

Pocket Peds H&P Card

CC: "quote from historian"

ID: Identify info, reason for admit from MD perspective

Historian: (reliability, vague?)

Referring MD: _____ Phone #

HPI: This is a ___yo (m/f) in USGH until X days prior to admission when.... 2 day PTA.... Day PTA.... pertinent (+/-)...b/c of ___ pt admitted to 4NE to...)

or birthHx: Pt was ___lb product of a ___wk gestation born by NSVD (C-section for ___) to a ___yo G~~X~~P~~X~~Ab~~X~~ following an uncomplicated pregnancy w/Apgars of ___/___

- PMHx:**
1. Hosp/illness
 2. SurgHx
 3. Meds -- mg PO/IV BID (x mg/kg/day)
 4. Allergies
 5. Immunization IUTD (Hep B?, varicella?)
 6. Birth Hx- as above, unremarkable
 7. Development- failure to thrive, abuse, Gross Motor, Fine motor, language, problem solving **A/P:**
 8. Feeding Hx
 9. Menstrual Hx

FamHx: Fam Tree

SHx: Live with? Parents profession, smoker, (esp. when abuse, failure to thrive)

ROS: Difficulty seeing/hearing, pain, easy bruising? "non contributory except for..."

- PE:**
- 1) General: Interactive, active, happy, smiling, well appearing
-> irritable but consolable -> irritable and unconsolable
-> toxic (mental status changes, perfusion changes)
 - 2) Vitals: Temp, HR, RR, BP
 - 3) Growth ^{Wt} (%), Ht(%), Head circ if < 3yo (%)
[present as 50th %ile of X age when hugely above/below nl]

HEENT H: NCAT, A/F 1x1cm (ant. Fontanelle)
E: PERRL(A), EOMI, conjunctiva moist, RR++
E: TM movement- clear and mobile
N: Polyps, discharge
T: erythema, exudate, moist, tooth develop
 (20 baby teeth – 1st at 6month, then 1/month)

Neck: soft, supple, LAD, thyromegaly?

Chest: symmetric, CTA, retractions?

CV: RRR, nl S1S2 without m.r.g, femoral pulse full and equal

Abd: ND, BS+, NT, -masses, -organomegaly

GU: nl ext genitalia, descended testes?

Back: CVA tenderness? Scoliosis?

Ext: c/c/e

Skin: rash, birthmarks, perfusion

Neuro: Grossly intact *or*

Mental status-alert, motor-tone, bulk, mass, sensory-touch, pain, vibration, proprioception, cerebellar-tremor, DTR

Development: gross/fine motor, language, problem solving

LABS/STUDIES:

Problem #1, 2, 3

A.1) What do you think is causing problem

2) Why? –consistent, inconsistent features w/ HPI, PMHx, PE, LABs

3) Differential

P. 1) What are you going to do? W/U

2) Tx further

Congenital

Infectious

Neoplastic

Vascular/Anatomic

Metabolic

Idiopathic/Iatrogenic

Toxic