**Session Number\_\_\_\_\_\_\_**  **Date\_\_\_\_\_\_\_\_\_\_**

# **Patient Demographics**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***Encounter Type:*** | | Individual / Group / Prenatal / Preterm  **Gestational Age (at birth):** | | | ***Age:*** \_\_\_\_  \_\_\_\_  \_\_\_\_ | Years / Months / Weeks / Days  Pre-term Child? (Premie)  Weeks |
| ***Gender:*** | M / F / T | | ***Race:*** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Insurance:*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***Referral:*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

# **Activity – Circle your option and add hours**

|  |  |
| --- | --- |
| ***Consultation with Preceptor*** | ***Hours*** |
| High Complexity / Moderate Complexity / Low Complexity / Straightforward |  |
| ***Time with Patient*** | ***Hours*** |
| Primary (>50) / Shared (50/50) / Primary (<50) / Observation Only |  |

# **Clinical Information**

|  |  |
| --- | --- |
| ***Reason for Visit:*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ***Chief Complaint:*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ***Encounter* #:** \_\_\_\_\_ | ***Type of H & P;*** \_\_\_ Problem Focused \_\_\_ Detailed  \_\_\_ Expanded Prob. Focused \_\_\_ Comprehensive |

# **Social Problems**

|  |  |  |
| --- | --- | --- |
| \_\_\_ Abused Child/Adult  \_\_\_ Caretaking/Parenting  \_\_\_ Education/Language  \_\_\_ Emotional  \_\_\_ Grief  \_\_\_ Growth & Development  \_\_\_ Housing/Residence  \_\_\_ Income/Economic | \_\_\_ Interpersonal Relationships  \_\_\_ Issues w/Comm. Resources  \_\_\_ Legal  \_\_\_ Neglected Child/Adult  \_\_\_ Nutrition/Exercise  \_\_\_ Palliative/End of Life Care  \_\_\_ Prevention  \_\_\_ Role Change | \_\_\_ Safety  \_\_\_ Sanitation/Hygiene  \_\_\_ Sexuality  \_\_\_ Social Contact/Isolation  \_\_\_ Spiritual Issues  \_\_\_ Substance Abuse  \_\_\_ Other: |

# **ICD-10 Codes Diagnosis Codes CPT billing Codes**

#1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #5 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #5 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #6 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #6 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#3 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #7 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #3 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #7 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#4 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #8 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #4 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #8 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **Medications**

**# OTC Drugs taken regularly:** \_\_\_\_\_ **# Rx currently prescribed:** \_\_\_\_\_ **# New/Refilled Rx This Visit:** \_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Types of New/Refilled Rx This Visit** | | **Adherence Issues with Medications** |
| \_\_\_ Analgesic & Antipyretic:  \_\_\_ Cardiology:  \_\_\_ Dermatology:  \_\_\_ Endocrinology:  \_\_\_ ENT:  \_\_\_ GI Agents:  \_\_\_ Gynecology:  \_\_\_ Hematology/Oncology:  \_\_\_ Infectious Diseases:  \_\_\_ Neurology:  \_\_\_ Ophthalmology:  \_\_\_ Psychiatric: | \_\_\_ Pulmonary:  \_\_\_ Rheumatology:  \_\_\_ Urology:  \_\_\_ Vaccines:  \_\_\_ Wound Management:  \_\_\_ Miscellaneous: | \_\_\_ Caretaker failure  \_\_\_ Complexity/demands of treatment  \_\_\_ Denial of need  \_\_\_ Disappearance of symptoms  \_\_\_ Disbelief in benefits/efficacy  \_\_\_ Fear of addiction  \_\_\_ Financial concerns  \_\_\_ Forgetfulness  \_\_\_ Knowledge deficit  \_\_\_ Physical disability  \_\_\_ Pregnancy  \_\_\_ Psychiatric diagnosis  \_\_\_ Religious reasons  \_\_\_ Other/side effects: |

# **SOAP NOTES**

**Subjective**

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| --- |
|  |

**Objective**

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| --- |
|  |

**Assessment**

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| --- |
|  |

**Plan**

|  |
| --- |
|  |