Comprehensive Health Assessment

10 to 11 Months Old	Actual Age:	Date:			
Medical Record #					
Gender	□ Male □ Female				
Accompanied by	□ Mother □ Father □ Other:				
Parent's Primary					
Language Interpreter	□ Yes □ No	□ Refused			
Requested	L Tes LINO	□ Neiuseu			
Name of Interpreter					
Intake		Vital Signs			
Allergies		Temp			
Height		Pulse			
Weight		Resp			
Head Circumference					
Pain	Location: Scale: 0 1 2 3	4 5 6 7 8 9 10			
Dental Provider	Last visit date:				
Chronic Problems/Sign	ificant Conditions:	See Problem List			
Current Medications/Vi	tamins: □ See Medication	on List			
Interval History					
Diet / Nutrition	□ Regular □ Iron-rich	n foods Other:			
Feedings	☐ Breastfed every hours ☐ Formulaoz every hours Formula Type or Brand:				
Elimination	□ Normal □ Abnormal				
Has WIC	□ Yes □ No	□ Yes □ No			
Sleep	□ Normal □ Abnormal				
Sleep Position	□ Supine □ Prone	□ Side			
Fluoridated Water Supply	□ Yes □ No				
Fluoride Varnish	Date last applied:				
Vaccines Up to Date	□ Yes □ No	□ See <u>CAIR</u>			
Family History	□ Unremarkable	□ Diabetes			
☐ Heart disease	□ HTN	□ Asthma			
☐ High cholesterol	□ Cancer	☐ Family Hx of unexpected or sudden death < 50 YO			
□ Other:	•				
Psychosocial & Behavioral Assessment, Family/ Social Factors	□ WNL - Stable relationships w/ social/emotional support □ Changes in family since last visit (move, job, death) □ Problems with housing, food, employment □ Family stressors (mental illness, drugs, violence/abuse) □ 1 Parent □ 2 Parents				
Lives with	Other				

Name: DOB:

name.		סטע		
AAP Risk Screener	Screening Tools Used	Low Risk	High Risk (see Plan/ Orders/AG)	
Blood Lead	□ Lead Assessment,□ H&P, □ Other:			
Dental (cavities, no dental home)	□ H&P, □ Other:			
Hepatitis B	□ H&P, □ Other:			
Intimate Partner Violence	□ <u>PEARLS</u> , □ H&P, □ Other:			
Psychosocial / Behavioral	□ <u>PSC</u> , □ H&P, □ Other:			
Tobacco Use / Exposure	□ <u>SHA</u> , □ H&P, □ Other:			
Tuberculosis	☐ TB Risk Assessment,			
Exposure Growth and Developm	□ H&P, □ Other:			
□ Pulls self to standing	☐ Walks with help ☐ Drop object in cup			
☐ Stands holding on	□ Plays pat-a-cake	☐ Says "mama	a" or "dada"	
☐ Thumb-finger grasp	☐ Holds cup to drink			
Physical Examination			WNL	
General appearance	Well-nourished & develo No abuse/neglect eviden			
Head	Symmetrical, A.F. open			
Eyes	PERRLA, conjunctivae & Red reflexes present, No Appears to see			
Ears	Canals clear, TMs norma			
Nose	Passages clear, MM pinl			
Teeth	No visible cavities, gross			
Mouth / Pharynx	Oral mucosa pink, no les			
Neck	Supple, no masses, thyroid not enlarged			
Chest / Breast (females)	Symmetrical, no masses Tanner stage: I II III			
Heart	No organic murmurs, reg			
Lungs	Clear to auscultation bila	terally		
Abdomen	Soft, no masses, liver &			
Genitalia	Grossly normal Tanner stage:	IV V		
Male	Circ / uncircumcised, tes	tes in scrotum		
Female	No lesions, normal exter	nal appearance		
Hips	Good abduction			
Femoral pulses	Normal			
Extremities	No deformities, full ROM			
Skin	Clear, no significant lesion			
Neurologic	Alert, no gross sensory or motor deficit □			
Subjective / Objective				

Comprehensive Health Assessment		Name:		DOB:			
			Anticipatory Guidance (AG) / Education (√ if discussed)				
			Diet, Nutrition & Exer	Diet, Nutrition & Exercise			
			☐ Introduction to meats & proteins	☐ Weaning breastfeeding	☐ Mashed table food		
			☐ Whole grains / iron-rich foods	☐ Finger foods	☐ Start feeder cup		
			☐ Physical activity / exercise	☐ Healthy food choices	□ No bottles in bed		
			Accident Prevention & Guidance				
Assessment			☐ <u>Lead poisoning</u> prevention	☐ Rear facing infant car seat	☐ Electrical outlet covers		
			☐ Routine dental care	☐ Choking hazards	☐ Allow to feed self		
			☐ Brush teeth with fluoride toothpaste	☐ Storage of drugs / toxic chemicals	□ Looks in mirror		
			□ Fluoride varnish treatment	□ Matches / burns	□ Play with cloth book		
			☐ Family support, social interaction & communication	☐ Violence prevention, gun safety	☐ Physical growth		
Plan			☐ Caution with strangers	□ Poison control phone number	☐ Decreased appetite		
Fian			☐ Skin cancer prevention	□ Smoke detector	□ Limit screen time		
			□ Falls	☐ Hot water temp < 120° F	□ Bedtime		
			☐ Effects of passive smoking	☐ Drowning / pool fence	☐ Toileting habits / training		
	Next Appointment						
			□ 1 year	□ RTC PRN	□ Other:		
			Documentation Reminders				
			□ Staying Healthy	□ Weight & Head	□ Vaccines entered in CAIR		
			Assessment / IHEBA forms reviewed,	Circumference measurements	(manufacturer, lot #, VIS publication dates, etc.)		
Referrals			completed, dated, & signed by provider	plotted in WHO growth chart	p		
□ WIC	□ Optometrist / Ophthalmologist	□ Audiologist	digited by provider	growth origin			
□ Dentist	□ Dietician / Nutritionist	□ Pulmonologist	MA / Nurse	Title	Date		
☐ CA Children's Services (CCS)	□ Regional Center	☐ Early Start or Local Education Agency	Signature	1100	Duto		
□ Other:			Duranislas Cissa ataus	T:41	D-4-		
Orders			Provider Signature	Title	Date		
□ COVID 19 vaccine	☐ Meningococcal (if high risk)	☐ CBC / Basic metabolic panel					
□ DTaP (if not up to date)	☐ MMR (if high risk)	☐ Hct / Hgb (at 12 months)					
☐ Hep A vaccine (if high risk)	□ PCV (if not up to date)	☐ Lipid panel (if high risk)	Notes (include date, ti	me, signature, and titl	e on all entries)		
☐ Hep B vaccine (if not up to date)	☐ Hep B Panel (if high risk)	□ PPD skin test □ QFT					
☐ Hib (if not up to date)	☐ Blood Lead (at 12 months)	□ CXR □ Urinalysis					
☐ Influenza vaccine	Rx Fluoride drops / chewable tabs 0.25-0.50 mg QD	□ ECG □ COVID 19 test					
☐ IPV (if not up to date)	☐ Fluoride varnish application	☐ Iron-fortified formula					
□ Other:					0 to 11 Months Old - Page 2 of 2		