

# PEDIATRIC PHYSICAL EXAM 2-6 yrs

Date: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

HT: \_\_\_\_\_ Wgt: \_\_\_\_\_ BMI: \_\_\_\_\_ % B/P: \_\_\_\_\_ Pulse \_\_\_\_\_ Temp: \_\_\_\_\_ Resp: \_\_\_\_\_

Visual Acuity ( <i>with correction, if applicable</i> ) OS _____ / _____ OD _____ / _____ OU _____ / _____	Hearing Evaluation    Right: _____ Left: _____
---	---

Fluoride Supplementation (if inadequate community water fluoridation) \_\_\_\_\_

Allergies (*with reaction if applicable*) \_\_\_\_\_ NKA \_\_\_\_\_

Current Medications \_\_\_\_\_

**Interval Medical History (*Concerns, Illness, Diet, Social, Accidents*)**

---

**Counseling\* (check if discussed)**

<input type="checkbox"/> Developmental ( <i>check (%) activities on back of form</i> ) <input type="checkbox"/> Good parenting practices <input type="checkbox"/> Safety (car seat, poisons, pools, matches etc.) <input type="checkbox"/> Diet education with parent ( <i>review BMI</i> ) <input type="checkbox"/> Solar skin protection	<input type="checkbox"/> Behavioral counseling ( <i>social, behavior</i> ) <input type="checkbox"/> Violence prevention education <input type="checkbox"/> Exercise promotion; limit media to less than 2 hr/da <input type="checkbox"/> Dental care assessment/visit recommendation <input type="checkbox"/> Reading promotion
--	---

Immunizations*	Laboratory Screening*
* DtaP & IPV x 1 between ages 4 - 6 * MMR ( <i>2nd dose prior to school entry age 4-6y</i> ) * HBV series ( <i>if not previously given</i> ) * Varicella or documentation of disease * <b>HIGH RISK</b> * MPSV 4 – age 2-6 years, high risk * PCV if not previously given or no documentation of disease * PPV – age 2-6 years.	Lead level at age 24 months as required by law. Urinalysis for all patients at age 5. <i>High Risk</i> * Hgb or Hct yearly until age 5 then every other year * Urinalysis yearly from age 3

Physical Exam	N = Normal
General: _____ Abuse: _____	Lungs: _____
Skin: _____	Heart: _____
Lymph Nodes: _____	Abdomen: _____
Head & Neck: _____	Genitalia: _____
Eyes _____	Back/Spine: _____
Ears: _____	Extremities: _____
Nose: _____	Pulses: _____
Mouth/Teeth: _____	Neurological: _____
Throat: _____	

Date: \_\_\_\_\_ Name: \_\_\_\_\_ DOB: \_\_\_\_\_

**Development**

- 2 Years**
- Speaks in phrases, sentences
  - Speech intelligible to parents
  - Refers to self by name
  - Uses pronouns (I, me, you)
  - Frequently asks, "What's that?"
  - Pedals tricycle
  - Graphics, scribbles, lines
  - Interested in potty training
  - Stacks 5 -6 blocks, aligns 2 - 3 blocks
  - Jumps, runs
  - Simple puzzles

- 3 Years**
- Jumps in place, kicks a ball
  - Pedals a tricycle
  - Feeds self
  - Alternates feet when going up stairs
  - Balances and stands briefly on 1 foot
  - Builds a tower of nine cubes
  - Intelligible speech to strangers
  - Has formed gender identification
  - Copies a circle, may imitate a cross
  - Describes action in picture books
  - Puts on some clothing and shoes

- 4 Years**
- Alternates feet when descending stairs
  - Can stand on one foot for 3 - 5 seconds
  - Rides a tricycle
  - Can walk on tiptoes
  - Holds and uses pencil with good control
  - May name 3 or 4 primary colors
  - Counts from 1 to 5, can sing a song
  - Dresses and undresses with supervision (except for laces and buttons)
  - Copies a cross and a circle
  - Draws a person with 2 – 3 body parts
  - Plays cooperatively

- 5 Years**
- Skips, walks on tiptoes, broad jumps
  - Can cut and paste
  - Names 4 or 5 colors and can identify coins
  - Balances and stands on one foot
  - Dresses and undresses without supervision
  - Copies a triangle from an illustration
  - Recognizes most letters of the alphabet
  - Draws a person with a head, body, arms and legs
  - Plays cooperatively
  - Knows name, age and sex
  - Begins to understand right and wrong
  - Beginning to identify colors
  - Engages in domestic role-playing

- 6 Years**
- Bounces a ball 4 - 6 times, throws & catches
  - Skates
  - Rides a bicycle
  - Ties shoelaces
  - Counts to 10
  - Prints first name, numbers to 10
  - Knows right from left
  - Draws a person with 6 body parts, wearing clothes

*American Academy of Pediatrics  
Guidelines for Health Supervision II, Second Edition 1988*

<b>Comments:</b>	<b>Plan:</b>
<b>Follow-up:</b> _____ weeks _____ months _____ PRN	<b>Provider:</b>