

**Chief Complaint**

- MED REFILL
- Well child visit
- 2-year well child visit

**History Of Present Illness**

The patient is a 2 year old Black/African American male , who presents for a well child visit

**Interval History and Concerns**

Pt has had cough off and on over the last 2 weeks along with frequent wheezing with activity. He has cough at night every night. He is out of albuterol.

Chronic illnesses: see Past Medical History.

**Nutrition**

The patient is eating appropriately for age. He is drinking juice, lowfat milk, and water. He is voiding normally and stooling appropriately.

**Development**

He is sleeping well at night. The child has achieved the following developmental milestones: speech delayed for age, 3-10 words, understands and follows commands, kicks ball, brushes teeth with help, and walks up steps. He attends daycare and attends ST and OT. He is in the process of potty training.

**Risk Factors**

The child sits in a car seat during car travel at all times. The child is not at risk for lead exposure.

**Past Medical History**

Asthma, Unspecified; Esophageal Reflux; Tracheomalacia

**Medication List**

Aerochamber Mask Small Miscellaneous Spacer; albuterol sulfate Inhalation HFA Aerosol Inhaler 90 mcg/actuation; cetirizine Oral Solution 5 mg/5 mL; Flovent HFA Inhalation Aerosol 110 mcg/actuation; permethrin Topical Cream 5 %; prednisolone Oral Solution 15 mg/5 mL; Zantac Oral Syrup 15 mg/mL

**Allergy List**

NO KNOWN DRUG ALLERGIES

**Social History**

In daycare; Lives with both parents; Tobacco (Never)

**Immunizations**

Name	Date Admin
IPV	05/30/2012
Rota	05/30/2012
PCV	05/30/2012
HepB	05/30/2012
DTaP Combo	05/30/2012
Hib	05/30/2012
DTaP Combo	03/26/2012
Hib	03/26/2012
HepB	03/26/2012
Rota	03/26/2012
PCV	03/26/2012
IPV	03/26/2012
IPV	02/06/2012
Rota	02/06/2012
PCV	02/06/2012
HepB	02/06/2012
Hib	02/06/2012
DTaP Combo	02/06/2012
HepB	11/02/2011

### Review of Systems

#### Constitutional

- o Denies : fever

#### Respiratory

- o \* See HPI

#### Gastrointestinal

- o Denies : vomiting, diarrhea, constipation, loss of appetite

#### Integument

- o Denies : rash

### Vitals

Date	Time	BP	Position	Site	L/R	Cuff Size	HR	RR	TEMP(°F)	WT	HT	BMI kg/m <sup>2</sup>	BSA m <sup>2</sup>	O2 Sat	HC
04/21/2014	01:47 PM								97.7	30lbs 4oz	3' 1"	15.54	0.6		

### Physical Examination

#### Constitutional

- o Appearance : well developed, well-nourished, alert, in no acute distress

#### Head

- o Head : Normocephalic, atraumatic

#### Eyes

- o Conjunctiva : conjunctiva normal
- o Pupils and Irises : PERRL

#### Ears, Nose, Mouth and Throat

- o Ears :
  - External Ears : auricle appearance normal bilaterally
  - Otoscopic Examination : Normal TMs bilaterally
- o Nose/Sinuses :
  - Intranasal Exam : mucosa within normal limits
- o Oral Cavity :
  - Oral Mucosa : oral mucosa normal
- o Throat :
  - Oropharynx : no inflammation or lesions present, tonsils within normal limits

#### Neck

- o Neck : normal appearance, no masses or tenderness, supple

#### Respiratory

- o Respiratory Effort : breathing unlabored
- o Auscultation of Lungs : CTA bilaterally

#### Cardiovascular

- o Heart :
  - Auscultation of Heart : regular rate and rhythm, no murmurs present

**Gastrointestinal**

- o Abdominal Examination : abdomen nontender to palpation, normal bowel sounds, tone normal , no masses present
- o Liver and spleen : no HSM

**Lymphatic**

- o Neck : no lymphadenopathy present

**Skin and Subcutaneous Tissue**

- o General : No rashes noted, brisk cap refill

**Neurologic**

- o Gait and Station :
  - Gait Screening : normal gait, able to stand without difficulty

**Assessment**

- Well Child Check-Up (All Ages) V20.2
- Developmental Delay 315.2
- Asthma, Unspecified 493.90
- DTaP V06.1
- HEP A Vaccination V03.89
- Hib Vaccination V03.81
- MMR Vaccine V06.4
- Prevnar V03.89
- Varicella (Chicken Pox) Vaccine V05.4

**Plan****Orders**

- o DTAP IMMUNIZATION - VFC (90700) - V06.1 - 04/21/2014
- o HEP A - VFC (90633) - V03.89 - 04/21/2014
- o Hib vaccine (PRP-T 4 dose) (90648) - V03.81 - 04/21/2014
- o MMR - VFC (90707) - V06.4 - 04/21/2014
- o Prevnar 13 (90670) - V03.89 - 04/21/2014
- o CHICKEN POX VACCINE-VFC (90716) - V05.4 - 04/21/2014

**Medications**

- o Aerochamber Plus Flow-Vu, M Msk miscellaneous spacer  
 SIG: Use with Inhalers  
 DISP: (1) Packet with 0 refills  
 Prescribed on 04/21/2014
- o albuterol sulfate inhalation HFA aerosol inhaler 90 mcg/actuation  
 SIG: Inhale 2 puffs by Inhalation route every 4 hours as needed for cough and wheeze  
 DISP: (1) 8.5 gm canister with 5 refills  
 Refilled on 04/21/2014
- o cetirizine oral solution 5 mg/5 mL  
 SIG: take 2.5 milliliters by oral route once a day (at bedtime) for 30 days  
 DISP: (75) milliliters with 5 refills  
 Refilled on 04/21/2014
- o Flovent HFA Inhalation aerosol 110 mcg/actuation  
 SIG: Inhale 1 puff by Inhalation route 2 times a day  
 DISP: (1) 12 gm aer w/adap with 11 refills  
 Refilled on 04/21/2014
- o Aerochamber Mask Small Miscellaneous Spacer  
 SIG: Use with Inhaler  
 DISP: # 1 with 1 refills  
 Discontinued on 04/21/2014
- o permethrin Topical Cream 5 %  
 SIG: apply (thoroughly massage into skin from head to soles of feet) by topical route once leave on for 8-14 hr, then remove by thorough washing  
 DISP: (1) 60 gm jar with 1 refills  
 Discontinued on 04/27/2014

- o prednisolone Oral Solution 15 mg/5 mL  
SIG: take 3.5 milliliters by oral route 2 times a day for 5 days  
DISP: (35) milliliters with 0 refills  
Discontinued on 04/27/2014
  
- o Zantac Oral Syrup 15 mg/mL  
SIG: take 1.5 milliliters by oral route 2 times a day for 30 days  
DISP: (90) milliliters with 6 refills  
Discontinued on 04/27/2014

**Instructions**

- o Call or seek medical attention if the patient develops fever, respiratory symptoms, feeding problems, decreased urination, increased sleepiness, fussiness, or other signs of illness
- o Appropriate anticipatory guidance given
- o Handout given with age-specific care instructions and safety precautions
- o Use car seats at all times
- o Consent obtained for immunizations
- o Return for check-up in 1 year unless new concerns arise
- o Reviewed asthma care and stressed compliance with medications

**Disposition**

- o Call or Return if symptoms worsen or persist.