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Mark  for interventions addressed initial bottom of form.

Date A Date 1 Date 2 Date 3 Date 4 Date 5

Notes: Start note with # A, 1, 2, 3, 4, or 5  
Indicate visit date. For additional space, use P.N.

**MCM See Referrals below** See progress notes (circle visit #) **A 1 2 3 4 5**

See Teaching Checklist  
\*2 topics each visit

Client Service Plan Reviewed  
\*required each visit

**Family Planning** See progress notes (circle visit #) **A 1 2 3 4 5**  
See health hx update (circle visit #) **A 1 2 3 4 5**

Counseling

Clinical Service  
(BCM, Pg test, Plan B)

**TCM See Referrals below** See progress notes (circle visit #) **A 1 2 3 4 5**

Monitoring & Follow-up

Advocacy

**Referrals** See progress notes (circle visit #) **A 1 2 3 4 5**  
Write name of referral below. Mark and R on date referred and outcome code from list on date of follow-up.

**Other interventions** Write name of intervention below. See progress notes (circle visit #) **A 1 2 3 4 5**

**Initials:**

Closing only:  
original signature on copies \_\_\_\_\_

Client Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Medical Record ID \_\_\_\_\_

Client Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Medical Record ID \_\_\_\_\_

Client Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Medical Record ID \_\_\_\_\_

## REFERRAL CODES

|                                   |                                |  |
|-----------------------------------|--------------------------------|--|
| EF01 Audiology                    | EF25 Hospital                  | EF52 Prenatal Care                     |
| EF03 CaCoon                       | EF26 Housing                   | EF53 Primary Medical provider          |
| EF04 Child Care                   | EF28 Immigration Services      | EF54 Public Transportation             |
| EF05 Childbirth Ed                | EF29 Immunization              | EF55 Relief Nursery                    |
| EF06 Dental                       | EF27 Indian Health Service     | EF56 Respite Care                      |
| EF07 Dev Disabilities             | EF30 Infant Care Class         | EF57 SafeNet                           |
| EF08 DHS Child Welfare            | EF32 La Leche League           | EF58 School-Based Health Center        |
| EF21 Early Health Star/Head Start | EF33 Lactation Consultant      | EF59 Section 8/ HUD Housing            |
| EF09 EI/Special Ed                | EF34 Lead Program              | EF60 Shelter                           |
| EF10 Employment Assistance        | EF35 Legal Aid                 | EF61 Smoking/Tobacco Cessation         |
| EF11 Energy Assistance            | EF36 Literacy (Adult Ed)       | EF62 Speech                            |
| EF12 ESL                          | EF39 Medicaid/OHP              | EF64 STD Counseling/Testing/tx         |
| EF13 Faith-Based Org              | EF40 Medicaid Transport        | EF65 Substance Abuse tx                |
| EF14 Family Planning              | EF41 Mental Health Counseling  | EF63 Supplemental Security In-<br>come |
| EF31 Family Violence Assistance   | EF42 Mental Health Crisis Line | EF66 Support Group                     |
| EF15 Feeding Evaluation           | EF43 Metabolic Screening       | EF68 Teen Parent School                |
| EF16 Food Bank                    | EF45 Nursing Mother's Council  | EF67 TANF                              |
| EF17 Food Stamps                  | EF46 Nutrition Counseling      | EF69 Vision                            |
| EF19 GED                          | EF47 Occupational Therapy      | EF71 Volunteer/Mentor                  |
| EF20 Genetic Counseling           | EF37 Other County Health Dept  | EF73 Well Child Care                   |
| EF22 Health Education Classes     | EF48 Other Referral            | EF74 WIC Program                       |
| EF23 Healthy Start                | EF49 Parenting Class           | EF75 Young Parent Program              |
| EF24 High School                  | EF50 Physical Therapy          |  |
|                                   | EF51 Planned Parenthood        |  |

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## Referral Outcome Codes

GS=Getting Services

DS=Denied Services

NF=Client did not follow-up

NQ=Client does not qualify

IP=In process

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## Other Intervention Codes *Bolded items are specific assessments or curriculum*

### Standing Orders as per MCHD

#### Medical Director:

1. All Options Counseling  
AGN.01.34
2. Plan B - AGN.12.22
3. Pregnancy Testing  
CHS.07.09
4. Start Hormonal Contraception  
CHS.07.11
5. Fetal Doppler CHS.08.02
6. Thrush: Breastfeeding Mom  
CHS.12.15
7. Thrush: Infant AGN.12.16
8. Fluoride Varnish  
CHS.07.08
9. Fluoride Supplement Rx  
AGN.12.17

#### Breastfeeding Support

10. Breastfeeding assistance
11. Lactation counseling

#### Social Support (includes all below)

12. Support
13. Active listening
14. Presence

15. Modeling
  16. Praise
  17. Reassurance
  18. Anticipatory guidance
- #### Nurse Family Partnership
19. Infant Health Care (6m)
  20. Infant Health Care (12m)
  21. Infant Health Care (18m)
  22. Infant Health Care (24m)
  23. NFP materials given/discussed
  - 24. PIPE Curriculum**

#### Other

- 25. 5A's**
- 26. Edinburgh Post Partum  
Depression Scale**
- 27. PHQ-9 Depression Scale**
- 28. Home Violence Screening  
Questionnaire**
29. Nutritional monitoring
30. Behavior change
31. Motivational interviewing
32. Skill development
33. Developmental enhancement
34. Attachment promotion

35. Consultation with agency
36. Collaboration with agency
37. Order medical records
38. Review of medical records
39. Research
40. Order basic goods
41. Deliver basic goods
42. Letter to agency
43. Letter to client
44. TC to agency
45. TC to client
46. Email to agency
47. Fax to agency
- 48. Raising a Reader**

#### CaCoon

49. Health system guidance
50. Basic needs support
51. Normalization promotion
52. Parenting promotion
53. Child health assessment
54. Family assessment
55. Pain assessment