Mock Patient Report – Test Patient Data Only

Charlotte	DOB: **12/21/2012**	Age: **0**	Gender: **F**
Unit #: **999110813001**	Provider:		**11/07/2013**

INTAKE DATE	**11/07/2013**	LAST RISK ASSESSMENT DATE	**11/07/2013**
NAME	**Charlotte**	WHO COMPLETED QUESTIONNAIRE	**Parent/Guardian**
ID #	**999110813001**	Parental Infertility Treatment	**No**
ADOPTED	**No**	Parental Infertility Treatment Type	

PATIENT/FAMILY MOST IMPORTANT CONCERN:
Feeding

GENETIC AND FAMILY HISTORY CLINICAL DECISION SUPPORT

CONSIDERATIONS FOR THE PATIENT		
ACTION	SYNDROME/CONDITION	REASON
Assess family for Fragile X syndrome. Consider referral for affected individual(s) for comprehensive evaluation and familial risk assessment (genetics/developmental peds/neurology).	Fragile X syndrome	Patient has multiple maternal family members with developmental delay, intellectual disability, learning disability or special education, and/or autism.
Screen patient for autism spectrum disorder (ASD). Assess family for inherited form of ASD and intellectual disability. Consider referral for affected individual(s) for comprehensive evaluation and familial risk assessment (genetics/developmental peds/neurology).	Autism spectrum disorder	Patient has multiple family members with ASD and intellectual disability.
Screen patient for developmental delay or intellectual disability. Assess family for inherited form of ASD and intellectual disability. Consider referral for affected individual(s) for comprehensive evaluation and familial risk assessment (genetics/developmental peds/neurology).	Developmental delay or intellectual disability	Patient has multiple family members with ASD and intellectual disability.
Counsel the parents about the benefits of breastfeeding because of the child's increased risk of atopy.	Atopic conditions	Patient is less than 1 year old and has a family history of atopic disease.
Early and more frequent hearing assessments. Refer for audiologic assessment at least once by 24 to 30 months of age. Consider referral of affected individual to medical geneticist to determine if there is a genetic etiology and if the condition is isolated or part of a syndrome.	Hearing loss	Patient is less than 3 years of age and has family history of hearing loss in at least one first degree relative.

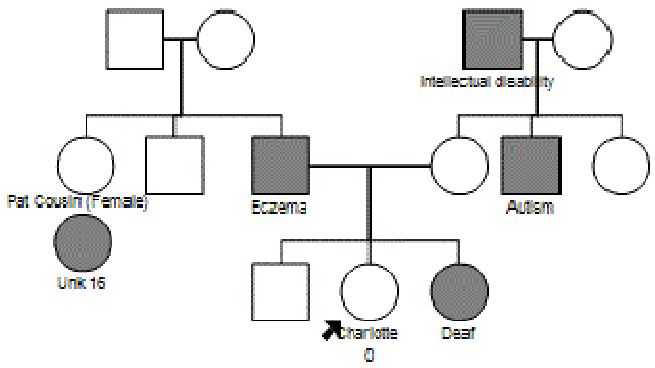
POSITIVE PERSONAL and/or FAMILY HEALTH HISTORY

Condition	+/- PHH	+/- FHH	Management/Details	Family Member
Eczema	-	+		Father
Intellectual disability	-	+		Maternal Grandfather
Deafness or early onset hearing loss	-	+		Sister
Autism spectrum disorder	-	+		Maternal Uncle

The recommendations in this publication 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.

Condition	+/- PHH	+/- FHH	Management/Details	Family Member
Neurofibromatosis	-	+	age 16	Paternal Cousin (Female)

OTHER FAMILIAL CONDITION
Neurofibromatosis



NEGATIVE PERSONAL and FAMILY HEALTH HISTORY

Condition	+/- PHH	+/- FHH	Management/Details	Family Member
Abnormal or positive newborn screening result	-	-		
Alcoholism or drug addiction	-	-		
Allergies	-	-		
Anxiety disorder	-	-		
Asthma	-	-		
Attention deficit or hyperactivity	-	-		
Bipolar disorder (manic depression)	-	-		
Bleeding disorder	-	-		
Born with a heart defect (e.g. hole in the heart)	-	-		

Condition	+/- PHH	+/- FHH	Management/Details	Family Member
Born with a hip defect or dislocated hip	-	-		
Born with a kidney defect or disease	-	-		
Cancer	-	-		
Celiac disease	-	-		
Coronary artery disease (Atherosclerosis)	-	-		
Cystic fibrosis	-	-		
Depression	-	-		
Developmental delay	-	-		
Diabetes	-	-		
Fragile X syndrome	-	-		
Heart attack	-	-		
High blood pressure	-	-		
High cholesterol	-	-		
Inflammatory bowel disease or Crohn's disease	-	-		
Learning disability or special education	-	-		
Schizophrenia	-	-		
Seizures	-	-		
Stroke	-	-		
Sudden infant death syndrome (SIDS) or crib death	-	-		
Sudden, unexplained death	-	-		
Suicide	-	-		
Thyroid disease	-	-		