

Review of Systems					
Constitutional	no	yes	Musculoskeletal	no	yes
Weight loss		<input checked="" type="checkbox"/>	Arthralgias		
Fevers			Myalgias		
Chills			Muscle weakness		
Night sweats			Joint swelling		
Fatigue		<input checked="" type="checkbox"/>	NSAID use		
Other:			Other:		
Eyes	no	yes	Skin	no	yes
Blurry vision			Rash		
Eye pain			Pruritis		
Discharge			Sores		
Dry eyes			Nail changes		
Decreased vision			Skin thickening		
Other:			Other:		
Ears/Nose/Throat	no	yes	Neurological	no	yes
Sore throat			Migraines		
Tinnitus			Numbness		
Bloody nose			Ataxia		
Hearing loss			Tremors		
Sinusitis			Vertigo		
Other:			Other:		
Respiratory	no	yes	Endocrine	no	yes
Short of breath		<input checked="" type="checkbox"/>	Excess thirst		
Cough			Polyuria		
Hemoptysis			Cold intolerance		
Wheezing			Heat intolerance		
Pleurisy			Goiter		
Other:			Other:		
Cardiovascular	no	yes	Psychiatric	no	yes
Chest pain		<input checked="" type="checkbox"/>	Depression		
PND			Anxiety		
Palpitations			Anti-depressants		
Edema		<input checked="" type="checkbox"/>	Alcohol abuse		
Orthopnea			Drug abuse		
Syncope			Insomnia		
Other:			Other:		
Gastrointestinal	no	yes	Hem/Lymphatic	no	yes
Nausea			Easy bruising		
Vomiting			Bleeding diathesis		
Diarrhea			Blood clots		
Hematemesis			Swollen glands		
Melena			Lymphedema		
Other:			Other:		
Genitourinary	no	yes	Allergic/Immun	no	yes
Hematuria			Allergic rhinitis		
Dysuria			Hay fever		
Other:			Other:		
Other:	no	yes	Other:	no	yes
Hesitancy			Asthma		
Incontinence			Positive PPD		
UTIs			Hives		
Other:			Other:		

Patient: Richard Hayes Date: 11/24/09

Hospital Progress Note

2 out of 3 Key Components Required

E/M	Hx	Exam	MDM	Time
99231	PF	PF	SF/Low	15
99232	EPF	EPF	Mod	25
99233	Det	Det	High	35

Physical Exam			Abnormal Findings
CONSTITUTIONAL	yes	no	
Record three vital signs			180/90, 78/64 ✓
Conversant/NAD		<input checked="" type="checkbox"/>	
EYES	yes	no	
Pink conjunctivae; no ptosis			
PERLLA			
Fundi clear, no AV nicking			
ENMT	yes	no	
Nose and ears appear normal			
Good dentition			
No pharyngeal erythema			
NECK	yes	no	
Non-tender, no masses		<input checked="" type="checkbox"/>	
No thyromegaly or nodules			
RESPIRATORY	yes	no	
Normal respiratory effort		<input checked="" type="checkbox"/>	
Clear to auscultation		<input checked="" type="checkbox"/>	
Clear to percussion			
CARDIOVASCULAR	yes	no	
No carotid bruits			
RRR, no MRGs		<input checked="" type="checkbox"/>	
No peripheral edema		<input checked="" type="checkbox"/>	2+ edema
GASTROINTESTINAL	yes	no	
Abdomen soft, with no masses		<input checked="" type="checkbox"/>	
No hepatosplenomegaly			
No hernias			
Heme occult negative			
MUSCULOSKELETAL	yes	no	
Normal gait and station			
No digital cyanosis or clubbing			
SKIN	yes	no	
No rashes, ulcers or lesions		<input checked="" type="checkbox"/>	
Normal turgor and temperature			
NEUROLOGIC	yes	no	
CNs intact			
No sensory deficits			
DTRs intact and symmetrical			
PSYCHIATRIC	yes	no	
Appropriate affect		<input checked="" type="checkbox"/>	
A&OX3			
Intact judgment and insight		<input checked="" type="checkbox"/>	

Chief Complaint: ARF
 HPI: Brief: 1-3 HPI elements* Extended: 4 HPI elements* or status of 3 problems

*ARF has somewhat worsened.
 HTN not controlled. Acidosis is worsening as well.
 UOP ↓. Now oliguric.*

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

Level of History Recorded

Problem Focused: Brief HPI, no ROS EPF: Brief HPI and 1 ROS
 Detailed: Extended HPI and 2-9 ROS Comp: Never needed for these encounters

Data Reviewed

149/102/95
 5.8/16 4.6
 UA ⊙ RO/S ⊙ obstruction

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 MD	Review any image, tracing, specimen	Order old records	Summarize old records
1 <input checked="" type="checkbox"/>	1 <input checked="" type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>

- 4 3 1 2 1 ARF
- 4 3 1 2 1 ACIDOSIS
- 4 3 1 2 1 HTN
- 4 3 1 2 1 TK

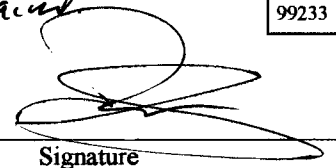
MDM	Prob Pts	Data Pts	Risk
SF <input type="checkbox"/>	≤1	1	Min
Low <input type="checkbox"/>	2	2	Low
Mod <input type="checkbox"/>	3	3	Mod
High <input checked="" type="checkbox"/>	≥4	4	High

Only 2 out of 3 MDM dimensions required

- Plan
- Δ fluids to D5W @ 3 amps HCO₃
 - Hydralazine 50 mg po TID
 - NO dialysis today
 - low kt diet
 - Re-assess for dialysis in a.m.

99231
 99232
 99233

Signature



Minimal Risk <input type="checkbox"/>	Low Risk <input type="checkbox"/>	Moderate Risk <input type="checkbox"/>	High Risk <input checked="" 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