

Pediatric Assessment

Name:		Date of Birth:	
Gender:	Male	Female	Other:
Parent / Guardian Contact:		Emergency Contact:	

Chief Complaint

Brief description of the reason for the visit:

Medical History

Prenatal History:

Maternal health during pregnancy:

Complications or medications during pregnancy:

Birth History:

Gestational age, type of delivery, birth weight:

Any complications during birth:

Neonatal History:

Neonatal intensive care unit (NICU) admission, if any:

Past Medical History:

Chronic illnesses, surgeries, hospitalizations:

Allergies and medications:

Immunization History:

Up-to-date or missed vaccinations:

Developmental History

Milestones:

Achievements in motor, cognitive, social, and language development:

Any concerns regarding developmental delays:

Education / Daycare:

Current educational setting:

Interaction with peers and teachers:

Family History

Medical conditions in immediate family members:

Genetic conditions or hereditary diseases:

Social History

Living environment and conditions:

Support system withing the family:

Dietary habits and nutrition:

Exposure to tobacco smoke, alcohol, or recreational drugs in the household:

Review of Systems

Head-to-toe assessment of symptoms or issues:

Growth and weight gain:

Sleep patterns:

Bowel and bladder habits:

Feeding patterns and diet:

Physical Examination

Vital Signs:

Heart rate, respiratory rate, blood pressure, temperature:

General Appearance:

Alertness, responsiveness, and overall demeanor:

Growth Parameters:

Height, weight, head circumference (for infants):

Head and Neck:

Fontanelle assessment (for infants):

Eyes, ears, nose, throat examination:

Cardiovascular:

Heart sounds, pulses:

Respiratory:

Lung sounds, respiratory effort:

Abdomen:

Inspection, auscultation, palpation:

Neurological:

Reflexes, muscle tone, coordination:

Skin:

Rashes, lesions, birthmarks:

Assessment and Plan

Summary of Findings:

Diagnosis (if applicable):

Recommended interventions, treatments, or referrals:

Follow-up Plan:

Parent / Guardian Education

Follow-up Appointment