Review of Systems

Constitutional	no	yes	Musculoskeletal	no	yes
Weight loss			Arthralgias		
Fevers			Myalgias		
Chills			Muscle weakness		
Night sweats			Joint swelling		
Fatigue			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			Excess thirst		
Cough			Polyuria		
Hemoptysis			Cold intolerance		
Wheezing			Heat intolerance		
Pleurisy			Goiter		
Other:			Other:		
Cardiovascular	**no**	**yes**	**Psychiatric**	**no**	**yes**
Chest pain			Depression		
PND			Anxiety		
Palpitations			Anti-depressants		
Edema			Alcohol abuse		
Orhtopnea			Drug abuse		
Syncpe			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**	**Allrgic/Immun**	**no**	**yes**
Hematuria			Allergic rhinitis		
Dysuria			Hay fever		
Hesitancy			Asthma		
Incontinence			Positive PPD		
UTIs			Hives		
Other:			Other:		

Patient: _____ Date: _____

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:

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

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

Past Medical, Family and Social History

PMH

FH

SH

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

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 ☐	1 ☐	1 ☐	1 ☐	2 ☐	1 ☐	2 ☐

Physical Exam (Each check box = 1 bullet)

			Abnormal Findings
CONSTITUTIONAL*			
Record three vital signs	yes	no	
Conversant/NAD/well-nourished			
ENMT*	yes	no	
Normal nasal mucosa and turbinates			
Normal teeth, gums and palate			
Oropharynx clear without erythema			
NECK*	yes	no	
Trachea midline, no masses, FROM			
No JVD			
No thryomegaly, nodules or masses			
RESPIRATORY*	yes	no	
Normal symmetric chest expansion			
Normal respiratory effort			
Clear to auscultation			
Clear to percussion			
No tactile fremitus			
CARDIOVASCULAR*	yes	no	
RRR, no MRGs			
No peripheral edema, pulses intact			
GASTROINTESTINAL*	yes	no	
Abdomen soft, with no masses			
No hepatosplenomegaly			
MUSCULOSKELETAL	yes	no	
Normal gait and station			
Normal muscle strength and tone			
EXTREMITIES	yes	no	
No digital cyanosis or clubbing			
LYMPHADENOPATHY?	yes	no	
Neck ☐ Axillae ☐ Groin ☐			
SKIN	yes	no	
No rashes, lesions, ulcers			
NEURO/PSYCHIATRIC	yes	no	
Appropriate affect			
A&OX3			

- ☐ Problem Focused Exam: 1 - 5 bullets
- ☐ Expanded Problem Focused Exam : 6 - 11 bullets
- ☐ Detailed Exam: 12 bullets
- ☐ Comprehensive Exam: All bullets from starred systems plus one bullet from EVERY other system

Sample

4	3	1	2	1
☐	☐	☐	☐	☐
☐	☐	☐	☐	☐
☐	☐	☐	☐	☐
☐	☐	☐	☐	☐
☐	☐	☐	☐	☐
New, further w/u is planned	New, no further w/u planned	Self-limited or minor (max 2)	Established, not controlled	Established, stable

Assessment (Assign problem points on the left.)

MDM	Prob Pts	Data Pts	Risk
SF ☐	≤ 1	1	Min
Low ☐	2	2	Low
Mod ☐	3	3	Mod
High ☐	≥ 4	4	High
Only 2 out of 3 MDM dimensions required			

Plan

99201	☐
99202	☐
99203	☐
99204	☐
99205	☐

_____

Signature

Minimal Risk ☐	Low Risk ☐	Moderate Risk ☐	High Risk ☐
•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