

Review of Systems			
<b>Constitutional</b>	no	yes	
Weight loss			
Fevers			
Chills			
Night sweats			
Fatigue			
Other:			
<b>Eyes</b>	no	yes	
Blurry vision			
Eye pain			
Discharge			
Dry eyes			
Decreased vision			
Other:			
<b>Ears/Nose/Throat</b>	no	yes	
Sore throat			
Tinnitus			
Bloody nose			
Hearing loss			
Sinusitis			
Other:			
<b>Respiratory</b>	no	yes	
Short of breath			
Cough			
Hemoptysis			
Wheezing			
Pleurisy			
Other:			
<b>Cardiovascular</b>	no	yes	
Chest pain			
PND			
Palpitations			
Edema			
Orthopnea			
Syncope			
Other:			
<b>Gastrointestinal</b>	no	yes	
Nausea			
Vomiting			
Diarrhea			
Hematemesis			
Melena			
Other:			
<b>Genitourinary</b>	no	yes	
Hematuria			
Dysuria			
Hesitancy			
Incontinence			
UTIs			
Other:			

Patient: Richard Hayes Date: 11/23/09

**New Office Patient**

3 out of 3 Key Components Required				
E/M	Hx	Exam	MDM	Time
99201	PF	PF	SF	10
99202	EPF	EPF	SF	20
99203	Det	Det	Low	30
99204	Comp	Comp	Mod	45
99205	Comp	Comp	High	60

Chief Complaint: Establish Care

HPI **Brief:** 1 - 3 HPI elements\* **Extended:** 4 HPI elements\* or status of 3 problems

76 YOWF is stable NIDDM on metformin as well as CAD. 9/1 CABG in 2007. Also ↑ chol which has been well controlled on statin. Here to establish care.

\*HPI Elements: Location, Quality, Timing, Severity, Duration, Context, Modifying Factors, Associated Signs and Symptoms

**Pertinent Past Medical, Family and Social History**

PMH: HTN, GOUT, CKD, GERD  
 FH: MD died @ 82 yrs; DAD @ 72 MT. No kids  
 SH: Retired seamstress; mild etoh

**Level of History Documented**

Problem Focused: Brief HPI, no ROS/PFSH  EPF: Brief HPI, 1 ROS, no PFSH   
 Detailed: Ext HPI, 2 - 9 ROS, 1/3 PFSH  Comp: Ext HPI, 10 ROS, 3/3 PFSH

**Data Reviewed**

137/101/12  
 5.0 24 1.9  $\times \frac{112}{33}$  PCR = 93 mg/10  
 LDL = 90 HgA1c 8.4

**Data Points**

Review and/or order labs	Review and/or order X-rays	Review and/or order medical test (PFTs, EKG, echo, cath)	Discuss test with MID	Review any image, tracing, specimen	Order old records	Summarize old records
1 <input checked="" type="checkbox"/>	1 <input type="checkbox"/>	1 <input checked="" type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input checked="" type="checkbox"/>	2 <input type="checkbox"/>

Physical Exam			Abnormal Findings
<b>CONSTITUTIONAL</b>	yes	no	
Record three vital signs			
128/72, 62, 98.0	<input checked="" type="checkbox"/>		
Conversant/NAD	<input checked="" type="checkbox"/>		
<b>EYES</b>	yes	no	
Pink conjunctivae, no ptosis	<input checked="" type="checkbox"/>		
PERRLA	<input checked="" type="checkbox"/>		
Fundi clear, no AV nicking	<input checked="" type="checkbox"/>		
ENMT	yes	no	
Nose and ears appear normal	<input checked="" type="checkbox"/>		
Good dentition	<input checked="" type="checkbox"/>		
No pharyngeal erythema	<input checked="" type="checkbox"/>		
<b>NECK</b>	yes	no	
Non-tender, no masses	<input checked="" type="checkbox"/>		
No thyromegaly or nodules	<input checked="" type="checkbox"/>		
<b>RESPIRATORY</b>	yes	no	
Normal respiratory effort	<input checked="" type="checkbox"/>		
Clear to auscultation	<input checked="" type="checkbox"/>		
Clear to percussion	<input checked="" type="checkbox"/>		
<b>CARDIOVASCULAR</b>	yes	no	
No carotid bruits	<input checked="" type="checkbox"/>		
RRR, no MRGs	<input checked="" type="checkbox"/>		
No peripheral edema	<input checked="" type="checkbox"/>		
<b>GASTROINTESTINAL</b>	yes	no	
Abdomen soft, with no masses	<input checked="" type="checkbox"/>		
No hepatosplenomegaly	<input checked="" type="checkbox"/>		
No hernias	<input checked="" type="checkbox"/>		
Heme occult negative	<input checked="" type="checkbox"/>		
<b>MUSCULOSKELETAL</b>	yes	no	
Normal gait and station	<input checked="" type="checkbox"/>		
No digital cyanosis or clubbing	<input checked="" type="checkbox"/>		
<b>SKIN</b>	yes	no	
No rashes, ulcers or lesions	<input checked="" type="checkbox"/>		
Normal turgor and temperature	<input checked="" type="checkbox"/>		
<b>NEUROLOGIC</b>	yes	no	
CNs intact	<input checked="" type="checkbox"/>		
No sensory deficits	<input checked="" type="checkbox"/>		
DTRs intact and symmetrical	<input checked="" type="checkbox"/>		
<b>PSYCHIATRIC</b>	yes	no	
Appropriate affect	<input checked="" type="checkbox"/>		
A&OX3	<input checked="" type="checkbox"/>		
Intact judgment and insight	<input checked="" type="checkbox"/>		

some crackles  
 (DNR)

Problem Focused = 1 - 5 bullets.  
 Expanded Problem Focused = 6 - 11 bullets.  
 Detailed = 12 bullets.  
 Comprehensive = 2 bullets from EACH of NINE systems

Assessment (Assign problem points)

MDM	Prob Pts	Data Pts	Risk
SF <input type="checkbox"/>	≤ 1	1	Min
Low <input checked="" type="checkbox"/>	2	2	Low
Mod <input checked="" type="checkbox"/>	3	3	Mod
High <input checked="" type="checkbox"/>	≥ 4	4	High

Only 2 out of 3 MDM dimensions required

4  3  1  2  1   
 DM  
 HTN  
 CKD? (baseline)  
 Hyperlipidemia  
 ? CHF

Plan

1. D/C metformin
2. Start AVANDIA 4 mg BID
3. Get old records re: baseline CKD
4. Refer to nephrology
5. Stress test
6. Echo

Signature: [Signature]

- 99201
- 99202
- 99203
- 99204
- 99205

Minimal Risk <input type="checkbox"/>	Low Risk <input type="checkbox"/>	Moderate Risk <input checked="" type="checkbox"/>	High Risk <input type="checkbox"/>
• One self-limited problem (e.g., cold, insect bite)	• Two self-limited problems • One stable chronic illness • Acute uncomplicated illness (e.g., cystitis/rhinitis) • OTC drugs	• Mild exacerbation of one chronic illness • Two stable chronic illnesses • Undiagnosed new problem • Acute illness with systemic symptoms (e.g., pyelonephritis, colitis) • Prescription drug management	• Severe exacerbation of chronic illness • Illness with threat to life or bodily function • Abrupt change in neurological status (e.g., TIA/weakness) • Parenteral controlled substances • Decision for DNR or to de-escalate care • Drugs requiring intensive monitoring for toxicity