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PROVIDER PRACTICE TOOLS

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# CHARTING TEMPLATES

15 month - 4 year  
well child checks



**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 resource is intended for use by physicians and care providers only.

If you have difficulty copying and pasting from a PDF document, or have questions about the use of these templates please e-mail Erika at [info@naturopathicpediatrics.com](mailto:info@naturopathicpediatrics.com).

**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:**

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**Additional Resources for Providers can be found on Naturopathic Pediatrics under “For Providers”**

For additional resources, including ASQ-3 developmental screening handouts, M-CHAT autism screening questionnaires, practice-building tips, naturopathic tools, handouts and resource guides and more see [www.naturopathicpediatrics.com/for-providers](http://www.naturopathicpediatrics.com/for-providers)

# 15 month well child check

## **Subjective:**

[Parent Name/s] 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:

### SUPPLEMENTS:

### 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? No.

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

VACCINES:

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: Completed at 12 month visit.

HEMOGLOBIN SCREENING: Completed at 12 month visit.

PROMOTING FIRST RELATIONSHIPS:

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

DEVELOPMENT:

- Tries to do what you do. Yes.
- Bends down without falling. Yes.
- Walks Well. Yes.
- Puts blocks in a cup. Yes.
- Speaks 3+ words. Words: [examples]
- Listens to a story. Yes.
- Helps in the house Yes.
- Brings toys to show you. Yes.
- Follows simple commands. Yes.

# Objective:

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

HEAD: normocephalic, atraumatic.

EYES: conjunctivae and sclera clear, red reflex present and symmetric bilaterally. Position/alignment normal. Cover/uncover test normal.

ENT: Ears: canals clear, tympanic membrane visualized intact with no abnormalities. Nose: normal, no rhinitis. Mouth: grossly normal, no dental caries, no pharyngeal injection.

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.

SKIN: Clear, no rashes or lesions evident.

MSS: Grossly normal, normal tone and ROM. Leg lengths equal.

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

Male: uncircumcised penis, testes down.

Female: normal, no labial adhesion

LYMPH: No lymphadenopathy.

PSYCH: Normal toddler affect.

# Assessment:

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

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

**NOTE: ABNORMAL FINDINGS INCLUDES ANY ADDITIONAL DIAGNOSES, INCLUDING UNDER-IMMUNIZATION STATUS.**

# Plan:

DISCUSSED: (Yes/No)

Dental care:

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

DEVELOPMENT:

- Normal development, what is normal and abnormal. Yes.
- Developing emotional intelligence. EQ as greater predictor of lifelong success than IQ. Identifying child's emotions to prevent tantrums. Yes.
- Tantrums are normal part of toddler development. Praise child for good behavior. Model good actions and good behavior. Provide space for child to thrive, rather than having to say "no" constantly. Do not punish for having toilet accidents. Yes.
- Most children not ready for toilet training until age 2. (Unless parents have done Elimination Communication.) Yes.

DIET:

- Diet: offering 3 meals plus 1-2 snacks daily. Including fruit, vegetables, grain/starch and protein at each meal. Yes.
- Cow's dairy: limit to 3 servings per day to prevent iron-deficiency anemia. Cow's dairy or non-dairy alternative for calcium containing product in children who have high calcium demand. Yes.
- No nutritional value of juice. Never give toddler caffeinated beverages, including coffee drinks or soda. Yes.
- Constipation is common. Fluids + fiber is important. Yes.

SLEEP

- Sleep: normal sleep habits, separation anxiety at night or during naps. Yes.

SAFETY:

- Safety: Keeping plastic bags, balloons, zip ties away from children. Yes.
- Rear facing carseat until age 2. Yes.
- Avoid using laundry or dishwasher detergent pods, which are often mistaken for candy. Yes.
- Watch for pot handles that may be overhanging the stove. Yes.

HANDOUTS:

Gave Naturopathic Pediatrics 15 month well child guide.

VACCINATIONS:

Vaccines today:

PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.

# 18 month well child check

## Subjective

18 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.

### DIET:

Foods:

Calcium source:

### TEETH:

Brushing teeth? Yes

Concerns? None.

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.

Planning to have more children? None.

Screen time: None.

Parent's mood: Good. No concerns.

LEAD SCREENING: Completed at 9 month visit.

TUBERCULOSIS SCREENING: Completed at 12 month visit.

HEMOGLOBIN SCREENING: Completed at 12 month visit.

PROMOTING FIRST RELATIONSHIPS:

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

How is discipline going? Caregivers on the same page?

DEVELOPMENT:

- Communicates by pointing or speaking. (E.g., when your child wants an object she points to it.)  
Yes.

- Speaks 8+ words. Words:

- Imitates 2-word sentences. Yes.

- Walks well, bends to pick up an object without falling.

Yes.

- Climbs. Yes.

- Kicks and throws a ball. Yes.

- Stacks 3 blocks. Yes.

- Draws/scribbles with tip of pen/crayon. Yes.

- Puts objects in a container Yes.

- Drinks from a cup with little spillage. Yes.

- Plays pretend (hugs a doll, stuffed animal, pretends to comb hair, etc.) Yes.

- Helps in the house Yes.

- Brings toys to show you. Yes.

- Follows simple commands. Yes.

## **Objective:**

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

HEAD: normocephalic, atraumatic.

EYES: conjunctivae and sclera clear, red reflex present and symmetric bilaterally. Position/alignment normal. Cover/uncover test normal.

ENT: Ears: canals clear, tympanic membrane visualized intact with no abnormalities. Nose: normal, no rhinitis. Mouth: grossly normal, no dental caries, no pharyngeal injection.

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.

SKIN: Clear, no rashes or lesions evident.

MSS: Grossly normal, normal tone and ROM. Leg lengths equal.

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

Male: uncircumcised penis, testes down.

Female: normal, no labial adhesion

LYMPH: No lymphadenopathy.

PSYCH: Normal toddler affect.

# Assessment:

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

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

**NOTE: ABNORMAL FINDINGS INCLUDES ANY ADDITIONAL DIAGNOSES, INCLUDING UNDER-IMMUNIZATION STATUS.**

NOTE: IF BILLING INSURANCE SUBMIT CPT 96110 FOR ADMINISTERING AND INTERPRETING M-CHAT

# Plan:

DISCUSSED: (Yes/No)

Dental care:

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

DEVELOPMENT:

- Normal development, what is normal and abnormal. Yes.
- Behavior: 18-24 months toddlers are working hard to assert their own independence! Your toddler may be insistent upon accomplishing a task by themselves. Yes.
- Most toddlers like to interact with other children, but do not yet understand how to share or play cooperatively. (Parallel play.) Yes.
- Toddlers need consistent routines. Yes.

DIET:

- Diet: offering 3 meals plus 1-2 snacks daily. Including fruit, vegetables, grain/starch and protein at each meal. Yes.
- Appetite often diminishes. Yes.
- Set an example by eating healthy foods yourself, and showing your child what a healthy plate looks like. Yes.
- Calcium: 800 mg calcium per day for bone development. Limit excess milk intake to prevent iron deficiency. Yes.

Handout given: Harvard Health Eating Plate. Yes.

#### DISCIPLINE:

- Discipline = setting healthy boundaries so kids can thrive. At 18 months toddlers are typically pushing boundaries (which is normal!). Time-outs start to become effective (depending on the child). Follow through on stated consequence the first time. Yes.

#### SLEEP

- Sleep: normal sleep habits, separation anxiety at night or during naps. Usually naps once per day. Yes.

#### SAFETY:

- Safety: Water safety is extremely important Yes.
- Rear facing carseat until age 2. Yes.
- Poison Control Center Yes.
- Check smoke and carbon monoxide alarms Yes.
- Do not play with stoves/ovens. Yes.

#### PARENTS MOOD:

- Parents sometimes frustrated at toddler temper tantrums. Yes.

#### HANDOUTS:

Gave Naturopathic Pediatrics 18 month well child guide.

#### **AUTISM SCREENING:**

**M-CHAT performed. Score =**

#### VACCINATIONS:

Vaccines today:

#### PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.

# 2 year well child check

## **Subjective:**

[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:

### SUPPLEMENTS:

### DIET:

Foods:

Calcium source:

### TEETH:

Brushing teeth? Yes

Concerns? None.

Pacifier? None.

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

Toilet training? None yet.

### VACCINES:

Toddler tolerated past vaccinations? Yes. No concerns.

### SLEEP:

SOCIAL:

Preschool:

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

New caregivers? None.

Screen time: None.

Play time (outdoors, exercise, etc.): > 60 min/day.

Parent's mood: Good. No concerns.

HEMOGLOBIN SCREENING: Completed at 12 month visit, no need for follow-up.

PROMOTING FIRST RELATIONSHIPS:

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

How is discipline going? Caregivers on the same page?

DEVELOPMENT:

- Walks well and runs. Yes.
- Speaks 2-3 word sentences: [examples]
- Plays make believe. Yes.
- Identifies 1+ body part. Yes.
- Climbs. Yes.
- Kicks and throws a ball. Yes.
- Goes up and down stairs holding rail or holding one hand. Yes.
- Draws/scribbles with tip of pen/crayon. Yes.
- Has tantrums. Yes.

## **Objective:**

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

HEAD: normocephalic, atraumatic.

EYES: conjunctivae and sclera clear, red reflex present and symmetric bilaterally. Position/alignment normal.

ENT: Ears: canals clear, tympanic membrane visualized intact with no abnormalities. Nose: normal, no rhinitis. Mouth: grossly normal, no dental caries, no pharyngeal injection.

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.

SKIN: Clear, no rashes or lesions evident.

MSS: Grossly normal, normal tone and ROM. Leg lengths equal.

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

Male: uncircumcised penis, testes down.

Female: normal, no labial adhesion

LYMPH: No lymphadenopathy.

PSYCH: Normal toddler affect.

# Assessment:

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

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

**NOTE: ABNORMAL FINDINGS INCLUDES ANY ADDITIONAL DIAGNOSES, INCLUDING UNDER-IMMUNIZATION STATUS.**

NOTE: IF BILLING INSURANCE SUBMIT CPT 96110 FOR ADMINISTERING AND INTERPRETING M-CHAT

## Plan:

DISCUSSED: (Yes/No)

Dental care:

- Pediatric dentist. Yes.

DEVELOPMENT:

- Behavior: 2 year old children have very typical "me-centered" behavior - "Me," "Mine," "I do it," "My Turn!" Tantrums developmentally normal. See 2 year well child guide for some helpful tips regarding 2 year development, play tips, keeping consistency in schedule and discipline. Yes.

- Most toddlers like to interact with other children, but do not yet understand how to share or play cooperatively. (Parallel play.) Yes.

- Potty training tips. Yes.

- Screen time - 20 minutes "active," 20 minutes "passive" daily (no more.) Play is always better than screen time. Yes.

DIET:

- Diet: Set an example by eating healthy foods yourself, and showing your child what a healthy plate looks like. Yes.

- Toddler pickiness extremely common, is a normal developmental stage since children want to exercise control. Continue offering undesired foods. Yes.

- Juice not necessary. Yes.

- Calcium: 800 mg calcium per day for bone development. Limit excess milk intake to prevent iron deficiency. Yes.

#### SLEEP

- Sleep: normal sleep habits, separation anxiety at night or during naps. Usually naps once per day. Yes.

#### SAFETY:

- Safety: Water safety is extremely important Yes.

#### PARENTS MOOD:

- Parents sometimes frustrated at toddler temper tantrums. Yes.

#### HANDOUTS:

Gave Naturopathic Pediatrics 2 year well child guide.

#### **AUTISM SCREENING:**

**M-CHAT performed. Score =**

#### VACCINATIONS:

Vaccines today:

#### PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.

# 3 year well child check

## **Subjective:**

[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:

### SUPPLEMENTS:

### DIET:

Foods:

Calcium source:

### TEETH:

Brushing teeth? Yes

Concerns? None.

Pacifier? None.

TOILETING: Frequent urinations & BM.

Toilet training? Yes. No concerns.

### VACCINES:

None due.

Toddler tolerated past vaccinations? Yes. No concerns.

### SLEEP:

SOCIAL:

Preschool:

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

New caregivers? None.

Planning to have more children? None.

Screen time: None.

Parent's mood: Good. No concerns.

SAFETY:

Bike/ski/scooter helmets (every time): Yes.

Life jackets (every time): Yes.

Seat belts (every time): Yes.

PROMOTING FIRST RELATIONSHIPS:

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

How is discipline going? Caregivers on the same page?

DEVELOPMENT:

- Walks upstairs alternating feet (holding on is okay). Yes.
- Speaks 3-4+ word sentence: [example]
- Knows Up and Down. Yes.
- Puts on coat or jacket themselves (not zipping yet). Yes.
- Climbs. Yes.
- Stands on one leg for about 1 second without holding. Yes.
- Jumps with both feet leaving the floor. Yes.
- Draws straight line or circle. Yes.
- Answers correctly: Are you a girl or a boy? Yes.

## Objective:

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

HEAD: normocephalic, atraumatic.

EYES: conjunctivae and sclera clear, red reflex present and symmetric bilaterally. Position/alignment normal.

ENT: Ears: canals clear, tympanic membrane visualized intact with no abnormalities. Nose: normal, no rhinitis. Mouth: grossly normal, no dental caries, no pharyngeal injection.

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.

SKIN: Clear, no rashes or lesions evident.

MSS: Grossly normal, normal tone and ROM. Leg lengths equal.

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

Male: uncircumcised penis, testes down.

Female: normal, no labial adhesion

LYMPH: No lymphadenopathy.

PSYCH: Normal toddler affect.

## Assessment:

**700.121** ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITH ABNORMAL FINDINGS

**700.129** ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITHOUT ABNORMAL FINDINGS

## **Plan:**

DISCUSSED: (Yes/No)

Dental care:

- Continue brushing daily. Yes.
- Pediatric dentist. Yes.

DEVELOPMENT:

- Normal development, what is normal and abnormal. Yes.
- Behavior: Normal 3-year old behavior. Still "me"-centric. Tantrums common and expected. Yes.
- Screen time - 30 minutes "active," 30 minutes "passive" daily (no more.) Yes.
- Read to your child daily. Yes.
- Hug and hold your child daily. Emotionally regulate for your child, they are sometimes unable to do so themselves. Yes.

DIET:

- Diet: reviewed healthy eating Yes.
- Toddler pickiness extremely common, is a normal developmental stage since children want to exercise control. Continue offering undesired foods. Yes.

DISCIPLINE:

- Caregivers have consistent discipline. Use creative discipline depending on your child. Create secure, clear boundaries and enforce rules the first time. Be sure children respond to commands like STOP, COME HERE in case of serious safety risk. Yes.
- Praise good behavior. Yes.

SLEEP

- Sleep: normal sleep habits. Usually naps once per day, some children may be dropping a nap already. Encourage quiet time if child no longer naps. Yes.

SAFETY:

- Safety: Water safety is extremely important Yes.
- Sunscreen: See EWG.org for safe sunscreens. Yes
- Watch for street safety. 3 year olds unreliable around streets, need to be supervised. Yes

PARENTS MOOD:

- Parents sometimes frustrated at toddler temper tantrums. Yes.

HANDOUTS:

Gave Naturopathic Pediatrics 3 year well child guide.

VACCINATIONS:

Vaccines today: None due.

PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.

# 4 year well child check

## **Subjective:**

[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:

### SUPPLEMENTS:

### DIET:

Foods:

Calcium source:

### TEETH:

Brushing teeth? Yes

Concerns? None.

TOILETING: Frequent urinations & BM.

Toilet training? Yes. No concerns.

### VACCINES:

Tolerated past vaccinations? Yes. No concerns.

### SLEEP:

SOCIAL:

Preschool:

Kindergarten plan:

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

New caregivers? None.

Screen time: <2 hrs.

Parent's relationship: Good. No concerns.

SAFETY:

Bike/ski/scooter helmets (every time): Yes.

Life jackets (every time): Yes.

Seat belts (every time): Yes.

PROMOTING FIRST RELATIONSHIPS:

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

How is discipline going? Caregivers on the same page?

DEVELOPMENT:

- Learning letters. Yes.
- Counts objects (at least 4). Yes.
- Draws shapes (circle, square). Yes.
- Knows opposites. Yes.
- Knows colors. Yes.
- Hops on one foot. Yes.
- Has friends, plays with peers. Yes.
- Knows address, full name, phone number, gender. Yes.
- Dresses self. Yes.

## Objective:

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

HEAD: Normocephalic, atraumatic.

EYES: Conjunctivae and sclera clear, red reflex present and symmetric bilaterally. Position/alignment normal. Vision screen: 20/20 OD, 20/20 OS.

ENT: Ears: canals clear, tympanic membrane visualized intact with no abnormalities. Nose: nares appear patent, clear. Mouth: grossly normal, no dental caries, no pharyngeal injection.

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.

SKIN: Clear, no rashes or lesions evident.

MSS: Grossly normal, normal tone and ROM. Leg lengths equal.

GENITALIA, ANUS: Grossly normal, normal development.

Male: uncircumcised penis, testes down.

Female: normal, no labial adhesion

LYMPH: No lymphadenopathy.

PSYCH: Normal childhood affect.

## Assessment:

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

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

# Plan:

DISCUSSED: (Yes/No)

Dental care:

- Continue brushing daily. Yes.
- Pediatric dentist. Yes.

DEVELOPMENT:

- Normal development, what is normal and abnormal. Yes.
- Screen time - 40 minutes "active," 40 minutes "passive" daily (no more.) Yes.
- Read to your child daily. Practice letter sounds to promote reading. (E.g., "s-snake, s-sand, s-silly.") Yes.
- Hug and hold your child daily. Do not have unrealistic expectations of your child - when hungry, tired, stressed they may still "melt down." Yes.

DIET:

- Diet: offering 3 meals plus 1-2 snacks daily. Including fruit, vegetables, grain/starch and protein at each meal. Set an example by eating healthy foods yourself, and showing your child what a healthy plate looks like. Yes.
- Continue offering undesired foods if child is a picky eater. It can take years for a child to eat vegetables. Offer dips if necessary. Yes.
- Juice not necessary. Avoid sodas, caffeinated beverages. Yes.
- Calcium: 800 mg calcium per day for bone development. Yes.
- Vitamin D: 400-800 IU daily. field 21

DISCIPLINE:

- Caregivers have consistent discipline. Use creative discipline depending on your child. Create secure, clear boundaries and enforce rules the first time. Be sure children respond to commands like STOP, COME HERE in case of serious safety risk. Yes.
- Praise good behavior. Yes.

BODY SAFETY:

- Discuss private parts, their correct names, differences between girl and boy body parts. Who gets to touch or look at those body parts? (Caregiver, doctor, self.) No one should ask child to keep a secret. Highly recommend It's Not The Stork book for early sexual education. This discussion is much easier at age 4 as kids are naturally curious and not embarrassed. This book is age-appropriate and does not go into the details of intimacy.

SLEEP

- Sleep: normal sleep habits. Sometimes dropping a nap. Encourage quiet time if child no longer naps. Yes.

#### SAFETY:

- Safety: Water safety is extremely important Yes.
- Sunscreen: See EWG.org for safe sunscreens. Yes
- Know first & last name, address, phone number. Yes
- Gun control. Make sure child knows what to do if they see a gun or knife - do not pick it up, find an adult. Families with guns should have it locked with ammunition in separate location. Yes
- Needles. Show picture of needle, make sure child knows not to pick up needles, "candies" or pills laying on the ground. Yes
- Bicycle and ski/snowboard helmets. Yes
- Life jackets. Yes

#### PARENTS MOOD, FAMILY DYNAMICS:

- Take time to be with partner. Developing healthy relationships models this for children, and provides security. Yes.
- Eat together and play together daily. Practice spirituality together daily, if this is a part of your family. Yes.

#### HANDOUTS:

Gave Naturopathic Pediatrics 4 year well child guide.

#### VACCINATIONS:

Vaccines today: None due.

#### PROMOTING FIRST RELATIONSHIPS:

Observed & encouraged connection between parent/s and child.