

24 MONTH WCC

Pt Name : _____ **DOB:** _____ **DOS:** _____

WT: _____ kg HT: _____ cm FOC: _____
 T: _____ °F P: _____ RR: _____
 B/P: _____/_____ O₂: _____% Allergies: _____

Accompanied By : _____ Current Meds: _____

HISTORY OF PRESENT ILLNESS:

Diet: _____ Elimination: _____

Sleep: _____ Vision: _____

Hearing: Uses voice to communicate Y N
 Can get familiar objects if asked (shoes, toys, etc) Y N

Concerns: _____

REVIEW OF SYSTEMS: *Circled = negative, except as noted below*

Cons Eyes ENMT CV Resp Gastro G/U Skel
 Integumentary Neuro Psych Endo Hema/Lymp Allergy/Imm

PAST MED, FAMILY & SOCIAL HX:

Immunizations: UTD: Y N

Major Illnesses: _____

Hospitalizations: _____

Surgeries: _____

Family HX: CA, HTN, Asthma, Allergies, DM, CV any, CV < 55, Sz

Social HX: Total in Household: _____

Lives with: Mother Father Siblings: _____ Aunt Uncle
 Grandmother Grandfather Cousins

Water: City Well Bottled Pets: Dog/Cat Reptiles Bird

Smokers: Y N Poultry Farm

Developmental Milestones

Parent Report	Pass	Fail	PS: Personal/Social GM: Gross Motor	Lang: Language FM: Fine Motor	% Passing
			PS: Feeds doll		90
			PS: Removes Garment		90
			PS: Uses spoon well, spills little		100
			PS: Washes and Dries hands		50
			FM: Makes a tower (4 cubes)		90
			FM: Makes a tower (6 cubes)		75
			Lang: Says 50 single words		100
			Lang: Uses pronouns		100
			Lang: Names one picture		75
			Lang: Speech half understandable		75
			Lang: Combines 2 diff. words		90
			Lang: Points to 6 of 8 body parts		75
			GM: Walks up steps w/o help		100
			GM: Throws ball overhand		50-75
			GM: Runs well		100
			GM: Kicks ball forward		100

