

Required	Family History (CSH-4)
Form attached is optional, but collection of information is somewhere in the chart	<p>Purpose: To identify family condition/problems which may impact the child's health.</p> <p>To document the child's health history.</p> <p>To establish a database.</p> <p>Evaluate the client/family needs for referral to other health care providers, agencies, services or programs.</p> <p>Completed by: The family or care giver and reviewed by the PHN Care Coordinator</p> <p>When: During the assessment process</p> <p>Retention: Original in the file</p> <p>Updated: As needed</p>