lag.

NEURO: Moro reflex present, plantar grasp reflex present, palmar grasp reflex present.

Assessment:

Z00.111 HEALTH EXAMINATION FOR NEWBORN 8 TO 28 DAYS OLD

Plan:

(same as 1 week plan, review points not covered last visit)

DISCUSSED (Yes/No)

DIET:

Reviewed signs of hunger: hand to mouth, sucking, fussing, rooting. End feeding when baby turns away, closes mouth, relaxes hands. Yes.

Pacifier when breastfeeding well established (usually 3 weeks), bottle intro same time. Yes.

SAFETY:

- Reviewed: Normal sleep patterns, change of circadian rhythm, safe sleep. Yes.

- Amount of clothing needed; exposure to hot or cold temperatures. Yes.

- Crying, colic. Yes.

- Reviewed: No fevers under 3 mo. How to use temporal artery or rectal thermometer. Have everyone wash hands before touching baby. Avoid public spaces during cold/flu season. Keep baby in baby carrier or covered car seat in public spaces. Yes.

- Do not smoke (cigarette, marijuana, vaping). Also avoid essential oil diffusers (too strong for infants), scented home products (plug-ins, etc). Yes

DEVELOPMENT:

- Start tummy time, 5-15 minutes on floor or on parent's chest. Yes

- Talk to your baby. Yes

- 1 on 1 time with sibling. Yes

PARENT SELF CARE:

Reviewed: Baby blues normal, PPD/PPA, postpartum psychosis not normal - contact us immediately. Yes.

Sleep priority. Say yes to help. Yes.

Reviewed: Frustration is normal; do not shake your baby. Yes.

Use contraception immediately (if not religiously opposed to contraception), breastfeeding is not always a reliable contraception method. Yes.

Receiving unwanted advice - smile, say thanks, change the subject. Yes.

PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.

2 month well child

Subjective:

*2 month well child

[Parent] is/are here with [Patient name] for a well child check.

CONCERNS:

Concerns about vision or hearing? None

FAMILY HISTORY:

Reviewed-no changes.

PERSONAL MEDICAL HISTORY:

No major changes. NKDA.

MEDICATIONS:

None.

SUPPLEMENTS:

None.

MOTHER'S MEDICATIONS:

None.

MOTHER'S SUPPLEMENTS:

None.

DIET:

Breastfeeding No concerns, good latch, no clicking or gulping sounds, minimal nipple pain, no mastitis, no thrush.

Feeding frequency:

Bottle-feeding: going well, gets oz every hours

N/A

Formula type: N/A

Using distilled or boiled (cooled) water to mix formula. N/A

DIAPERS: frequent wet diapers q 2-3 hours, frequent BM.

VACCINES:

SLEEP:

Sleep position:

SOCIAL:

Major changes in the family: There are no major changes in the family (divorce, separation, new job, new home).

New caregivers? None.

Returning to work:

Support system:

Parent's mood: Good. No concerns.

SAFETY:

Has smoke & carbon monoxide detectors in the home. Yes.

PROMOTING FIRST RELATIONSHIPS:

(Open-ended) What is your child like? What is it like to parent your baby?

DEVELOPMENT:

- Smiles. Yes.
- Coos. Yes.
- Looks at caregiver. Yes.
- Comforts self (brings hands to mouth). Yes.
- Holds head up in prone position. Yes.
- Moves both arms and legs together . Yes.

Objective:

GENERAL: well appearing infant in NAD. No abuse or neglect evident. Good attachment to parent.

HEAD: normocephalic, atraumatic. Anterior fontanelle open and flat.

SKIN: clear, no rashes or lesions evident.

EYES: conjunctivae and sclera clear, red reflex present and symmetric bilaterally.

EARS: canals mostly clear, TM not visualized due to size.

NOSE: nares appear patent, clear.

MOUTH: No lip or tongue tie. No visible teeth.

NECK: Supple, no masses, no thyromegaly.

LUNGS: Respiration even and unlabored. No ICS retraction or unilateral lag. No contraction of SCM or scalenes noted. Lung fields clear to auscultation.

HEART: RRR, no murmurs, clicks, rubs, snaps or extra sounds. S1 and S2 not diminished, exaggerated or abnormally split. Femoral pulses normal.

ABDOMEN: Soft, no masses, no tenderness, no organomegaly.

HIPS: Good abduction, no hip click noted.

GENITALIA, ANUS: Grossly normal, normal development. No diaper dermatitis.

Male: uncircumcised penis, testes down.

Female: normal, no labial adhesion.

Assessment:

Z00.121 ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITH ABNORMAL FINDINGS

Z00.129 ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITHOUT ABNORMAL FINDINGS

Plan:

*2 month plan

DISCUSSED: (Yes/No)

2 mo babies cannot be "spoiled." (First 3 months of life are considered "4th trimester.")
Babies are reliant upon caregivers to get all needs met. Cuddle, talk, read, sing, wear your babies. Eye contact with parents literally lays down neuronal connections. Yes

Recommend beginning 400-800 iu vitamin D daily. Yes
No propping bottle. Yes

Colic - normal periods of unexplained crying. Yes

Mother's health - moderate exercise, not dieting but eating healthy. Continuing to take prenatal vitamin. Recommend fish oil to supplement lost fatty acids. Yes
Resuming sexual intercourse. Yes
Parent mood, normal fatigue, hormonal changes, recognizing postpartum depression. Yes

Social support - say yes to help, join parenting groups. Yes

Safety: Keeping hand on baby while on changing table. Never leave baby alone in sink or bathtub even for a few seconds. Do not shake your baby. Yes

Baby carrier safety: do not recommend Baby Bjorn or other carrier that does not support hips. Limit forward-facing to 15 minutes. Yes

ANTICIPATORY GUIDANCE:

Gave Naturopathic Pediatrics 2 month well child handout.

VACCINATIONS:

Vaccines: Discussed ACIP recommended vaccines x [15-30] minutes.

Parents choose:

PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.

4 month well child

Subjective:

*4 month well child

[Parent] is/are here with [Patient name] for a well child check.

CONCERNS:

Concerns about vision or hearing? None

FAMILY HISTORY:

Reviewed-no changes.

PERSONAL MEDICAL HISTORY:

No major changes. NKDA.

MEDICATIONS:

None.

SUPPLEMENTS:

None.

MOTHER'S MEDICATIONS:

None.

MOTHER'S SUPPLEMENTS:

None.

DIET:

Breastfeeding No concerns, good latch, no clicking or gulping sounds, minimal nipple pain, no mastitis, no thrush.

Feeding frequency:

Bottle-feeding: going well, gets { } oz every hours

N/A

Formula type: N/A

Using distilled or boiled (cooled) water to mix formula. N/A

DIAPERS: frequent wet diapers q 2-3 hours, frequent BM.

VACCINES:

Infant tolerated 2 month vaccinations? Yes. No concerns.

SLEEP:

Sleep position:

Sleep information:

SOCIAL:

Major changes in the family: There are no major changes in the family (divorce, separation, new job, new home).

New caregivers? None.

Parent's mood: Good. No concerns.

PROMOTING FIRST RELATIONSHIPS:

(Open-ended) What is your child like? What is it like to parent your baby?

DEVELOPMENT:

- Smiles. Yes.
- Laughs (or chuckles softly). Yes.
- Moves head side to side while supine. Yes.
- Holds head up while prone, head doesn't drop down. Yes.
- Lifts chest (occasional). Yes.
- Steady head control. Yes.
- Brings hands together. Yes.
- Holds toy briefly. Yes.
- Grabs clothes (own, or mom's while nursing). Yes.
- Eyes track face or object. Yes.
- Babbles. Yes.
- Orients to voices. Yes.

Objective:

GENERAL: well appearing infant in NAD. No abuse or neglect evident. Good attachment to parent.

HEAD: normocephalic, atraumatic. Anterior fontanelle open and flat.

SKIN: clear, no rashes or lesions evident.

EYES: conjunctivae and sclera clear, red reflex present and symmetric bilaterally.

EARS: canals mostly clear, TM not visualized due to size.

NOSE: nares appear patent, clear.

MOUTH: No lip or tongue tie. No visible teeth.

NECK: Supple, no masses, no thyromegaly.

LUNGS: Respiration even and unlabored. No ICS retraction or unilateral lag. No contraction of SCM or scalenes noted. Lung fields clear to auscultation.

HEART: RRR, no murmurs, clicks, rubs, snaps or extra sounds. S1 and S2 not diminished, exaggerated or abnormally split. Femoral pulses normal.

ABDOMEN: Soft, no masses, no tenderness, no organomegaly.

HIPS: Good abduction, no hip click noted.

GENITALIA, ANUS: Grossly normal, normal development. No diaper dermatitis.

Male: uncircumcised penis, testes down.

Female: normal, no labial adhesion.

Assessment:

Z00.121 ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITH ABNORMAL FINDINGS

Z00.129 ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITHOUT ABNORMAL FINDINGS

Plan:

*4 month plan

DISCUSSED: (Yes/No)

- Normal development. Yes
- Nursing - normal for breasts to be less engorged. Yes
- Food introductions: recommend "tastes" of solid food between ages of 4-6 months to reduce incidence of food allergies (new research supports earlier solid introductions). No jar-sized portions until 6 months. Introduce all potentially allergenic foods in small quantities, including peanut butter. Yes
- Teething tips. Drooling is normal, does not necessarily indicate presence of teeth. No topical essential oils or numbing agents. Lemon balm tea popsicles, etc. Recommend avoiding acetaminophen. Yes
- 4 month sleep regression. Yes
- Safety: sun (no sunscreen until 6 mo, avoid exposure). Avoid infant walkers/jumpers. Yes
- Do not shake your baby. Yes
- First fevers. Yes
- Parent's mood. Edinburgh Postnatal Depression Scale given. Score = []

HANDOUTS:

Gave Naturopathic Pediatrics 4 month well child guide.

VACCINATIONS:

Discussed ACIP recommended 4 mo vaccines. Vaccines today:

PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.

6 month well child

Subjective:

*6 month well child

[Parent] is/are here with [Patient name] for a well child check.

CONCERNS:

Concerns about vision or hearing? None

FAMILY HISTORY:

Reviewed-no changes.

PERSONAL MEDICAL HISTORY:

No major changes. NKDA.

MEDICATIONS:

None.

SUPPLEMENTS:

None.

MOTHER'S MEDICATIONS:

None.

MOTHER'S SUPPLEMENTS:

None.

DIET:

Solid foods: [Solids introduced]

Breastfeeding Is continuing breastfeeding. No concerns.

Feeding frequency:

Bottle-feeding: going well, gets NONE oz every hours

N/A

Formula type: N/A

Using distilled or boiled (cooled) water to mix formula. N/A

Sleeping with a bottle? No.

DIAPERS: frequent wet diapers q 2-3 hours, frequent BM.

VACCINES:

Infant tolerated 4 month vaccinations? Yes. No concerns.

SLEEP:

Sleep position:

Sleep information:

SOCIAL:

Major changes in the family: There are no major changes in the family (divorce, separation, new job, new home).

New caregivers? None.

Parent's mood: Good. No concerns.

PROMOTING FIRST RELATIONSHIPS:

(Open-ended) What is your child like? What is it like to parent your baby?

DEVELOPMENT:

- Rolls over. Yes.
- sits briefly. Yes.
- babbles. Yes.
- social smiles. Yes.
- brings objects to mouth. Yes.
- Looks in direction of parent's voice when they call. Turns to see where sound is coming from. Yes.
- Makes consonant sounds (ga, da or ba). Yes.
- Lifts legs high while on back. Yes.
- Pushes chest off the floor. Yes.
- Reaches for small objects, attempts raking grasp. Yes.
- Tries to get a dropped toy. Yes.
- Smiles at self in mirror (optional: reaches for self in mirror). Yes.
- Feet are flat when holding baby to stand.. Yes.

Objective:

GENERAL: well appearing infant in NAD. No abuse or neglect evident. Good attachment to parent.

HEAD: normocephalic, atraumatic. Anterior fontanelle open and flat.

SKIN: clear, no rashes or lesions evident.

EYES: conjunctivae and sclera clear, red reflex present and symmetric bilaterally.

EARS: canals clear, TM visualized intact no abnormalities.

NOSE: no abnormalities, no discharge.

MOUTH: No lip or tongue tie. Teeth: None.

NECK: Supple, no masses, no thyromegaly.

LUNGS: Respiration even and unlabored. No ICS retraction or unilateral lag. No contraction of SCM or scalenes noted. Lung fields clear to auscultation.

HEART: RRR, no murmurs, clicks, rubs, snaps or extra sounds. S1 and S2 not diminished, exaggerated or abnormally split. Femoral pulses normal.

ABDOMEN: Soft, no masses, no tenderness, no organomegaly.

HIPS: Good abduction, no hip click noted.

GENITALIA, ANUS: Grossly normal, normal development. No diaper dermatitis.

Male- uncircumcised penis, testes down.

Female- normal, no labial adhesion.

Assessment:

Z00.121 ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITH ABNORMAL FINDINGS

Z00.129 ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITHOUT ABNORMAL FINDINGS

Plan:

*6 month plan

DISCUSSED: (Yes/No)

- Discussed solid food introductions. Discussed Baby Led Weaning if parents prefer. Discussed choking hazards. No honey, corn syrup or dairy until 12 months. Yes
- Recommend iron containing foods. Yes

Discussed safety concerns:

- Electrical outlet covers. Yes
- Put away small objects; Sibling's objects. Yes
- Safety gates at top and bottom of stairs. Yes
- Herbs, poisons, meds in locked cabinet. Yes
- Hot water heater below 120 degrees. Yes

Discussed sunscreen

- EWG recommendations. . Yes

Discussed Parent's mood. Edinburgh Postnatal Depression Scale given. Score = []

HANDOUTS:

Gave Naturopathic Pediatrics 6 month well child guide.

VACCINATIONS:

Discussed ACIP recommended 6 mo vaccines. Vaccines today:

PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.

9 month well child

Subjective:

*9 month well child

[Parent] is/are here with [Patient] for a well child check.

CONCERNS:

Concerns about vision or hearing? None

FAMILY HISTORY:

Reviewed-no changes.

PERSONAL MEDICAL HISTORY:

No major changes. NKDA.

MEDICATIONS:

None.

SUPPLEMENTS:

None.

MOTHER'S MEDICATIONS:

None.

MOTHER'S SUPPLEMENTS:

None.

DIET:

Solid foods: [Solid foods]

Breastfeeding Is continuing breastfeeding. No concerns.

Feeding frequency:

Bottle-feeding: going well, gets NONE oz every hours

N/A

Formula type: N/A

Using distilled or boiled (cooled) water to mix formula. N/A

Sleeping with a bottle? No.

DIAPERS: frequent wet diapers q 2-3 hours, frequent BM.

VACCINES:

Infant tolerated 6 month vaccinations? Yes. No concerns.

SLEEP:

Sleep information:

SOCIAL:

Major changes in the family: There are no major changes in the family (divorce, separation, new job, new home).

New caregivers? None.

Parent's mood: Good. No concerns.

PROMOTING FIRST RELATIONSHIPS:

(Open-ended) What is your child like? What is it like to parent your baby?

LEAD EXPOSURE RISK:

- Does child live in or regularly visit a house/building built before 1978 with peeling or chipped paint? No.
- Has child lived outside of the US? No.
- Does child have sibling or housemate treated or diagnosed with lead poisoning? No.
- Has child eaten non-food items that may be unsafe? No.
- Does child come into contact with an adult whose job or hobby involves exposure to lead? House painting, plumbing, renovation, construction, auto repair, welding, electronics repair, pottery, fishing, making or shooting firearms. No.
- Does child live near active smelter, battery recycling plant or other industry that may release lead? No.
- Does child use health remedies or spices from another country? No.

DEVELOPMENT:

- Makes sounds like "da" "ga" or "ba." Yes.
- Repeats sounds that parent makes. Yes.
- Stands with assistance. Yes.
- Sits without using hands for support. Yes.
- Picks up small objects with raking grasp. Yes.
- Picks up objects with pincer grasp. Yes.
- Passes toy from hand to hand. Yes.
- will hold toys in each hand, claps them together. Yes.
- Feeds self. Yes.
- offers toy to parent (even if baby doesn't let go.). Yes.
- Uses both hands/legs equally well. Yes.

Objective:

GENERAL: well appearing infant in NAD. No abuse or neglect evident. Good attachment to parent.

HEAD: normocephalic, atraumatic. Anterior fontanelle open and flat.

SKIN: clear, no rashes or lesions evident.

EYES: conjunctivae and sclera clear, red reflex present and symmetric bilaterally.

EARS: canals clear, TM visualized intact no abnormalities.

NOSE: no abnormalities, no discharge.

MOUTH: No lip or tongue tie. Teeth: None.

NECK: Supple, no masses, no thyromegaly.

LUNGS: Respiration even and unlabored. No ICS retraction or unilateral lag. No contraction of SCM or scalenes noted. Lung fields clear to auscultation.

HEART: RRR, no murmurs, clicks, rubs, snaps or extra sounds. S1 and S2 not diminished, exaggerated or abnormally split. Femoral pulses normal.

ABDOMEN: Soft, no masses, no tenderness, no organomegaly.

HIPS: Good abduction, no hip click noted.

GENITALIA, ANUS: Grossly normal, normal development. No diaper dermatitis.

Male- uncircumcised penis, testes down.

Female- normal, no labial adhesion.

DEVELOPMENT:

Assessment:

Z00.121 ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITH ABNORMAL FINDINGS

Z00.129 ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITHOUT ABNORMAL FINDINGS

Plan:

*9 month plan

DISCUSSED: (Yes/No)

Language:

- Developing speech, copying speech: speak clearly, read to your child frequently. Point out objects and name them. Allow child to see your mouth developing sounds. Yes

Diet:

- Breastfed babies: transitioning to solid foods can be a challenge, sometimes. Continue iron rich foods. BLW. Watch for choking hazards - nuts, hot dogs, meat chunks, grapes, marshmallows or candy. Also small toys like legos, etc. Watch baby while eating. No caffeine, soda or flavored drinks. Juice not necessary. Yes

Development:

- Normal development (wide range for development at 9 months, some babies walking, some not even crawling). Yes

- Establish framework for discipline. (Discipline means healthy structure so infants can be safe and emotionally secure.) Time out not effective until 18 months. Provide structured environment with clear rules. Redirect when child misbehaves, say NO clearly and firmly. Give environment where child can explore safely. Yes

- Separation anxiety starting (peaking around 12 months.).Yes

Safety:

- Poison control center number. Yes
- Upgrading car seat - rear facing until 2. Yes
- Do not leave child alone in car, or unattended. Yes
- ALWAYS supervise around water, even in bath with a few inches of water. Toilets closed. Yes
- Safety gates around stairs, electrical outlet covers. Yes
- Matches, poisons, detergent, bleach, household cleaners, firearms, knives all should be stored well out of reach. Yes
- Soft soled shoes (like moccasins) while outdoors, otherwise bare feet are fine. Yes

Dental care:

- Brush teeth daily. Discussed pros/cons of fluoride (topical use only). Yes

Parent's mood.

- Parents often tired at this point. Take time for yourself. Take time with partner (date night). Yes

Edinburgh Postnatal Depression Scale given. Score = []

HANDOUTS:

Gave Naturopathic Pediatrics 9 month well child guide.

VACCINATIONS:

Vaccines today (if any):

PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.

LEAD SCREENING: Negative, no referral needed.

12 month well child

Subjective:

12 month well child

[Parent] is/are here with [Patient] for a well child check.

CONCERNS:

Concerns about vision or hearing? None

FAMILY HISTORY:

Reviewed-no changes.

PERSONAL MEDICAL HISTORY:

No major changes. NKDA.

MEDICATIONS:

None.

SUPPLEMENTS:

None.

MOTHER'S MEDICATIONS:

None.

MOTHER'S SUPPLEMENTS:

None.

DIET:

Foods:

Calcium source:

Breastfeeding?

Sleeping with a bottle? No.

TEETH:

Brushing teeth? Yes

Scheduled dental visit? Yes

Frequent nighttime nursing?

No.

Drinking juice/soda/sweetened beverages? Yes

DIAPERS: frequent wet diapers q 2-3 hours, frequent BM.

VACCINES:

Infant tolerated past vaccinations? Yes. No concerns.

SLEEP:

SOCIAL:

Major changes in the family: There are no major changes in the family (divorce, separation, new job, new home).

New caregivers? None.

Parent's mood: Good. No concerns.

LEAD SCREENING: Completed at 9 month visit.

TUBERCULOSIS SCREENING:

Travel outside United States? No.

Contact with anyone with tuberculosis? No.

PROMOTING FIRST RELATIONSHIPS:

(Open-ended) What is your child like? What is it like to parent your baby?

DEVELOPMENT:

- Bangs toys together. Yes.

- Waves Bye Bye. Yes.

- Tries to do what you do. Yes.

- Stands alone. Yes.

- Drinks from a cup. Yes.
- Speaks 2 words. Yes.
- Tries to make sounds that you make. Yes.
- Looks at things you are looking at. Yes.
- Cries when you leave. Yes.
- Hands you a book to read or toy to play with. Yes.
- Follows simple directions. Yes.
- Walks if you hold their hands? Yes.
- Cruises/walks? (opt). Yes.

Objective:

GENERAL: well appearing child in NAD. No abuse or neglect evident. Good attachment to parent.

HEAD: normocephalic, atraumatic. Anterior fontanelle open and flat.

SKIN: clear, no rashes or lesions evident.

EYES: conjunctivae and sclera clear, red reflex present and symmetric bilaterally.

EARS: canals clear, TM visualized intact no abnormalities.

NOSE: no abnormalities, no discharge.

MOUTH: No lip or tongue tie. Teeth: [number]

NECK: Supple, no masses, no thyromegaly.

LUNGS: Respiration even and unlabored. No ICS retraction or unilateral lag. No contraction of SCM or scalenes noted. Lung fields clear to auscultation.

HEART: RRR, no murmurs, clicks, rubs, snaps or extra sounds. S1 and S2 not diminished, exaggerated or abnormally split. Femoral pulses normal.

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Male- uncircumcised penis, testes down.
Female- normal, no labial adhesion.

DEVELOPMENT:

Assessment:

Z00.121 ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITH ABNORMAL FINDINGS

Z00.129 ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITHOUT ABNORMAL FINDINGS

Plan:

12 month plan

Hgb check completed: []

DISCUSSED: (Yes/No)

Dental care:

- Discontinue bottle/pacifier. Yes.
- Pediatric dentist. Yes.

Development:

- Normal development: range for walking/talking. Most toddlers walk OR talk first, then switch to other milestone. Many toddlers have bow-legged or in-toeing gait, and outgrow it eventually. Yes.
- Social development. Tantrums are normal and expected. Yes.
- Language development. Encourage language formation, which helps prevent tantrums. Clearly repeat yourself. Do not use lisp (baby talk), but okay to use sing-song voice. Encourage baby sign language. Let child see your mouth when voicing new words. Yes.

Diet:

- 3 meals plus 1-2 snacks per day. Decreased need for breastmilk or formula. Highly recommend continuing to breastfeed until 24 months, but less for calories and more for immune support/comfort/bonding. Give child healthy choices. Picky eaters, decreased appetite are normal. Yes.
- Growing toddlers need a good source of calcium. Okay to introduce cow's milk, IF well tolerated. Recommend local grass-fed whole milk first, or cow's dairy alternative. Yes.

- Let child use a spoon and open-faced cup, even if it is messy. Do not "eat on the run" to prevent choking. Yes.
- Constipation common - introduce high fiber foods. Toddlers may show interest in toilet, but typically aren't ready for true potty training yet (unless family is doing elimination communication). Yes.
- Sleep: 2 to 1 nap transition tips. 2-1 nap transition tips is in 12 mo Naturopathic Pediatrics Well Child Guide for when parents are ready.
- NO screen time under 2 years of age. Yes.
- Safety: Poison control center number. Flexible soled shoes. Yes.

Discipline/structured environment:

- Toddlers typically don't understand "time-out" yet. Redirection is best. Make sure "rules" are the same between households/grandparents/caregivers. Provide healthy/safe environment to minimize use of "NO." Yes.

Parent's mood.

- Parents often tired at this point. Take time for yourself. Take time with partner (date night). Yes
- Edinburgh Postnatal Depression Scale given. Score = []

HANDOUTS:

Gave Naturopathic Pediatrics 12 month well child guide.

VACCINATIONS:

Discussed 12-15 mo ACIP recommended vaccines x [15-30 min]

Parents choose:

Vaccines today:

PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.

LEAD SCREENING: Negative, no referral necessary.