

Time : in..... out.....with pt..... Physician's signature.....

MULTISYSTEM EXAM DOCUMENTATION CHART

Patient Name.....DOB.....Date...../...../.....

Levels of Exam: Program Focused = 1-5 Elements of at least one organ system
Expanded Problem Focused = 6 Elements of a least one organ system
Detailed = 12 Elements of 2 to 6 organ systems
Comprehensive = 18 Elements of 9 organ systems

Organ Systems: Const/Eyes/ENT/Neck/Resp/Cardio/Chest(breast)/Gastro(abdomen)/Gent-Uro/Lymph/Musc-Skel/Skin/Neuro/Psych
Documentation Guidelines: A notation of "within normal limits" (WNL) is sufficient for elements of unaffected organ systems. Elements of exam in affected organ systems must be documented with specific abnormal and relevant negative findings.

CONST * HT:..... WT:..... TEMP:..... RESP:.....BP
Upright...../.....
Organ System Pulse..... Regularity..... BP Supine
...../.....
*General

Appearance.....

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Organ System
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Organ System
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Organ System
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Organ System

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Organ System

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ADDITIONAL NOTES/ROS OR EXAM

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Organ System

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.....EXAM

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Organ System

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Organ System

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.....EXAM

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Patient Name.....*DOB*.....*Date*...../...../.....

Provisional Diagnosis:

1. Syncope, Possible Cardiac Dysrhythmia, RULE OUT Myocardial Infarction

2. Coronary Artery Disease with Chronic Angina

Secondary Diagnosis:

1. A history of transient ischemic attack in the Posterior Circulation

2. Chronic Renal Insufficiency

Disposition: The patient will be admitted to a bed for further monitoring of his cardiac rhythm.

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Physician's Signature