SPECIALTY EXAM: RESPIRATORY

Refer to data section (table below) in order to quantify. After reviewing the medical record documentation, identify the level of examination. Circle the level of examination within the appropriate grid in Section 5 (Page3).

Performed and Documented	Level of Exam
One to five bullets	Problem Focused
Six to eleven bullets	Expanded Problem Focused
Twelve or more bullets	Detailed
At least one bullet in each box with an unshaded border AND every bullet in each box with a shaded border.	Comprehensive

(Circle the bullets that are documented.)

NOTE: For the descriptions of the elements of examination containing the words "and", "and/or", only one (1) of those elements must be documented.

System/Body Area	Elements of Examination		
Lymphatic	Palpation of lymph nodes in neck, axillae, groin, and/or other location		
Musculoskeletal	Assessment of muscle strength and tone (e.g., flaccid, cog wheel, spastic) with notation of any atrophy and abnormal movements		
	Examination of gait and station		
Extremities	 Inspection and palpation of digits and nails (e.g., clubbing, cyanosis, inflammation, petechiae, ischemia, infections, nodes) 		
Skin	 Inspection and/or palpation of skin and subcutaneous tissue (e.g., rashes, lesions, ulcers) 		
Neurological/ Psychiatric	Brief assessment of mental status including: Orientation to time, place and person Mood and affect (e.g., depression, anxiety, agitation)		

System/Body Area	Elements of Examination		
Gastrointestinal	Examination of abdomen with notation of presence of masses or tenderness		
(Abdomen)	Examination of liver and spleen		
Constitutional	 Measurement of any three of the following seven vital signs: 1) sitting or standing blood pressure, 2) supine blood pressure, 3) pulse rate and regularity, 4) respiration, 5) temperature, 6) height, 7) weight (May be measured and recorded by ancillary staff) General appearance of patient (e.g., development, nutrition, body habitus, 		
	deformities, attention to grooming)		
Ears, Nose, Mouth and Throat	 Inspection of nasal mucosa, septum and turbinates Inspection of teeth and gums Examination of oropharynx (e.g., oral mucosa, hard and soft palates, tongue, tonsils, posterior pharynx) 		
Neck	 Examination of neck (e.g., masses, overall appearance, symmetry, tracheal position, crepitus) 		
	Examination of thyroid (e.g., enlargement, tenderness, mass)		
	Examination of jugular veins (e.g., distension; a, v or cannon a waves)		
Respiratory	 Inspection of chest with notation of symmetry and expansion Assessment of respiratory effort (e.g., intercostal retractions, use of accessory muscles, diaphragmatic movement) Percussion of chest (e.g., dullness, flatness, hyperresonance) Palpation of chest (e.g., tactile fremitus) Auscultation of lungs (e.g., breath sounds, adventitious sounds, rubs) 		
Cardiovascular	Auscultation of heart including sounds, abnormal sounds and murmurs		

DATE OF SERVICE

(Enter the number of circled bullets in the boxes below. Then circle the appropriate level of care.)

EXAM	One to Five Bullets	Six to Eleven Bullets	Twelve or more Bullets	Answer the following two questions. If both answers are "yes," the appropriate level of exam is comprehensive. Was at least one bullet documented in each unshaded box? Yes No Was each bullet in each shaded box documented? Yes No
	Problem Focused	Expanded Problem Focused	Detailed	Comprehensive

• Examination of peripheral vascular system by observation (e.g., swelling, varicosities)

and palpation (e.g., pulses, temperature, edema, tenderness)

Note: The Chest (Breasts), Head/Face, Eyes and Genitourinary systems/body areas are not integral parts of this Respiratory exam.