

Pediatric Sick Visit Note

The acute visit, with the weight-based dosing record and the modifier 25 boundary for a problem found at a well visit.

Patient / MRN / DOB	
Age on date of service	___ y ___ mo · drives the code band · new / established patient · date _____
Accompanied by	Name _____ · relationship _____ · custody or consent issues noted Y / N
Dosing weight	Weight _____ kg (used for all calculations) · allergies _____

S Subjective

Chief complaint · HPI · who is reporting

Chief complaint	
HPI	Onset, duration, severity, associated symptoms, course, what has been tried
Intake, output, exposures	Oral intake · wet diapers or voids in 24 h · vomiting or diarrhea · immunizations up to date Y / N · sick contacts, daycare or school

O Objective

Vitals	T _____ (route _____) · HR _____ · RR _____ · BP _____ · SpO2 _____ · weight _____ kg (___%ile)
Exam	General appearance and hydration status first, then focused exam
Point of care testing	Test _____ · result _____ · CPT _____

A Assessment

Problem 1	Dx (ICD-10) _____ · severity · reasoning
Problem 2	Dx (ICD-10) _____ · severity · reasoning

P Plan

Medication	Drug _____ · mg/kg/dose _____ · calculated dose _____ · route _____ · frequency _____ · duration _____
Return precautions	Given to caregiver Y / N · specific warning signs documented
Follow-up and school note	Interval _____ · note provided Y / N

E Attestation

Attestation	Clinician signature _____ · name and credentials _____ · date and time signed _____ · supervising clinician if required _____
-------------	---

When this is billable alongside a well visit. An **insignificant or trivial** problem found during a preventive visit is **not** separately reportable. To bill a problem E/M the same day as a well-child visit, the problem needs its own chief complaint, history, relevant exam, and medical decision making, with **modifier 25** on the E/M. Level is selected on either **total time on the date of the encounter** or **medical decision making**, never both: 99202 to 99205 new, 99212 to 99215 established.

A template still means you write the note. Sully's AI Scribe captures the visit and writes it into your EHR, the AI Coder submits the coded claim, and the AI Receptionist books the follow-up, on one integration across Epic, Cerner, Meditech, and Athenahealth.

sully.ai