

The E/M service documented is a level THREE hospital progress note.

99233

\$92.94

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

(Requires 2 out of 3 key components)

CC: Shock

INTERVAL HISTORY: Patient admitted last night with altered mental status. Found to have acute renal failure. Intubated later for hypoxemic respiratory failure. Remains on LEVOPHED and DOPAMINE.

CONSTITUTIONAL: Intubated, unresponsive, cachectic
VITAL SIGNS: BP 80/60, HR 122, 24

NECK: No JVD, trachea midline

LUNGS: CTA with symmetric breath sounds

CARDIOVASCULAR: RRR, no MRGs, no peripheral edema

ABDOMEN: Soft, decreased bowel sounds, no HSM

MUSCULOSKELTAL: Severe muscle wasting and atrophy

Labs: BUN 285, creatinine 7, HGB 5.8. Urine creatinine 345, urine sodium 22. ABG: pH 7.13, PaO2 128, PaCO2 40 on 40% FiO2.

IMPRESSION

- Severe, but improving ARF due to profound volume depletion
- Worsening anemia
- Worsening acidosis
- Hypovolemic shock, not yet improving

PLAN

- Another liter NS wide open
- Then isotonic bicarb at 300 cc/hr
- Transfuse 2 units PRBCs
- Repeat chem. 7, CBC at 1400
- Usual labs in a.m.

Total critical care time: 25 minutes

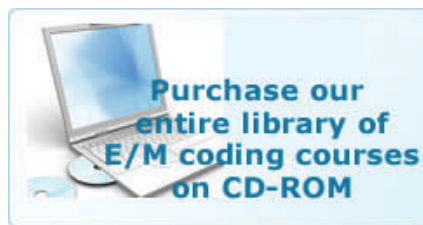
Problem Points	?
Data Points	?
Risk	?

History	HPI	ROS	PFSH
PF	Brief	None	None
EPF	Brief	≥ 1	None
Detailed	Ext	2 - 9	1/3
Comp	Ext	≥ 10	3/3

Exam	1995 Exam Rules
PF	A limited exam of affected body area or organ system
EPF	Limited exam of affected organ system and other symptomatic or related organ systems
Detailed	Extended exam of the affected body area or organ systems and other symptomatic or related organ systems (5 - 7 systems?)
Comp	8 - 12 organ systems

MDM	Prob. Pts	Data Pts	Risk
SF	≤ 1	≤ 1	Min
Low	2	2	Low
Mod	3	3	Mod
High	≥ 4	≥ 4	High

Requires 2/3 dimensions



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Peter R. Jensen, MD, CPC

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