

Chart from an appointment

Create a clinical note directly from a client's booked appointment, use a reusable template or structured assessment, and recognize when the chart is complete.

1

Open Charting

Work from the appointment page so the note stays connected to the visit.

2

Capture the visit

Start free text, choose a template, or add a structured assessment.

3

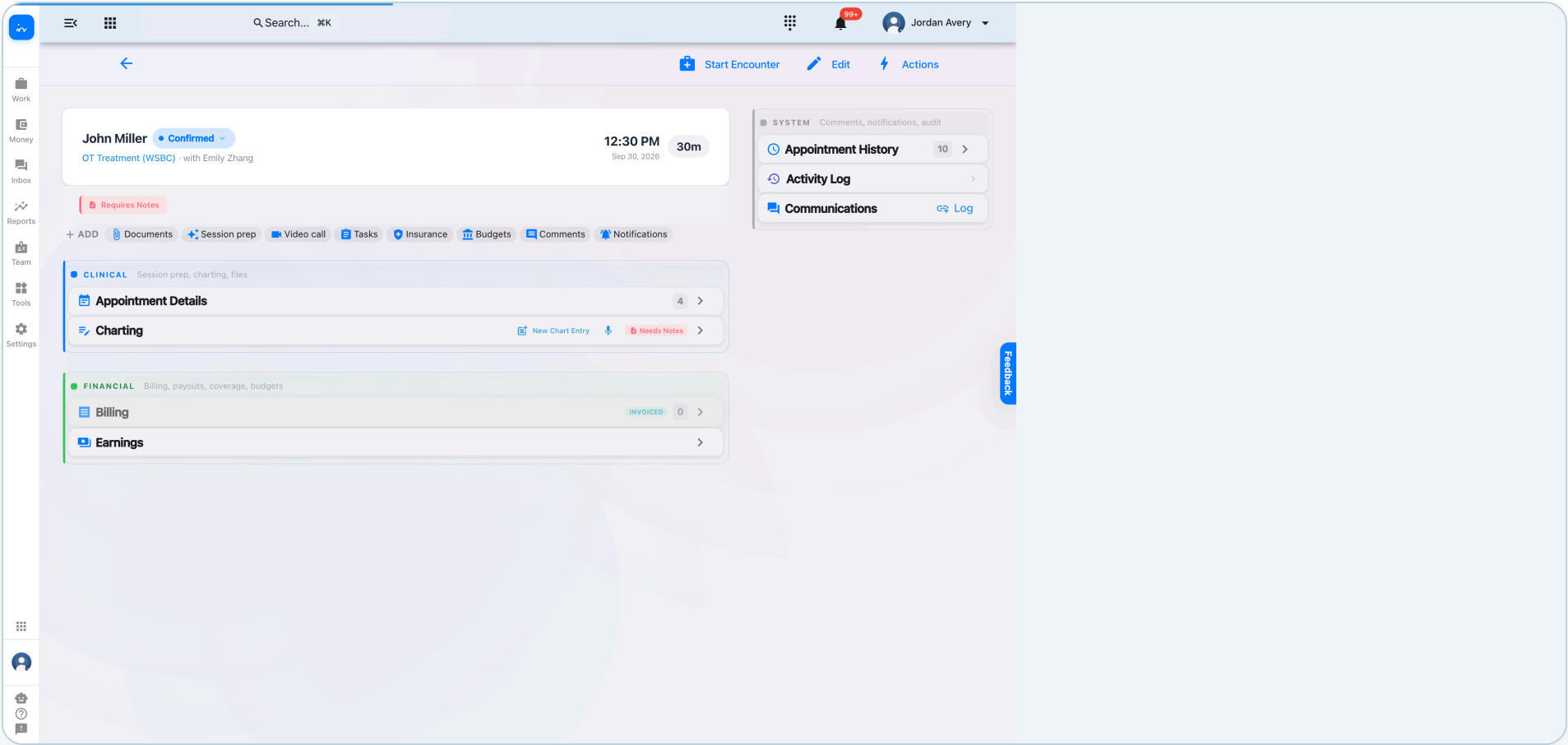
Finish deliberately

Save work in progress, or sign when the note is ready to finalize.

Before you begin

Open a booked appointment you are allowed to view and update. Your clinic's service configuration determines whether a note and signature are required.

Start in the appointment's Charting section



Check the requirement

A red *Requires Notes* badge identifies unfinished charting for this visit.

Stay on the booking

The Charting section keeps the new entry connected to the selected appointment.

Choose New Chart Entry

This opens the available starting points for the note.

Example occupational therapy appointment.

Write a note and keep prior context in view

The screenshot displays the 'Charting' interface. At the top, there's a header with 'Charting' and buttons for 'New Chart Entry', a microphone icon, and 'Needs Notes'. Below this is a rich text editor with a toolbar containing bold, italic, underline, bulleted list, numbered list, link, unlink, and a 'SAVE' button. The editor area has a placeholder text: 'Enter clinical observations, treatment details, or other professional notes...'. Below the editor is a section titled 'NOTE HISTORY' which lists three previous entries:

- SEP 28, 2026**
OT Treatment (WSBC)
S: Client presents for initial evaluation. Primary concerns discussed. Goals reviewed. **O:** Alert, oriented x3. Vi...
[Show more]
- JUN 8, 2025**
Standard Treatment
Settling.
- FEB 8, 2025**
Standard Treatment
New myofascial flare.

At the bottom of the history section is a 'LOAD MORE' link. Below the history is a 'Recordings' section with a microphone icon and an upward arrow. At the very bottom is a 'Post-Injury Rehabilitation' section with an 'Active' status and a count of '10'.

The editor and earlier entries appear together in the Charting section.

For an ad hoc note

1. Select **New Chart Entry**.
2. Choose **Free-text note**.
3. Enter the clinically relevant details.
4. Review before choosing a save action.

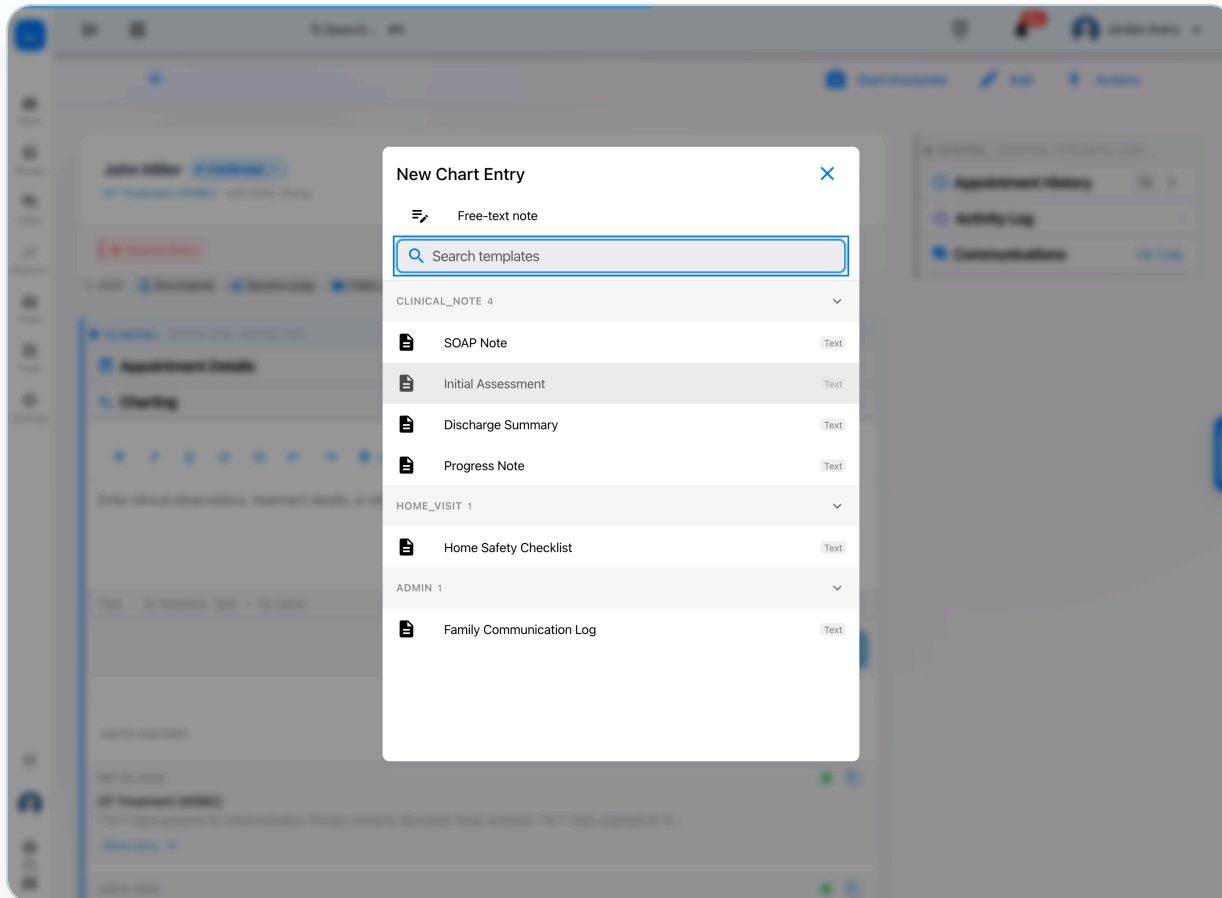
Use the history carefully

Earlier chart entries can provide context. Their completion icons belong to those earlier notes—not automatically to the appointment you are charting now.

Voice note

A microphone control may be available. Follow your clinic's consent and privacy process whenever voice notes are used.

Start from a chart template



Choose a template

1. Select **New Chart Entry**.
2. Search by name, or browse the categories.
3. Select the template that matches the visit.
4. Review and personalize the inserted text.

Examples shown

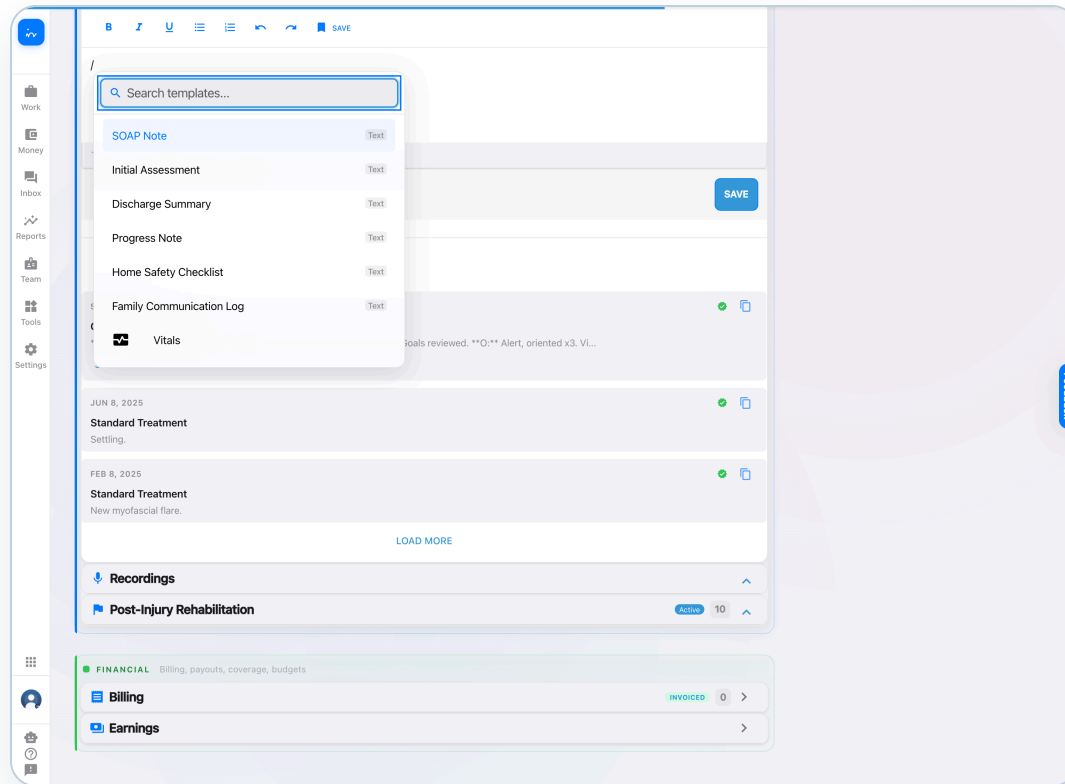
SOAP Note, Initial Assessment, Discharge Summary, Progress Note, Home Safety Checklist, and Family Communication Log.

Your clinic's available templates may differ.

Template ≠ finished note

A template gives you a consistent starting structure. Confirm every section reflects the current visit before saving or signing.

Insert an assessment from the editor



Example: the Pain assessment opens structured fields inside the chart.

Type **/** in the editor to open the insertion menu.

Open the menu

Place the cursor in the note and type **/**.

Pick the right tool

Options observed include vitals, pain, body chart, symptoms, treatment methods, photos, and goal progress.

Complete the fields

Enter only the observations relevant to this visit, then review the complete chart.

Choose the save action that matches your intent

The screenshot shows the 'Charting' interface. At the top, there's a header with 'New Chart Entry', a microphone icon, and two status indicators: 'Needs Notes' (red) and 'Needs Signature' (red). Below the header is a toolbar with icons for 'B' (bold), 'I' (italic), 'U' (underline), list icons, and a 'SAVE' button. A text input field is present with a placeholder 'Type / for templates · Type @ for tokens'. Below this is a question: 'Do you want to sign the note when the booking is saved?'. There are two buttons: a green 'SIGN & SAVE' button with a checkmark icon and a blue 'SAVE' button. Below these is a 'NOTE HISTORY' section with tabs for 'All' (selected) and 'Communication'. It lists two notes from September 2026, both categorized as 'Communication/ Correspondence'. The first note is dated SEP 30, 2026, and the second is dated SEP 25, 2026. Each note has a 'Show more' link. At the bottom of the note history is a 'LOAD MORE' link. Below the note history is a 'Recordings' section with a microphone icon and an upward arrow. At the very bottom is a 'Post-MVA Rehabilitation' section with a flag icon, an 'Active' status, and a count of '12' with an upward arrow.

Read the status first

Needs Notes and Needs Signature

identify what remains for this appointment.

Save

Use the separate save action when the entry is not ready to be finalized with a signature.

Sign & Save

Use this when the note is complete and ready to be finalized for a signature-required service.

Pause before signing

Confirm the visit, client, author, date, and content. A signed entry is locked in the appointment chart.

Recognize a signed chart entry

Charting

S: Client reports achieving personal goals. Independent with ADLs. **O:** ROM full. Strength 5/5. Functional gait. **A:** Goals met. Ready for discharge. **P:** Independent home program reviewed. As-needed follow-up discussed.

NOTE HISTORY

✓ All

Communication

SEP 25, 2026

✓

Communication/ Correspondence

S: Client reports improvement since last session. No new complaints. **O:** Performed therapeutic exercises as per p...

Show more

LOAD MORE

Recordings

Post-MVA Rehabilitation

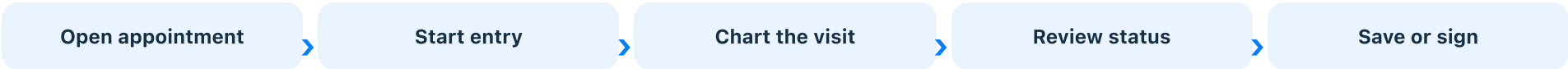
Active 12

Completion cues

- The signed chart entry is locked from further editing.
- A green completion icon appears with the history item.
- The appointment no longer shows the note/signature requirements for that completed entry.

If a requirement remains

Return to the appointment’s Charting section and review the status labels. Check the current visit’s own status labels instead of relying on completion icons from older history items.



Use the right workspace for the job

This guide covers charting from one regular allied-health appointment. These adjacent tools support different work patterns.

HIGH-VOLUME WORK

Bulk Notes Entry

Use the dedicated Notes tool when completing multiple outstanding notes in one focused queue.

DISTRACTION-FREE

Focus Mode → Notes

Use Focus Mode when you want a streamlined list of unfinished notes without the rest of the appointment page.

SIGNING SETUP

Digital Signature

Set up your saved signature before you need to finalize signature-required notes.

DIFFERENT WORKFLOW

Encounter workspace

Use your clinic's encounter workflow when the visit is being documented as an encounter. That workflow is intentionally outside this appointment-charting guide.

Quick reference

Appointment page → Charting → New Chart Entry

Choose free text or a reusable template. Type for structured observations. Review the appointment's remaining requirements before choosing Save or Sign & Save.

When controls differ

Available chart controls can vary by role and by the service's note and signature settings. If a control is missing, ask your InToday administrator to review the appointment setup with you.