

Well Child | 5 Year Visit

Accompanied By:		Preferred Language:		Date/Time:	Name:		
Weight (%):	Height (%):	BMI (%):	BP (%):	ID Number:			
Vitals (if indicated):	Temp:	HR:	Resp Rate:	SpO ₂ :	Birth Date:	Age:	Sex: M F <input type="radio"/> <input type="radio"/>

HISTORY

Concerns and Questions: NoneInterval History: NoneMedical History: Child has special health care needs.

Areas reviewed and updated as needed

 Past Medical History (See Initial History Questionnaire.) Surgical History (See Initial History Questionnaire.) Problem List (See Problem List.)Medications: None Reviewed and updated (See Medication Record.)Allergies: No known drug allergiesNutrition: Good appetite Good variety Daily fruits and vegetables: _____ Iron: Source: _____ Calcium: Source: _____ Amount: _____

Comments:

Dental Home: No Yes: _____Brushing twice daily: Yes No: _____Fluoride: In water source Oral supplement Other: _____Sugar-sweetened beverages: No YesElimination: Regular soft stools: _____Sleep: No concerns

Physical Activity:

Playtime (60 min/d): Yes No: _____

Screen time: h/d: _____

Source: _____ Quality monitored: Yes NoFamily media use plan discussed: Yes NoSchool: Grade: _____ IEP/504/behavior plan: Yes No NAPerformance: NL _____Parent/teacher concerns: NoneBehavior: No concerns

DEVELOPMENT

 = Normal development See Previsit Questionnaire.Caregiver concerns about development: None Yes: _____ SOCIAL LANGUAGE AND SELF-HELP

- Spreads with a knife
- Dresses and undresses without help
- Goes to bathroom independently
- Is dry through the day
- Plays and interacts with peers
- Answers "why" questions

 VERBAL LANGUAGE

- Tells a story of 2 sentences or more
- Follows directions for 4 individual prepositions
- Counts 5 objects
- Names 3 or more numbers
- Names 4 or more letters out of order

 GROSS MOTOR

- Is beginning to skip
- Walks on tiptoes when asked
- Catches a bounced ball with 2 hands

 FINE MOTOR

- Copies a triangle
- Draws a 6-part person
- Copies first name
- Cuts well with scissors
- Writes 2 or more letters

American Academy of Pediatrics

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The recommendations in this form do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate. Original form included as part of the *Bright Futures Tool and Resource Kit*, 2nd Edition. The American Academy of Pediatrics (AAP) does not review or endorse any modifications made to this form and in no event shall the AAP be liable for any such changes.

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SOCIAL AND FAMILY HISTORY

Areas reviewed and updated as needed (See Initial History Questionnaire.): Social History Family History

Changes since last visit: _____ No interval change

Smoking household: No Yes: _____ Firearms in home: No Yes: _____

Observation of parent-child interaction: _____

Parents working outside home: One parent Both parents After-school care: _____

REVIEW OF SYSTEMS

A 10-point review of systems was performed and results were negative except for any positive results listed below.
Bold = Focus area for this Bright Futures Visit

Constitutional: _____ **Respiratory:** _____ **Skin:** _____

Eyes: _____ **Gastrointestinal:** _____ **Neurological:** _____

Head, Ears, Nose, and Throat: _____ Genitourinary: _____ Other: _____

Cardiovascular: _____ **Musculoskeletal:** _____ Other: _____

PHYSICAL EXAMINATION

= System examined **Bold = Focus area for this Bright Futures Visit**
Normal examination findings in text. Cross out abnormalities. Describe other findings in the area provided.

General: Well-appearing child. **Normal BMI and BP for age.** _____

Head: Normocephalic and atraumatic. _____

Eyes: Pupils equal, round, and reactive to light. **Extraocular eye movements intact.** Normal fundoscopic examination findings. _____

Ears, nose, mouth, and throat: Tympanic membranes with visible light reflex bilaterally. Healthy-appearing teeth **without visible caries. No gingivitis. No malocclusion.** _____

Neck: Supple, with full range of motion and no significant adenopathy. _____

Heart: Regular rate and rhythm. No murmur. _____

Respiratory: Breath sounds clear bilaterally. Comfortable work of breathing. _____

Abdomen: Soft, with no palpable masses. _____

Genitourinary:

Normal female external genitalia. _____

Normal male external genitalia, with testes descended bilaterally. _____

Musculoskeletal: Spine straight. Full range of motion. _____

Neurological: **Normal gait. Fine motor skills appropriate for age.** _____

Skin: Warm and well perfused. No rashes or bruising. No atypical nevi or birthmarks. _____

Other comments: _____

ASSESSMENT

Well child Normal interval growth (See growth chart.) Normal BMI percentile for age Normal BP percentile for age

Age-appropriate development

ANTICIPATORY GUIDANCE

Discussed and/or handout given

SOCIAL DETERMINANTS OF HEALTH

- Neighborhood and family violence
- Food security
- Family substance use
- Emotional security and self-esteem
- Connectedness with family

DEVELOPMENT AND MENTAL HEALTH

- Family rules and routines, concern for others, and respect for others
- Patience and control over anger

SCHOOL

- Readiness, established routines, school attendance, and friends
- After-school care and activities; parent-teacher communication

PHYSICAL GROWTH AND DEVELOPMENT

- Oral health
- Nutrition
- Physical activity

SAFETY

- Car safety
- Outdoor safety
- Water safety
- Sun protection
- Harm from adults
- Home fire safety
- Gun safety

PLAN

Immunizations: Vaccine Administration Record reviewed Administered today: _____ Up-to-date for age

Universal Screening:

Hearing: Result: Unable to complete Normal hearing BL Abnormal: _____

Vision: Result: Unable to complete Normal vision for age Abnormal: _____

Oral health: Fluoride varnish applied: Yes No: _____ Oral fluoride supplementation: Yes No: _____ NA

Selective Screening (based on risk assessment) (See Previsit Questionnaire.):

Anemia Lead Oral health Tuberculosis

Comments/results:

Follow-up:

Routine follow-up at 6 years Next visit: _____ Referral to: _____

PRINT NAME.	SIGNATURE
Provider 1	
Provider 2	

*Consistent with **Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents, 4th Edition***