

Preventive Care for Ages 18 to 24 years The Greig Health Record for Young Adults

Name: _____
Date of Birth: _____

(this page is for recording preventive care manoeuvres when they are performed, at any patient visit)

		Age	Age	Age	Age
Date					
Measurements	Wt				
	BMI				
	Ht				
	BMI percentile				
Psychosocial history	• Employment, Education & Finances				
	• Peer relationships				
	• Family relationships				
	• Strengths & Goals				
	• Mental Health				
	• Sexual Health, Relationships & Safety				
	• Abuse and Bullying				
Nutrition	• Healthy choices / snacks / junk-food				
	• Supplements / CAM				
	• Body Image / Dieting				
Education & Advice: Behaviour	• Physical Activity				
	• Electronic Media & Communication/Hearing Protection				
	• Sleep Issues				
Injury Prevention & Safety	• Helmet safety				
	• Vehicle Safety & Seatbelts				
	• Workplace				
	• <i>Sun Safety</i>				
	• Environmental Hazards – incl. Second Hand Smoke				
Other	• <i>Smoke Detectors</i>				
	• Other Safety Topics				
	• Substances and Addictions				
	• Dental care, fluoride				
Specific Concerns					
Examination	Blood Pressure				
	Head & Neck				
	Visual Acuity (L)				
	(R)				
	CVS				
	Chest				
	Back				
	Abd				
GU					
Skin					
Assessment Immunization Medications	Up-date immunizations				
	Discuss influenza vaccination				
	Signature				

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