

McLaren Print System Order

Order No: 69313 Reprint Previous Order No: 9458
 Order Date: 2022-04-27
 User: Jannine LaDuke
 Phone: 586-228-2911

Ship Location: McLaren Clinton Township Family Medicine / Jannine
 37399 Garfield Suite 203
 Clinton Township , MI 48036

Forms

Quantity: 500
 Paragon Dept No: 71350
 Dept Name: McLaren Macomb Clinton Township Family Medicine
 Company Number: 810

Order Total Price: 0.00

Item Number: MM-34301-A
 Item Description: Pediatric Physical Examination (Infancy - 6 Month)
 Revision Date: 3/2020
 Print: 2 sided black and white
 Paper: 20# White Text
 Size: 8.5 x 11
 Fold:
 Finish:
 Drill: None
 Misc Info: ds; black & White; Bond

McLaren Medical Group
 PEDIATRIC PHYSICAL EXAMINATION
 AGE 6 Months

Date: _____ Age: _____ Administered By: _____

<p>GENERAL HISTORY: HISTORY OF PRESENT ILLNESS</p> <p>See Pediatric/Adolescent History Form/Problem List/Chief Complaint</p> <p>Review of Systems History</p> <p>History of Present Illness: _____</p> <p>Review of Systems: _____</p> <p>Immunization: <input type="checkbox"/> Up to date <input type="checkbox"/> Not up to date</p> <p>Developmental Milestones: _____</p> <p>Family History: _____</p> <p>Past Medical History: _____</p> <p>Medications: _____</p> <p>Allergies: _____</p> <p>Social History: _____</p> <p>Review of Systems: _____</p>	<p>PHYSICAL EXAMINATION</p> <p>Weight: _____ Height: _____ Head Circumference: _____</p> <p>Head: _____</p> <p>Eyes: _____</p> <p>Ears: _____</p> <p>Heart: _____</p> <p>Lungs: _____</p> <p>Abdomen: _____</p> <p>Genitalia: _____</p> <p>Rectum: _____</p> <p>Extremities: _____</p> <p>Neuro: _____</p> <p>Other: _____</p>
<p>DEVELOPMENTAL</p> <p>Motor: _____</p> <p>Language: _____</p> <p>Personal/Social: _____</p> <p>Adaptive: _____</p>	<p>ASSESSMENT</p> <p>Chief Complaint: _____</p> <p>Diagnosis: _____</p> <p>Plan: _____</p> <p>Follow-up: _____</p>

 Physician

 Date

PEDIATRIC PHYSICAL EXAMINATION (6 Months)
 Version 3.0 (2020)