

# NEXTGEN RHEUMATOLOGY WORKFLOW DEMONSTRATION

This example works through a sample adult rheumatology encounter. In this demonstration, the patient has been seen by other USA HSF providers, so most basic history will already be entered into the chart, though we'll touch upon updating this information as well.

This has been prepared for EHR 5.8 & KBM 8.3. Subsequent updates may display cosmetic & functional changes.

Use the keyboard or mouse to pause, review, & resume as necessary.

Work Flow [Duffy, Robert L]

Appointments 02/20/2013 Duffy

Time	Room	Patient/Subject	Reason	Status
09:00 AM		Flinstone, Wilma/Follow U...		Attended
10:45 AM		RUBBLE, BARNEY/Follow U...		KEPT
11:15 AM		FLINSTONE, FRED/Follow ...		BOOKED

Tasks All Tasks Refills Test Results Questions

Due Date	Patient/Subject	Description
01/23/2013	Quagmire, Charlene/F...	Unable to find insurance inf...
01/23/2013	Quagmire, Charlene/L...	Unable to find insurance inf...
10/24/2012	TEST, DEBBIE/notified ...	Testing Advanced audit ...
10/19/2012	TEST, DEBBIE	ORT SHOULDER COMPLETE
08/22/2012	Horton, PedsAsthma003	
08/10/2012	Test, Mickey	
06/28/2012	BarnesB, Example002	
06/28/2012	Osborn, Example002	
06/28/2012	DuffyR, Examp...0017...	Communication
06/28/2012	BowenC, Example002	
06/28/2012	HepburnM, Example002	
06/28/2012	ColierK, Example002	
06/28/2012	BowenC, Example001...	Just bothering you.
06/27/2012	HortonT, IMEX001	
06/27/2012	MilteerH, IMEx001	
06/26/2012	BarnesC, Examp...001	

The nurse begins by double-clicking on the patient from her provider's appointment list.

Patient Portal

Communications

- Inbox
- Outbox
- Drafts
- Archived

Prescriptions

- Inbox
- Outbox
- Archived

Appointments

- Inbox
- Outbox
- Archived

Online Forms

- Inbox

Offline

From Subject Received

Add Remove Edit Send Chart

Compose Remove + To Do + To Chart Chart

Always begin by performing the 4-Point check.

Patient

Location

Provider

Date

The screenshot shows a medical chart for Ashleigh Quagmire (F) with MRN 00000007762, DOB 01/02/1957, and age 57 years 2 months. The chart is dated 03/26/2014 at 10:24 AM. The interface includes a navigation pane on the left, a main content area with a 'Specialty' dropdown set to 'select a specialty' and a 'Visit Type' dropdown set to 'select a visit type', and a 'Patient History' pane on the right. Green arrows point from the 'Patient', 'Location', 'Provider', and 'Date' labels to their respective fields in the chart header. A green oval highlights the red text in the Specialty and Visit Type dropdowns, with an arrow pointing to the 'Patient History' pane.

When you first open the chart to the Intake Tab, you'll note some red text demanding attention:  
**Specialty** *Select a specialty* & **Visit type** *Select a visit type*.

Click **select a specialty** & make a selection from the picklist; here we'll pick **Rheumatology**.

Then click **select a visit type** & pick from the list; select **Office Visit** for this example.

The screenshot displays a medical software interface for a patient named Ashleigh Quagmire (F), DOB: 01/02/1957 (57 years), Weight: 170.00 lb (77.11 Kg). The patient's address is 123 Toejam Trance, Mobile, AL 36604. The MRN is 000000007762, and the insurance is MEDICAID OF ALABAMA. The patient's specialty is currently set to "select a specialty" and the visit type is "select a visit type".

Two picklist windows are open:

- Ngkbn Get Dbpicklist Items**: A list of medical specialties is shown, with "Rheumatology" selected. The list includes: Gastroenterology ASC, General Surgery, Gynecology, Internal Medicine, Nephrology, Neurology, Neurosurgery, Obstetrics, Oncology, Ophthalmology, Orthopedics, Otolaryngology, Pediatrics, Physical Therapy, Pulmonary Medicine, Rheumatology, Urgent Care, and Urology.
- Visit Types**: A list of visit types is shown, with "Office Visit" selected. The list includes: After Hours Visit, Chart Abstraction, Chart Update, Consult, Coumadin Visit, Document Pregnancy Outcome, GYN Visit, Inpatient Initial, Inpatient Subsequent, Medical Clearance, Consult, Medical Clearance, Visit, Medicare Initial Visit, No-Show, Nurse Visit, Office Visit, Patient Communication, Physician Supervision (patient not present), Post-Operative Visit, Preventive Medicine, Preventive Medicine Counseling, and Tobacco Cessation.

The interface also shows a navigation pane on the left, a patient history pane on the right, and a taskbar at the bottom with various icons and the date 03/26/2014.

Note whether the patient is listed as **New** or **Established**, since this sometimes needs to be changed. A patient seen elsewhere in the USA system might initially appear as **Established**, but if it's the first time she's been to your office, that would need to be changed to **New**. Conversely, if you've seen the patient before you started using the EHR, but today is the first visit in NextGen, you may need to change the encounter from **New** to **Established**. This patient is new to us, so we'll make that change.

Ashleigh Quagmire (F)    DOB: 01/02/1957 (57 years)    Weight: 170.00 lb (77.11 Kg)    Allergies: (3)    Problems: (7)    Diagnoses: (46)    Medications: (7)

Address: 123 Toejam Trace  
Mobile, AL 36604  
Contact: (251) 555-1234 (Home)

MRN: 000000007762    Insurance: MEDICAID OF ALABAMA    NextMD: No

Emergency Relation:    Emergency Phone:    Pharmacy 1: CAFFEYS PHARM...

PCP: ATKINSON, TANGELA C ...    Referring:    Rendering: DUFFY, ROBERT LAMAR ...

Alerts    OBGYN Details    Patient    Lipid Clinic Data    Order Admin...    Sticky Note    Referring Provider    HIPAA    Advance Directives    Screening Summary

03/26/2014 10:24 AM : "\*\*USA Intake"

Specialty ▼ Rheumatology    Visit Type ▼ Office Visit

Intake    Histories    SOAP    Finalize    Checkout

Standing Orders    Adult Immunizations    Peds Immunizations    My Plan    Procedures    Order Management

Care Guidelines    Global Days

Panel Control: Toggle    Cycle

General

Established patient     New patient    Historian: \_\_\_\_\_

Patient History

- 03/26/2014 10:24 AM
  - Medication
    - \*USA Intake
- 03/25/2014 05:25 PM
- 03/15/2014 03:09 PM
- 03/14/2014 10:40 AM
- 03/05/2014 01:06 PM
- 03/04/2014 01:45 PM
- 02/26/2014 10:59 AM

It's always good to begin by noting whether there are any **Sticky Note** or **Alerts** entries.

NextGen EHR: Ashleigh Quagmire MRN: 000000007762 DOB: 01/02/1957 (Female) AGE: 57 years 2 months

File Edit Default View Tools Admin Utilities Window Help

Logout Save Clear Delete US MASTIN DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Medications Templates Documents Images Orders Problems Apps Close

Ashleigh Quagmire (F) DOB: 01/02/1957 (57 years) Weight: 170.00 lb (77.11 Kg) Allergies: (3) Problems: (7) Diagnoses: (46) Medications: (7)

Address: 123 Toejam Trace Mobile, AL 36604 MRN: 000000007762 Insurance: MEDICAID OF ALABAMA Emergency Relation: PCP: ATKINSON, TANGELA C ...  
Contact: (251) 555-1234 (Home) NextMD: No Emergency Phone: Referring: Rending: DUFFY, ROBERT LAMAR ...  
Pharmacy 1: CAFFEYS PHARM...

Alerts GYN Details Patient Lipid Clinic Data Order Adm... Sticky Note Referring Provider HIPAA Advance Directives Screening Summary

03/26/2014 10:24 AM: ""USA Intake"

Specialty: Rheumatology Visit Type: Office Visit

Intake Histories SOAP Finalize Checkout

Standing Orders Adult Immunizations Peds Immunizations My Plan Procedures Order Management

Care Guidelines Global Days

General

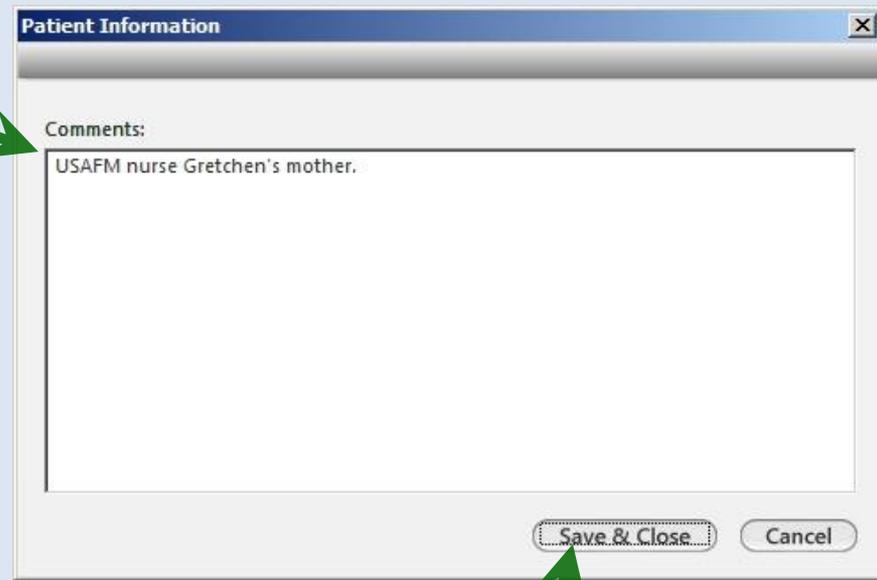
Reason for Visit

Do not launch HPI Intake Comments

Ready NGDevil USA Health Services Foundation rlduffy CAP NUM SCRL 03/26/2014

We can tell by the appearance of the **Alert** button that there is no Alert. But the magenta color & solid diamond tell us there is a **Sticky Note**. To review it, click **Sticky Note**.

Like actual sticky notes, these are things that are nice to know, but aren't meant to be permanent chart records. We note that the patient is the mother of one of the Family Medicine nurses.



The screenshot shows a window titled "Patient Information" with a close button (X) in the top right corner. Below the title bar is a "Comments:" label followed by a text area containing the text "USAFM nurse Gretchen's mother.". At the bottom right of the window are two buttons: "Save & Close" and "Cancel". A green arrow points from the text box on the left to the "Comments:" label.

When done click **Save & Close**.

Other times a sticky note would be a temporary notice, like **Ask about Tdap next visit. RL Duffy 4/13/13**. It's good to put your name & date on such things; otherwise, you have no idea whether they're still pertinent when you see them in the future. And you should delete such sticky notes when they're no longer meaningful.

You can select a **Historian** from the picklist that appears if you click in that box; you can also type in an entry. This is most pertinent if the patient is a child or adult unable to care for herself.

Alerts OBGYN Details Patient Lipid Clinic Data Order Admin... Sticky Note Referring Provider HIPAA Advance Directives Screening Summary

03/26/2014 10:24 AM : "\*USA Intake" x

Specialty ▼ Rheumatology Visit Type ▼ Office Visit

Intake Histories SOAP Finalize Checkout

Immunizations Peds Immunizations My Plan Procedures Order Management

Days

Panel Control: Toggle Cycle

patient | Historian:

Relationship of historian:

- aunt
- brother
- daughter
- daughter-in-law
- father
- father-in-law
- foster child
- foster parent
- friend
- granddaughter
- grandfather
- grandmother
- grandson
- mother
- mother-in-law
- neighbor
- nephew
- niece
- self
- significant other
- sister
- son
- son-in-law
- spouse
- step daughter
- step parent
- step son
- uncle

Close

Note the PCP.

NextGen EHR: Ashleigh Quagmire MRN: 000000007762 DOB: 01/02/1957 (Female) AGE: 57 years 2 months

File Edit Default View Tools Admin Utilities Window Help

Logout Save Clear Delete USA MASTIN DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Medications Templates Documents Images Orders Problems Apps

Ashleigh Quagmire (F) DOB: 01/02/1957 (57 years) Weight: 170.00 lb (77.11 Kg) Allergies: (3) Problems: (7) Diagnoses: (46) Medications: (7)

Address: 123 Toejam Trace Mobile, AL 36604 MRN: 000000007762 Insurance: MEDICAID OF ALABAMA Emergency Relation: PCP: ATKINSON, TANGELA C ...  
Contact: (251) 555-1234 (Home) NextMD: No Emergency Phone: Referring: ...  
Pharmacy 1: CAFFEYS PHARM... Rendering: DUFFY, ROBERT LAMAR ...

Alerts OBGYN Details Patient Lipid Clinic Data Order Admin... Sticky Note Referring Provider HIPAA Advance Directives Screening Summary

03/26/2014 10:24 AM : "\*USA Intake" x

Specialty Rheumatology Visit Type Office Visit

Intake Histories SOAP Finalize Checkout

Standing Orders Adult Immunizations Peds Immunizations My Plan Procedures Order Management

Care Guidelines Global Days Panel Control: Toggle Cycle

General

Vital Signs TempF TempC O-sat Pain level Comments

History | Graph

If this needs to be changed, click **Patient**, which opens the Patient\_demographics template. (We don't need to do that here.)

The Navigation Bar is normally hidden at the left; it will slide out if you hover over it. But you probably won't need it very often.

NextGen EHR: Ashleigh Quagmire MRN: 000000007762 DOB: 01/02/1957 (Female) AGE: 57 years 2 months - 03/26/2014 10:24 AM : \*\*USA Intake

File Edit Default View Tools Admin Utilities Window Help

Logout Save Close Delete USA MASTIN DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Medications Templates Documents Images Orders Problems Apps Close

Ashleigh Quagmire (F) DOB: 01/02/1957 (57 years) Weight: 170.00 lb (77.11 Kg) Allergies: (3) Problems: (7) Diagnoses: (46) Medications: (7)

Address: 123 Toejam Trace Mobile, AL 36604 MRN: 000000007762 Insurance: MEDICAID OF ALABAMA Emergency Relation: PCP: ATKINSON, TANGELA C...  
Contact: (251) 555-1234 (Home) NextMD: No Emergency Phone: Referring: DUFFY, ROBERT LAMAR...  
Pharmacy 1: CAFFEYS PHARM... Rendering: DUFFY, ROBERT LAMAR...

Alerts OBGYN Details Patient Lipid Clinic Data Order Admin... Sticky Note Referring Provider HIPAA Advance Directives Screening Summary

Navigation

- Intake
- History
- Finalize
- Check Out
- Order Management
- Orders/Plan
- Standing Orders
- Anticoagulation
- Procedures
- Tobacco Cessation
- Tuberculin Skin Test
- Nutrition
- Chart Abstraction
- Demographics
- Document Library
- Immunizations
- Patient Comment
- Provider Test Action
- Vital Signs
- Screening Tools
- CQM Check
- MU Check

Visit Type Office Visit

Histories	SOAP	Finalize	Checkout
Immunizations	Peds Immunizations	My Plan	Procedures
Order Management			

Panel Control: Toggle Cycle

Patient | Historian: self

Patient History

- 03/26/2014 10:24 AM
- 03/25/2014 05:25 PM
- 03/15/2014 07:09 PM

Ready

NGDevil USA Health Services Foundation rlduffy CAP NUM SCRL 03/26/2014

You can also show or hide the History Bar by clicking the History icon at the top.

You can make the History Bar do the same auto-hide trick if you click on the thumbtack to turn it sideways.

Ashleigh Quagmire (F)    DOB: 01/02/1957 (57 years)    Weight: 170.00 lb (77.11 Kg)    Allergies: (3)    Problems: (7)    Diagnoses: (46)    Medications: (7)

Address: 123 Toejam Trace    MRN: 00000007762    Emergency Relation:    PCP: ATKINSON, TANGELA C...  
Mobile, AL 36604    Insurance: MEDICAID OF ALABAMA    Emergency Phone:    Referring:     
Contact: (251) 555-1234 (Home)    NextMD: No    Pharmacy 1: CAFFEYS PHARM...    Rendering: DUFFY, ROBERT LAMAR...

Alerts    OBGYN Details    Patient    Lipid Clinic Data    Order Admin...    Sticky Note    Referring Provider    HIPAA    Advance Directives    Screening Summar...

You can collapse the **Information Bar** down to a narrower strip if desired; that is particularly helpful on the small-screened laptops. Click **this button**.

**General**

Established patient     New patient    |    Historian:

**Reason for Visit**

Do not launch HPI    Intake Comments

Back pain    Chief Complaint    History of Present Illness

Fibromyalgia syndrome

Lupus

Musculoskeletal pain

Osteoarthritis

Osteoporosis

PMR

Polyarthopathy

Psoriatic arthritis

Rheumatoid arthritis

Additional / Manage

**Vital Signs**

Time	Wt lbs	Ht in	BMI	Temp	HR	BP	SpO2	Pain level	Comments
------	--------	-------	-----	------	----	----	------	------------	----------

The nurse will probably next enter **Vital Signs**. It would be more convenient if that section were at the top of this template. So if it's not there already, let's move it there. Click on the **Vital Signs heading bar**, & drag it up over **Reason for Visit**. (It can be a little touchy to make the drag work right, you'll eventually get it.)

The Info Bar is collapsed, & Vital Signs are at the top.

Ashleigh Quagmire (F)    DOB: 01/02/1957 (57 years)    Weight: 170.00 lb (77.11 Kg)    Allergies: (3)    Problems: (7)    Diagnoses: (46)    Medications: (7)

Alerts    OBGYN Details    Patient    Lipid Clinic Data    Order Admin...    Sticky Note    Referring Provider    HIPAA    Advance Directives    Screening Summary

03/26/2014 10:24 AM : "\*\*USA Intake" x

Specialty: Rheumatology    Visit Type: Office Visit

Intake    Histories    SOAP    Finalize    Checkout

Standing Orders    Adult Immunizations    Peds Immunizations    My Plan    Procedures    Order Management

Care Guidelines    Global Days    Panel Control: Toggle    Cycle

**General**

Established patient     New patient    Historian: self

**Vital Signs**

Health Promotion Plan | History | Graph

Time	Wt lbs	Ht in	BMI	Wt kg	Ht cm	BP	Pulse	Resp	TempF	TempC	O-sat	Pain level	Comments
------	--------	-------	-----	-------	-------	----	-------	------	-------	-------	-------	------------	----------

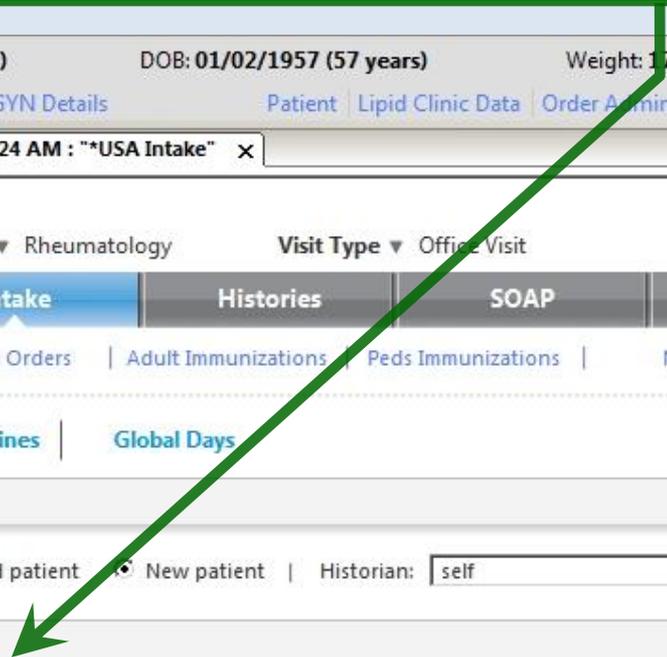
Add    Edit    Remove

**Reason for Visit**

Do not launch HPI

- Back pain
- Fibromyalgia syndrome
- Lupus
- Musculoskeletal pain
- Osteoarthritis

Intake Comments



To enter Vital Signs, click Add.



# Enter Vital Signs. (Details are reviewed in another demo.)

"Adult Vital Signs" - [New Record] ✕

**Height/length measurements:**  
[ ] ft [ ] in [ ] total in [ ] cm Position:  Standing  Lying  
Last Measured: [ ] / [ ] / [ ]  Measured today  Carried forward

**Weight measurement:**  
[ ] lb [ ] kg Context:  Dressed with shoes  Dressed without shoes

**Temperature:** [ ] F [ ] C Site: [ ]

**Blood Pressure and pulse:**  
Systolic: [ ] Diastolic: [ ] mm/Hg Position:  Sitting  Standing  Lying  
Pulse: [ ] /min Pulse pattern:  Regular  Irregular Method:  Manual  Automatic  Home monitor

**Respiration and Pulse Ox:**  
Respiration: [ ] /min Pulse Ox Rest: [ ] % Pulse Ox Amb: [ ] %  
Pulse Ox:  Room air  Oxygen - Method: [ ] [ ]  
Pulse Ox measured:  Pre-treatment  Post-treatment

**Pain scale:**  
Pain score: [ ] Method: [ ]

Comments: [ ]

Measured By: Robert L. Duffy

Navigation: << < Clear For Add Delete Save Close >>

Data used in this example:

Ht 65 inches, measured today.  
Wt 170 lbs, dressed without shoes.  
T 99.2, orally.  
BP 138/84 sitting, left arm, manual adult cuff.  
HR 86.  
Resp 16.  
O-sat 95.  
BMI of 28.29 will be calculated.

When done, click Save then Close.

Vital signs now display.

03/20/2014 10:24 AM : "\*USA Intake" x

### General

Established patient  New patient | Historian:

### Vital Signs ⚠ Vital Signs Outside Normal Range

[Health Promotion Plan](#) | [History](#) | [Graph](#)

Time	Wt lb	Ht in	BMI	Wt kg	Ht cm	BP	Pulse	Resp	TempF	TempC	O-sat	Pain level	Comments
11:55 AM	170.00	65.00	28.29	77.111	165.10	138/84	86	16	99.2	37.3	95		

Add

Edit

Remove

### Reason for Visit

Do not launch HPI

Back pain  
Fibromyalgia syndrome  
Lupus  
Musculoskeletal pain  
Osteoarthritis  
Osteoporosis  
PMR  
Polyarthopathy  
Psoriatic arthritis  
Rheumatoid arthritis

Chief

Now enter Chief Complaints, or Reasons for Visit. The most common complaints used in each clinic will appear on this list. Our patient is here to get established for **rheumatoid arthritis**, so click that.

Additional / Manage

Diagnostics

Show All

If you don't see the complaint you need, click **Additional/Manage**. Scroll through the list in the popup to make more selections.

Vital Signs Vital Signs Outside Normal Range

Reason for Visit

Do not launch HPI

- Back pain
- Fibromyalgia syndrome
- Lupus
- Musculoskeletal pain
- Osteoarthritis
- Osteoporosis
- PMR
- Polyarthropathy
- Psoriatic arthritis
- Rheumatoid arthritis**

Chief Complaint  
Rheumatoid arthritis

Additional / Manage

Reason For Visit

Select your reasons for visit

- Abnormal Lab Study
- Ankylosing Spondylitis
- back pain
- Blood Disorder
- Carpal Tunnel Syndrome
- Fatigue
- Fever
- fibromyalgia syndrome
- Gout
- Hip Pain
- Inflammatory Polyarthropathy
- Joint Effusion
- Jointman
- lupus
- musculoskeletal pain
- Neck Pain
- osteoarthritis
- Osteopenia
- osteoporosis
- Pain All Over
- Pain in the hip or thigh
- Pain Lower Leg or Knee
- PMR
- polyarthropathy
- psoriatic arthritis
- psoriasis
- psoriasis of scalp

Reason(s) for visit

- Follow up  
rheumatoid arthritis
- Follow up  
hand pain & stiffness
- Follow up
- Follow up
- Follow up
- Follow up

Intake Comments

agnostics

If you still don't see what you need, just type it in the next open box. In this example she is also complaining of **hand pain & stiffness**, so we'll type that in.

When done, click **Save & Close**.

The Reasons for Visit you've entered display.

General  
Vital Signs  
Reason for Visit

Do not launch HPI

[Intake Comments](#)

Chief Complaint | History of Present Illness

Rheumatoid arthritis  
hand pain & stiffness

Click **Intake Comments** to enter some brief information about the patient's complaints.

Intake Comments

RA X 20 yrs, mainly in hands. Rheumatologist OOT had her on meloxicam & Plaquenil till recently resumed by PCP.

Save & Close    Cancel

Type a few brief details as pertinent or volunteered by the patient. When done click **Save & Close**.

Diagnostics    Show All

Comment     No medications     Medications reconciled

2 hours apart  
ded for shortness of breath or wheezing  
or 1 wk, then 1 spray each nostril daily thereafter

lisinopril 20 mg-hydrochlorothiazide 25 mg tablet    1 daily

Add/Update    Reconcile

## Reason for Visit

Do not launch HPI

[Intake Comments](#)

Chief Complaint	History of Present Illness
Rheumatoid arthritis	
hand pain & stiffness	

Moving down the **Intake Tab**, we come to **Medications**. She confirms she's actually taking everything listed here, & nothing else, so click the **Medications reconciled** checkbox. (A detailed review of the Medication Module is provided in another lesson.)

[Diagnostics](#)

[Show All](#)

## Medications

Patient status:  Transitioning into care  Summary of care received

[Comment](#)

No medications

Medications reconciled

Medication	Sig	Description
Advair Diskus 250 mcg-50 mcg/dose powder for inhalation		1 puff 2 times daily approx 12 hours apart
albuterol sulfate HFA 90 mcg/actuation Aerosol Inhaler		2 puffs every 4-6 hrs as needed for shortness of breath or wheezing
bupropion HCl XL 300 mg 24 hr tablet, extended release		
fluticasone 50 mcg/actuation Nasal Spray, Susp		2 sprays each nostril daily for 1 wk, then 1 spray each nostril daily thereafter
hydrocortisone 2.5% Topical Cream		Apply twice daily to rash

If you have questions about the meds that you are unable to clarify with the patient, DON'T click the **Medications reconciled** checkbox. Instead, use the **Comment** link (or perhaps better, the **Intake Comments** link you used under **Reasons for Visit** above), and/or verbally tell the provider.

Specialty ▼ Rheumatology Visit Type ▼ Office Visit

Intake Histories SOAP Finalize Checkout

Standing Orders Adult Immunizations Peds Immunizations My Plan Procedures Order Management

Care Guidelines Global Days

General  
Vital Signs  
Reason for Visit  
Medications  
Allergies

Next, review allergies. Our patient states this list is correct & complete, so click the **Reviewed, no change** box.

Comment  No known allergies  Allergies added today  Reviewed, no change

Allergen	Reaction	Medication Name	Comment
BEET	Heebee Geebies		
CHLORAL HYDRATE	Speaks in tongues		
CHLORAMPHENICOL	Eyes glowed green		

Now move to the Histories Tab.

Add Update

A detailed review of data entry on the **Histories Tab** is included in another lesson, so in this example we'll keep it simple.

Ashleigh Quagmire (F)    DOB: 01/02/1957 (57 years)    Weight: 170.00 lb (77.11 Kg)    Allergies: (3)    Problems: (7)    Diagnoses: (46)    Medications: (8)

Alerts    OBGYN Details    Patient    Lipid Clinic Data    Order Admin...    Sticky Note    Referring Provider    HIPAA    Advance Directives    Screening Summary

03/26/2014 10:24 AM "USA Histories" x

Specialty ▼ Rheumatology    Visit Type ▼ Office Visit

Intake    **Histories**    SOAP    Finalize    Checkout

Demographics    Order Management    Document Library    Chart Abstraction

Care Guidelines    Global Days    History Review    All History Review details are to be reviewed and included in visit note unless user indicates otherwise

Panel Control: Toggle    Cycle

**Problem List 7**

Show chronic     Show my tracked problem

Problem Description	Side	Notes	Add
Allergic rhinitis			
Benign essential hypertension			
Chronic obstructive lung disease			
Mixed hyperlipidemia			
Osteoarthritis of knee	Bilateral	9 months since last steroid injection.	2
Postmenopausal			
Rheumatoid arthritis			

Refresh    Add    Edit

The screenshot shows a medical history review interface. A green box at the top explains that a detailed review of data entry on the Histories Tab is covered in another lesson. A green oval highlights the Risk Indicators section, which includes TOB (Tobacco Abuse), HTN (Hypertension), DM (Diabetes Mellitus), and CAD (Coronary Artery Disease). A green arrow points from the TOB indicator to a green box that states: 'The nurse notes that the Risk Indicators have been configured, displaying her tobacco abuse.' Another green arrow points from the OBGYN Details link to a green box at the bottom that says: 'OBGYN Detail can be reviewed as desired/pertinent.'

The nurse reviews the **Chronic Conditions List**. There is nothing to add, so she'll click the **Reviewed** checkbox. This is the only individual "Review" checkbox on this template you need to click each encounter.

Demographics | Order Management | Document Library | Chart Abstraction

Care Guidelines | Global Data | **History Review** *All History Review details are to be reviewed and included in visit note unless user indicates otherwise*

Panel Control: Toggle Cycle

**Problem List 7**

Show chronic  Show my tracked problem  No active problems  Reviewed

Problem Description	Side	Notes	Addtl
Allergic rhinitis			
Benign essential hypertension			
Chronic obstructive lung disease			
Mixed hyperlipidemia			
Osteoarthritis of knee	Bilateral	9 months since last steroid injection.	2
Postmenopausal			
Rheumatoid arthritis			

Refresh Add Edit

All of the other History Review links lead to the same popup. Click **one of them**.

Medical/Surgical/Interim

History Review

Side	Date	Encounter Type	Outcome
right	2001		

Specialty ▼ Rheumatology    Visit Type ▼ Office Visit

Intake    **Histories**    SOAP    Finalize    Checkout

Demographics    Order Management    Document Library    Chart Abstraction

Care Guidelines    Global Days    **History Review**    All History Review details are to be reviewed and included in visit note unless user indicates otherwise

Panel Control: Toggle    Cycle

**Problem List** 7

Show chronic     Show my tracked problems

Problem Description	Side	Notes
Allergic rhinitis		
Benign essential hypertension		
Chronic obstructive lung disease		
Mixed hyperlipidemia		
Osteoarthritis of knee	Bilateral	9 months since
Postmenopausal		
Rheumatoid arthritis		

**History Review**

**Med/Surg/Interim Hx:**  Detailed document     Reviewed, no changes (last updated 05/04/2014)  
 Reviewed, updated     History unobtainable:

**Family:**  Detailed document     Reviewed, no changes (last updated 05/04/2014)  
 Reviewed, updated     History unobtainable:

**Social:**  Detailed document     Reviewed, no changes (last updated 05/13/2014)  
 Reviewed, updated     History unobtainable:

Save & Close    Cancel

It is our expectation that all historical elements are at least briefly reviewed at every encounter, so most of these details appear in our notes by default anyway. However, only basic Social History details are defaulted into our notes, so if you've added a lot of other details, you need to specifically select **Detailed document** for Social History.

Now review **Medical/Surgical/Interim** history. While the **Problem List** includes ongoing medical issues, the **Medical/Surgical/Interim** history is for isolated episodes of illness or events such as surgery. She's also had a left carpal tunnel release that isn't listed, so click **Add**.

**Problem List** 7

Show chronic  Show my tracked problem  No active problems  Reviewed

Problem Description	Side	Notes	Addtl
Allergic rhinitis			
Benign essential hypertension			
Chronic obstructive lung disease			
Mixed hyperlipidemia			
Osteoarthritis of knee	Bilateral	9 months since last steroid injection.	2
Postmenopausal			
Rheumatoid arthritis			

---

**Medical/Surgical/Interim**

No relevant past medical/surgical history *All History Review details are to be reviewed and included in visit note unless user indicates otherwise* [History Review](#)

Disease/Disorder	Side	Onset Date	Management	Side	Date	Encounter Type	Outcome
Carpal tunnel syndrome	right		Carpal tunnel release	right	2001		
Appendicitis		1970	Appendectomy				

A full description of how to use these popups is included in the Histories lesson. Here we'll add a **Carpal tunnel release** in **2002** on the **left**, then return to the Histories tab.

Specialty:

Panel Control:

**Medical**

**Surgical**

To add comments, click manage. Date:

- Angioplasty
- Appendectomy
- Arthroscopy
- Back surgery
- Blood transfusion
- CABG
- Cardiac pacemaker
- Carpal tunnel release
- Cataract extraction
- Cholecystectomy

- Colectomy
- Colostomy
- Gastric bypass
- Hair
- Hip replacement
- Hysterectomy
- Thyroidectomy
- Tonsillectomy
- Other

**Manage Past Medical History**

Disease/Disorder:

SNOMED code:

Onset date:  /  /  Side:

Management:

SNOMED code:

Date:  /  /  Side:

Facility:

Provider: (Last)  (First)

Outcome/Comments

Outcome:

Comments:

Characters left: 974

**Past Medical History Grid**

Disease/Disorder	Side	Onset Date
Carpal tunnel syndrome	right	
Appendicitis		1970

Specialty ▼ Rheumatology

Visit Type ▼ Office Visit



Intake

Histories

SOAP

Finalize

Checkout

Demographics

Order Management

Document Library

Chart Abstraction

Care Guidelines

Global Days

History Review

*All History Review details are to be reviewed and included in visit note unless user indicates otherwise*

Panel Control:

Toggle



Cycle

Problem List 7
 Show chronic
  Show my tracked problem

 No active problems
  Reviewed

Problem Description	Side	Notes	Addtl
Allergic rhinitis			
Benign essential hypertension			
Chronic obstructive lung disease			
Mixed hyperlipidemia			
Osteoarthritis of knee	Bilateral	9 months since last steroid injection.	2
Postmenopausal			
Rheumatoid arthritis			

This additional history displays.

Refresh

Add

Edit

## Medical/Surgical/Interim

 No relevant past medical/surgical history

*All History Review details are to be reviewed and included in visit note unless user indicates otherwise* [History Review](#)

Disease/Disorder	Side	Onset Date	Management	Side	Date	Encounter Type	Outcome
Carpal tunnel syndrome	left		Carpal tunnel release	left	2002		successful
Carpal tunnel syndrome	right		Carpal tunnel release	right	2001		
Appendicitis		1970	Appendectomy				

Refresh

Interim History

Add

Edit

Remove

Specialty ▾ Rheumatology

Visit Type ▾ Office Visit



Intake

Histories

SOAP

Finalize

Checkout

Demographics

Order Management

Document Library

Chart Abstraction

Now move to the Family History. We have nothing to add.

Medical/Surgical/Interim

Diagnostic Studies

Family

 No relevant family history
  Adopted - no family history known

 All History Review details are to be reviewed and included in visit note unless user indicates otherwise
 [History Review](#)

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death	Comments
Mother				Depression		N	

Then move to Social History. We can review some details by selecting the left side navigation.

Social

 History Review
 All History Review details are to be reviewed and included in visit note unless user indicates otherwise
 Last documented
  All
 

Substances	Encounter Date	Tobacco Use	Tobacco Type	Smoking Status	Usage Per Day	Pack Years	Date Quit
<ul style="list-style-type: none"> <li>▶ Tobacco</li> <li>Alcohol/Caffeine</li> </ul>	02/26/2014	Yes	Cigarette	Heavy tobacco smoker	1 Packs	35.00	
<ul style="list-style-type: none"> <li>Statuses</li> <li>Lifestyle</li> <li>Occupation</li> <li>Comment</li> <li>Diet History</li> <li>Environmental</li> </ul>	Encounter Date:Time						

To review further details or to make additions click the **Add** button.

Add

- ◆ Tobacco
- ◆ Alcohol/Caffeine
- ◆ Statuses
- ◆ Lifestyle
- ◆ Occupation
- ◆ Comments
- ◆ Diet History
- ◆ Environmental



Save &amp; Close

Panel Control: ▼ Toggle ▲ ↺ Cycle ↻

## Tobacco Use

Have you ever used tobacco?  No/never  Yes  Unknown [Exclusions](#) Reviewed Updated: 03/23/2014

## Smoking Tobacco Use

Tobacco type:	Use daily:	Usage per day:	Years used:	Pack year:	Age started:	Age stopped:
<input checked="" type="checkbox"/> Cigarette	<input checked="" type="checkbox"/>	1 Packs	35	35.00		
<input type="checkbox"/> Cigarillo	<input type="checkbox"/>	cigarillos				
<input type="checkbox"/> Cigar	<input type="checkbox"/>	cigars				
<input type="checkbox"/> Pipe	<input type="checkbox"/>	pipes				

## Non-Smoking Tobacco Use

Tobacco type:	Use daily:	Usage per day:	Years used:	Age started:	Age stopped:
<input type="checkbox"/> Chewing	<input type="checkbox"/>	units			
<input type="checkbox"/> Smokeless	<input type="checkbox"/>	units			
<input type="checkbox"/> Snuff	<input type="checkbox"/>	units			

Review & update as necessary. Here we have nothing to add, so we'll click the Reviewed checkbox, then Save & Close.

Encounter Date	Tobacco Type	Usage Per Day	Years Used	Pack Year	Status	Age Started	Age Stopped
02/26/2014	Cigarette	1 Packs	35.00	35.00	Heavy tobacco smoker		

## Efforts To Quit Tobacco

Have you ever tried to quit using tobacco?  No/never  Yes  Unknown

Tobacco type:	Month:	Day:	Year:	Longest tobacco free:	Cessation method:	Relapse reason:
<input type="text"/>	Quit:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Add Update Clear

Specialty ▾ Rheumatology

Visit Type ▾ Office Visit

 Intake
 **Histories**
 SOAP
 Finalize
 Checkout

Demographics | Order Management | Document Library | Chart Abstraction

 Care Guidelines | Global Days | **History Review**
*All History Review details are to be reviewed and included in visit note unless user indicates otherwise*

Panel Control: Toggle Cycle

**Problem List** 7
**Medical/Surgical/Interim**
**Diagnostic Studies**
**Family**
 No relevant family history
  
  Adopted - no family history known

*All History Review details are to be reviewed and included in visit note unless user indicates otherwise*
[History Review](#)

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death	Comments
Mother				Depression		N	

**Social**
 Last documented
  
  All
 

When the nurse is done entering data she'll click the **Intake Note** button at the bottom of the Intake or Histories Tab.

Message Per Day	Pack Years	Date Quit
Packs	35.00	

Developmental History

Confidential History

Add

**Intake Note**

TX Text

Segoe UI

10

B

I

U

100%

PATIENT: Ashleigh Quagmire  
DATE OF BIRTH: 01/02/1957  
DATE: 03/26/2014 10:24 AM  
HISTORIAN: self  
VISIT TYPE: Office Visit

### History of Present Illness:

1. Rheumatoid arthritis
2. hand pain & stiffness

Intake Comments: RA X 20 yrs, mainly in hands. Rheumatologist OOT had her on meloxicam & Plaquenill. Had been out of Plaquenil till recently resumed by PCP.

### Problem List:

Problem Description	Onset Date	Chronic	Notes
Benign essential hypertension		Y	
Postmenopausal	01/29/2014	Y	
Allergic rhinitis		Y	
Osteoarthritis of knee		Y	
Chronic obstructive lung disease	02/24/2014	Y	
Rheumatoid arthritis		Y	
Mixed hyperlipidemia	02/24/2014	Y	

The **Intake Note** is created, summarizing all of the data you've just entered.

Close this, returning you to the **Intake Tab**.

Specialty ▼ Rheumatology    Visit Type ▼ Office Visit

TOB    HTN    DM    CAD

Intake    **Histories**    SOAP    Finalize    Checkout

Demographics    Order Management    Document Library    Chart Abstraction

The patient is ready for the provider. On the re-expanded Info Bar & click the Tracking icon.

Care Guide

Problem List

Medical/Surgical

Diagnostic Studies

Family

No relevant family history     Adopted - no family history known

All History Review details are to be reviewed and included in visit note unless user indicates otherwise    History Review

Relationship	Family Member Name	Deceased	Age at Death	Condition	Onset Age	Cause of Death	Comments
Mother				Depression		N	

Add    Edit    Remove

Social

Click in the **Room** box & select a room; alternately, you can just type a room number in the box.

Appointment date: 02/21/2014

Today's date: 02/24/2014

Appointment information:

9:00 AM DUFFY MD, ROBERT LAMAR Reason:

Room:

[Empty text box]

Status:

Ngkbn Get Dbpicklist Items [X]

- List Item
- Checkout
- Exam 1
- Exam 2
- Exam 3
- Exam 4
- Exam 5
- Exam 6
- Lab
- Procedure room
- Waiting room
- X-ray

Patient Tracking:

Appt Time	Room

ment date shown.

Refresh

OK

Cancel

Task

EHR Appointments

Save & Close

Cancel



# Today's Patient Tracking



Appointment date: 02/21/2014

Today's date: 02/24/2014

## Appointment information:

9:00 AM DUFFY MD, ROBERT LAMAR Reason:

Room:

Exam 1

Status:

waiting for provider

(Entries uploaded on "Save and Close".)

## Patient Tracking:

The Inbox will update today's calendar and not the appointment date shown.

Appt Time ▾	Room	Status	Time	Documented By

When done click **Save & Close.**



Task

EHR Appointments

Save & Close

Cancel

Patient

Location

Provider

Date

NextGen EHR Ashleigh Quagmire MRN: 00000007762 DOB: 01/02/1957 (Female) AGE: 57 years 2 months - 03/26/2014 10:24 AM: "\*\*USA Home Page"

File Edit Default View Tools Admin Utilities Window Help

Logout Clear Deletes USA MASTIN DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Medications Templates Documents Images Orders Problems Apps Close

Ashleigh Quagmire (F) DOB: 01/02/1957 (57 years) Weight: 170.00 lb (77.11 Kg) Allergies: (3) Problems: (7) Diagnoses: (46) Medications: (8)

Address: 123 Toejam Trace Mobile, AL 36604 MRN: 00000007762 Emergency Relation: PCP: ATKINSON, TANGELA C ...  
 Contact: (251) 555-1234 (Home) Insurance: MEDICAID OF ALABAMA Emergency Phone: Referring:  
 NextMD: No Pharmacy 1: CAFFEYS PHARM... Rendering: DUFFY, ROBERT LAMAR ...

Alerts OBGYN Det... Patient Lipid Clinic Data Order Admin... Sticky Note Referring Provider HIPAA Advance Directives Screening Summary

03/26/2014 10:24 AM: "\*\*USA Home Page"

Specialty: Rheumatology Visit Type: Office Visit

Intake Histories SOAP Finalize Checkout

Care Guidelines Global Days

Medical Chart Summary

	Date	Time	Temp F	BP	Pulse	Respiration	Ht In	Wt Lb	BMI	BSA	Pain Score	HAQ Score	Pulse
HPI's	03/26/2014	11:55 AM	99.2	138/84	86	16	65.00	170.00	28.29				95
Plans	03/25/2014	8:56 AM	99.2	138/84	86	16	65.00	170.00	28.29				95
Problem List	03/14/2014	11:57 AM	99.2	138/84	84	20	65.00	170.00	28.29				95
Medications	03/14/2014	11:57 AM	99.2	138/84	84	20	65.00	170.00	28.29				95
Allergies	03/14/2014	11:57 AM	99.2	138/84	84	20	65.00	170.00	28.29				95
Labs	03/14/2014	11:57 AM	99.2	138/84	84	20	65.00	170.00	28.29				95
Diagnostics	03/14/2014	11:57 AM	99.2	138/84	84	20	65.00	170.00	28.29				95
Vitals	03/26/2014	10:58 PM	99.2	144/88	88	16	65.00	156.00	25.96				95
Physical Exams	03/26/2014	10:58 PM	99.2	144/88	88	16	65.00	156.00	25.96				95
Office Procedures	03/26/2014	10:58 PM	99.2	144/88	88	16	65.00	156.00	25.96				95
Referrals	03/26/2014	10:58 PM	99.2	144/88	88	16	65.00	156.00	25.96				95
Immunizations	03/26/2014	10:58 PM	99.2	144/88	88	16	65.00	156.00	25.96				95
Past Medical/Surgical History	03/26/2014	10:58 PM	99.2	144/88	88	16	65.00	156.00	25.96				95
Family History	03/26/2014	10:58 PM	99.2	144/88	88	16	65.00	156.00	25.96				95
Tobacco Usage	03/26/2014	10:58 PM	99.2	144/88	88	16	65.00	156.00	25.96				95

Patient History

- New Lock Search
- 03/26/2014 10:24 AM
  - \*USA Intake
  - Medication
  - USA Histories
  - intake\_note
- 03/25/2014 05:25 PM
- 03/15/2014 03:09 PM
- 03/14/2014 10:40 AM
- 03/05/2014 01:06 PM
- 03/04/2014 01:45 PM
- 02/26/2014 10:59 AM
- 02/25/2014 10:57 PM
- 02/24/2014 10:21 AM

Ready

NGDev USA Health Services Foundation rlduffy CAP NUM SCRL 03/26/2014

The provider then opens the chart from the appointment list & performs the 4-point check.

Ashleigh Quagmire (F) DOB: 01/02/1957 (57 years) Weight: 170.00 lb (77.11 Kg) Allergies: (3) Problems: (7) Diagnoses: (46) Medications: (8)

Address: 123 Toejam Trace Mobile, AL 36604 MRN: 000000007762 Insurance: MEDICAID OF ALABAMA Emergency Relation: PCP: ATKINSON, TANGELA C ...  
Contact: (251) 555-1234 (Home) NextMD: No Emergency Phone: Referring: ...  
Pharmacy 1: CAFFEYS PHARM... Rendering: DUFFY, ROBERT LAMAR ...

Alerts GYN Details Patient Lipid Clinic Data Order Admin Sticky Note Referring Provider HIPAA Advance Directives Screening Summary

03/26/2014 10:24 AM: ""USA Home Page"

Specialty Rheumatology Visit Type Office Visit

Intake Histories SOAP Finalize Checkout

Standing Orders Adult Immunizations Peds Immunizations My Plan Procedures Order Management Document Library

Care Guidelines Global Days

Panel Control: Toggle Cycle

TOB HTN DM CAD

Patient History

Patie... Patie... Cate...

New Lock Search

- 03/26/2014 10:24 AM
  - \*USA Intake
  - Medication
  - USA Histories
  - intake\_note
- 03/25/2014 05:25 PM
- 03/15/2014 03:09 PM
- 03/14/2014 10:40 AM
- 03/05/2014 01:06 PM
- 03/04/2014 01:45 PM
- 02/26/2014 10:59 AM
- 02/25/2014 10:57 PM
- 02/24/2014 10:21 AM

The provider generally starts on the Home Tab.  
It's good to begin by looking for **Sticky Notes & Alerts**; there are no Alerts on this patient, & you review the **Sticky Note** about the patient's daughter being a nurse at the Family Medicine Clinic.  
Also take note of the **Risk Indicators**.

Medical Summary

HPI's	Date	Time	Temp F	BP	Pulse	Respiration	Ht In	Wt Lb	BMI	BSA	Pain Score	HAQ Score	Pulse
Plans	03/26/2014	11:55 AM	99.2	138/84	86	16	65.00	170.00	28.29				95
Problem	03/25/2014	5:50 PM	99.2	138/84	86	16	65.00	170.00	28.29				95
Medication	03/24/2014	1:58 PM	99.2	138/84	86	16	65.00	170.00	28.29				95
Allergies	03/24/2014	10:41 AM	99.2	138/84	86	16	65.00	170.00	28.29				95
Labs	03/04/2014	1:49 PM	99.4	134/78	78	16	65.00	160.00	26.63				95
Diagnosis	03/01/2014	10:01 AM	99.2	138/84	86	16	65.00	170.00	28.29				95
Vitals	02/28/2014	10:01 AM	99.2	138/84	86	16	65.00	170.00	28.29				95
Physical Exams	01/29/2014	3:27 PM	99.7	140/90	100	20	65.00	150.20	24.99				95
Office Pro													
Referrals													
Immunizations													
Past Medical History													
Family History													
Tobacco Usage													

You can select any of the headings on the left to view various aspects of the chart. In particular, this is a good place to look at Office Lab results or review previous vital signs.

The screenshot displays a medical software interface. At the top, there are navigation tabs for 'Alerts', 'OBGYN Details', 'Patient', 'Lipid Clinic Data', 'Order Admin...', 'Sticky Note', 'Referring Provider', 'HIPAA', 'Advance Directives', and 'Screening Summary'. Below this is a breadcrumb trail: '03/26/2014 10:24 AM : \*\*USA Home Page'. The main content area is titled 'Medical Chart Summary' and includes a navigation sidebar on the left with categories like 'HPI's', 'Plans', 'Problem List', 'Medications', 'Allergies', 'Labs', 'Diagnostics', 'Vitals', 'Physical Exams', 'Office Procedures', 'Referrals', 'Immunizations', 'Past Medical/Surgical History', 'Family History', and 'Tobacco Usage'. The 'Vitals' category is selected. The main area shows a table of vital signs data. To the right, there is a 'Patient History' sidebar showing a list of dates and times for various visits, with a search and navigation interface.

	Date	Time	Temp F	BP	Pulse	Respiration	Ht In	Wt Lb	BMI	BSA	Pain Score	HAQ Score	Pulse
HPI's	03/26/2014	11:55 AM	99.2	138/84	86	16	65.00	170.00	28.29				95
Plans	03/25/2014	5:50 PM	99.2	138/84	86	16	65.00	170.00	28.29				95
Problem List	03/14/2014	11:58 AM		142/84	84	20							
Medications	03/14/2014	10:45 AM	98.8	162/90	102	22	65.00	182.00	30.29				
Allergies	03/04/2014	1:49 PM	99.4	134/78	78	16	65.00	160.00	26.63				
Labs	02/26/2014	10:58 PM	99.2	144/88	88	16	65.00	156.00	25.96				
Diagnostics	02/21/2014	2:01 PM	98.9	132/82	78	11	65.00	162.00	26.96				
Vitals	01/29/2014	3:27 PM	99.7	140/90	100	20	65.00	150.20	24.99				
Physical Exams													
Office Procedures													
Referrals													
Immunizations													
Past Medical/Surgical History													
Family History													
Tobacco Usage													

Note also you can use the collapsible panels or scroll down to see a lot more information.

The Problem List is viewable & editable here.

Specialty ▼ Rheumatology

Intake

Histories

SOAP

Finalize

Checkout

Standing Orders

Adult Immunizations

Peds Immunizations

My Plan

Procedures

Order Management

Document Library

Care Guidelines

Global Days

Panel Control:

Toggle

↶

↷

Cycle

### Medical Chart Summary

### Problem List 7

Show chronic  Show my tracked problems

No active problems  Reviewed

Last Addressed	Problem Description	Onset Date	Chronic	Secondary	Clinical Status	Provider	Location	Notes
	Osteoarthritis of knee		Y	N		DUFFY, ROBERT LAMAR	USA FAMILY MEDICINE	9 months since last steroid injection.
	Postmenopausal	01/29/2014	Y	N		DUFFY, ROBERT LAMAR	USA FAMILY MEDICINE	
	Allergic rhinitis		Y	N		DUFFY, ROBERT LAMAR	USA FAMILY MEDICINE	
	Rheumatoid arthritis		Y	N		DUFFY, ROBERT LAMAR	USA FAMILY MEDICINE	
02/05/2014	Benign essential		Y	N		DUFFY, ROBERT LAMAR	USA FAMILY MEDICINE	

Refresh

Add

Edit

### History Summary

History Review

All History Review details are to be reviewed and included in visit note unless user indicates otherwise

Confidential

(last updated 02/24/2014)

No relevant past medical/surgical history

- Medical
- Surgical/mgmt
- Interim
- Social
- Family
- Diagnostic

Disease/Disorder	Side	Onset Date	Management	Side	Date	Encounter Type
carpal tunnel syndrome	left		carpal tunnel release	left	2002	
carpal tunnel syndrome	right		carpal tunnel release	right	2002	
carpal tunnel syndrome	right		carpal tunnel release	right	2002	

Likewise, you can review & update everything else that appears on the Histories Tab from here. Select the category of history desired on the left.

## Allergies

Comment
  No known allergies
  Allergies added today
  Reviewed, no change

Allergen	Reaction	Medication Name	Comment
BEET	Heebee Geebies		
CHLORAL HYDRATE	Speaks in tongues		
CHLORAMPHENICOL	Eyes glowed green		

Allergies, meds, vital signs, office labs—everything that can be found on the **Intake & Histories Tabs** can be reviewed & if necessary updated from this tab.

## Medications

Patient status:  Transitioning into care  Summary of care received 

Comment
  No medications
  Medications reconciled
 

Medication	Sig Description
Advair Diskus 250 mcg-50 mcg/dose powder for inhalation	1 puff 2 times daily approx 12 hours apart
albuterol sulfate HFA 90 mcg/actuation Aerosol Inhaler	2 puffs every 4-6 hrs as needed for shortness of breath or wheezing
bupropion HCl XL 300 mg 24 hr tablet, extended release	
fluticasone 50 mcg/actuation Nasal Spray, Susp	2 sprays each nostril daily for 1 wk, then 1 spray each nostril daily thereafter
hydrocortisone 2.5 % Topical Cream	Apply twice daily to rash
hydroxychloroquine 200 mg tablet	1 twice daily
lisinopril 20 mg-hydrochlorothiazide 25 mg tablet	1 daily
loratadine 10 mg tablet	1 daily as needed for allergies

Add/Update

Reconcile

**Vital Signs**  Vital Signs Outside Normal Range

[History](#) | [Graph](#)

Time	Ht (in)	Wt (lb)	BMI	BP	Pulse	Respiration	Temp (F)	Pulse Ox Rest	BSA	Pain level	Comments
11:55 AM	65.00	170.00	28.29	138/84	86	16	99.2	95			

Add

Edit

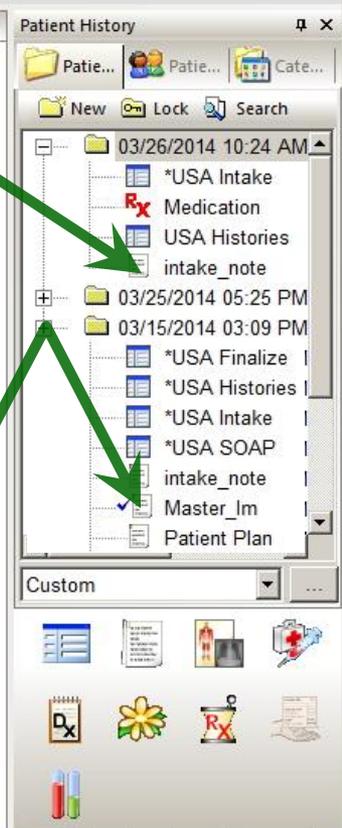
Remove

You can also just review the intake\_note to see a summary as well. Regardless of the method chosen, the provider is responsible for reviewing & confirming this information, & updating it as necessary.

Patient History

- New Lock Search
- 03/26/2014 10:24 AM
  - \*USA Intake Medication
  - USA Histories intake\_note
- 03/25/2014 05:25 PM
  - \*USA Finalize
  - \*USA Histories
  - \*USA Intake
  - \*USA SOAP intake\_note
  - Master\_Im
  - Patient Plan

Custom



Medical Chart Summary

HPI's	Date	Time	Temp F	BP	Pulse	Respiration	Ht In	Wt Lb	BMI	BSA	Pain Score	HAQ Score	Pulse
Plans	03/26/2014	11:55 AM	99.2	138/84	86	16	65.00	170.00	28.29				95
Problem List	03/25/2014	5:50 PM	99.2	138/84	86	16	65.00	170.00	28.29				95
Medications	03/14/2014	11:58 AM		142/84	84	20							
Allergies	03/14/2014	10:45 AM	98.8	162/90	102	22	65.00	182.00	30.29				
Labs	03/04/2014	1:49 PM	99.4	134/78	78	16	65.00	160.00	26.63				

You could also review the Master\_Im (visit note) from the last visit with the PCP.

NextGen EHR: Ashleigh Quagmire MRN: 000000007762 DOB: 01/02/1957 (Female) AGE: 57 years 2 months - 03/26/2014 10:24 AM: ""USA Home Page"

File Edit Default View Tools Admin Utilities Window Help

Logout Save Clear Delete USA MASTIN DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Medications Templates Documents Images Orders Problems Apps Close

Ashleigh Quagmire (F) DOB: 01/02/1957 (57 years) Weight: 170.00 lb (77.11 Kg) Allergies: (3) Problems: (7) Diagnoses: (46) Medications: (8)

Address: 123 Toejam Trace Mobile, AL 36604 MRN: 000000007762 Insurance: MEDICAID OF ALABAMA Emergency Relation: PCP: ATKINSON, TANGELA C ...  
 Contact: (251) 555-1234 (Home) NextMD: No Emergency Phone: Referring: Pharmacy 1: CAFFEYS PHARM... Rendering: DUFFY, ROBERT LAMAR ...

Alerts OBGYN Details Patient Lipid Clinic Data Order Admin... Sticky Note Referring Provider HIPAA Advance Directives Screening Summary

03/26/2014 10:24 AM: ""USA Home Page"

Specialty ▼ Rheumatology Visit Type ▼ Office Visit

Intake Histories SOAP Finalize Checkout

Standing Orders Adult Immunizations Peds Immunizations My Plan Procedures Order Management Document Library

Care Guidelines Global Days Panel Control: Toggle Cycle

Medical Chart Summary

	Date	Time	Temp F	BP	Pulse	Respiration	Ht In	Wt Lb	BMI	BSA	Pain Score	HAQ Score	Pulse
HPI's													
Plans	03/26/2014	11:55 AM	99.2	138/84	86	16	65.00	170.00	28.29				95
Problem List	03/25/2014	5:50 PM	99.2	138/84	86	16	65.00	170.00	28.29				95
Medications	03/14/2014	11:58 AM		142/84	84	20							
Allergies	03/14/2014	10:45 AM	98.8	162/90	102	22	65.00	182.00	30.29				
Labs	03/04/2014	1:49 PM	99.4	134/78	78	16	65.00	160.00	26.63				
Diagnostics	02/26/2014	10:58 PM	99.2	144/88	88	16	65.00	156.00	25.96				
Vitals	02/21/2014	2:01 PM	98.9	132/82	78	11	65.00	162.00	26.96				
Physical Exams	01/29/2014	3:27 PM	99.7	140/90	100	20	65.00	150.20	24.99				
Office Procedures													
Referrals													
Immunizations													
Past Medical/Surgical History													
Family History													
Tobacco Usage													

Ready

NGDevl USA Health Services Foundation rlduffy CAP NUM SCRL 03/26/2014

When you're done reviewing the chart, move to the SOAP tab.

We'll start entering the HPI. First note that you can keep or edit this introductory line—or delete it all together.

Intake Histories SOAP Finalize Checkout

Standing Orders | Adult Immunizations | Peds Immunizations | My Plan | Procedures | Order Management

Care Guidelines | Global Days | Panel Control: Toggle Cycle

Reason for Visit

Introduction:  
This 57 year old female presents for Rheumatoid arthritis and hand pain & stiffness.

Do not launch HPI

Reason for Visit	History of Present Illness
Rheumatoid arthritis	
hand pain & stiffness	

Intake Comments

Diagnostics Comments

If you didn't previously note them, you can review the nurse's Intake Comments.

Next, you have some options as to how to proceed. You can click on one of the Reasons for Visit to open the HPI Popup. We'll click **rheumatoid arthritis**.

Information on this HPI that has been pre-populated from another HPI must be changed on the original HPI to prevent conflicting documentation.

You can use picklists, checkboxes, & bullets to document elements of the HPI. You can type a little more info in the Comments box.



Location:

- Jaw:
- Neck
- Mid back
- Low back
- Shoulder:
- Elbow:
- Wrist:
- Hand:
- Hip:
- Knee:
- Ankle:
- Mid foot:
- Forefoot:

Other:

Quality:

- Aching
- Pain with use
- Dull
- Catching
- Sharp
- Throbbing

Other:

Aggravated By:

- Activity
- Rest
- Sleep
- Turning neck
- Reaching
- Gripping
- Standing
- Walking
- Climbing stairs
- Arising from a chair
- Cold or rainy weather
- Nothing

Other:

Relieved By:

- Activity
- Bracing
- Cold
- Heat
- Injection
- OTC medications:
- Rest
- RX medications
- Nothing

Associated Symptoms/Pertinent Negatives:

- No associated symptoms
- No pertinent negatives

Neg Pos

- Abdominal pain
- Activity limitation
- Anorexia
- Eye symptoms:
- Fatigue

Other associated symptoms:

Neg Pos

- Headache
- Joint swelling:
- Limping
- Morning stiffness:
- Paresthesia

Other pertinent negatives:

- Rash
- SICCA symptoms
- Weakness
- Weight loss

ADLs  
Functional Limitations

Comments:

When done click Save & Close.

Save & Close

Cancel

And you can save & reuse presets.

Entries from the HPI popup displays on the SOAP Tab.

Specialty ▼ Rheumatology

Visit Type ▼ Office Visit

Intake

Histories

SOAP

Finalize

Checkout

Standing Orders

Adult Immunizations

Peds Immunizations

My Plan

Procedures

Order Management

Care Guidelines

Global Days

Panel Control: Toggle Cycle

### Reason for Visit

Introduction:

This 57 year old female presents for Rheumatoid arthritis and hand pain & stiffness.

Do not launch HPI

◆ Intake Comments

- Back pain
- Fibromyalgia syndrome
- Lupus
- Musculoskeletal pain
- Osteoarthritis
- Osteoporosis
- PMR
- Polyarthopathy
- Psoriatic arthritis
- Rheumatoid arthritis

Additional / Manage

#### Reason for Visit

Rheumatoid arthritis  
hand pain & stiffness

#### History of Present Illness

Onset was 20 years ago. Severity level is moderate. Location of the pain is bilateral hand. The patient describes the discomfort as pain with use. It occurs persistently. The problem is fluctuating. Symptom is aggravated by activity. Relieving factors include Rx medications. She is experiencing activity limitation, fatigue and joint swelling of right digit(s). Pertinent negatives include anorexia, eye symptoms, rash, weakness and weight loss.

Diagnostics

Comments

Specialty ▼ Rheumatology

Visit Type ▼ Office Visit

Intake

Histories

SOAP

Finalize

Checkout

Standing Orders

Adult Immunizations

Peds Immunizations

My Plan

Procedures

Order Management

Care Guidelines

Global Days

Panel Control: Toggle Cycle

Reason for Visit

## Comments about HPI Popups:

- HPI popups can present a rapid way to document key elements of the HPI if the user is very familiar with the popup.
- For some common complaints you may find yourself saying the same thing repeatedly throughout the day, & using presets may be of help there—though it takes some care not to inadvertently document erroneous or conflicting HPI details when the patient's story differs from the preset.
- And the elements you pick allow the coding assistant to help you bill for the visit—particularly useful for new patient encounters, which require all 3 billing elements.

## Comments about HPI Popups:

- But many users find the "pick & click" nature of using HPI popups tedious, slow, & frustrating—and distracting when trying to perform documentation in real time in the exam room.
- The Comments boxes on the HPI popups provide only a limited amount of space to type, which can vary from one to another, so that you never know when you're going to run out of space.
- And when entries from a series of "picks & clicks" are condensed into something resembling English, the result is often awkwardly-worded, not really reflecting any uniqueness of the story or the story-teller. Your eyes glaze over when you read it; sometimes you can't even recognize whether you performed the visit or if it was done by one of your colleagues.

Specialty ▾ Rheumatology

Visit Type ▾ Office Visit

Home | 
 Intake | 
 Histories | 
 SOAP | 
 Finalize | 
 Checkout

Standing Orders | 
 Adult Immunizations | 
 Peds Immunizations | 
 My Plan | 
 Procedures | 
 Order Management

Care Guidelines | Global Days

Panel Control: Toggle ↶ ↷ Cycle ↻

### Reason for Visit



#### Introduction:

This 57 year old female presents for Rheumatoid arthritis and hand pain & stiffness.

Do not launch HPI

[Intake Comments](#)

	Reason for Visit	History of Present Illness
Back pain	Rheumatoid arthritis	Onset was 20 years ago. Severity level is moderate. Location of the pain is bilateral hand. The patient describes the discomfort as pain with use. It occurs persistently. The problem is fluctuating. Symptom is aggravated by activity. Relieving factors include Rx medications. She is experiencing activity limitation, fatigue and joint swelling of right digit(s). Pertinent negatives include anorexia, eye symptoms, rash, weakness and weight loss.
Fibromyalgia syndrome	hand pain & stiffness	
Lupus		
Musculoskeletal pain		
Osteoarthritis		
Osteoporosis		
PMR		
Polymyositis		
Pseudotumor cerebri		
Rheumatoid arthritis		

There is an alternative many providers will find more comfortable than using the HPI popups. Click the **Comments** button.

Diagnostics Comments



Chief complaint/reason for visit:

Manage My Phrases

COPD (consult)

My Phrases

1. Followed by pulmonologist OOT for ~5 yrs for COPD, now on Advair 50/250 BID. Rarely needing albuterol except w/ mod'ly hard exertion or extreme heat. Since she's pretty sedentary, this hasn't limited ADLs much. Still smoking, & not interested in assistance stopping at this time. Just wanted to get estab w/ pulmonologist again after moving to Mobile.

sleep apnea (consult)

My Phrases

2. Husband says she snores & tosses/turns a lot. Wakes up not feeling rested, & often naps during the day. Saw ad about sleep apnea, & thinks this may actually be a bigger problem w/ her breathing than the smoking. Wants to be tested for OSA.

3.

Here you have essentially unlimited space to type the story. Sketch it out with a few words & phrases in real time while interviewing the patient; flesh it out later if desired. You can jump from one complaint to another, just like patients do when telling their story. And you have access to **My Phrases**—a robust way to save & reuse text that you say repeatedly throughout the day. (Setup & use of **My Phrases** is covered in the User Personalization demonstration.)

When done click **Save & Close**.

Save & Close

Cancel

Your entries are displayed. Note that use of HPI popups & HPI Comments are not mutually exclusive. Especially for new patients you may wish to use the "pick & click" options on the HPI popups for coding purposes, but use HPI Comments to actually "tell the story."

Introduction:

This 57 year old female presents for Rheumatoid arthritis and hand pain & stiffness.

Do not launch HPI

Back pain  
Fibromyalgia syndrome  
Lupus  
Musculoskeletal pain  
Osteoarthritis  
Osteoporosis  
PMR  
Polyarthopathy  
Psoriatic arthritis  
Rheumatoid arthritis

Additional / Manage

Reason for Visit	History of Present Illness
Rheumatoid arthritis	Onset was 20 years ago. Severity level is moderate. Location of the pain is bilateral hand. The patient describes the discomfort as pain with use. It occurs persistently. The problem is fluctuating. Symptom is aggravated by activity. Relieving factors include Rx medications. She is experiencing activity limitation, fatigue and joint swelling of right digit(s). Pertinent negatives include anorexia, eye symptoms, rash, weakness and weight loss.
Rheumatoid arthritis (comments)	Referred to get estab w/ rheumatologist after moving to area. She brought some records from her prev rheumatologist in Ipsiwth, including lab studies showing +ANA in speckled pattern, & several elevated ESRs. CBC, basic chems nl. Was on Plaquenil until the move, when she ran out. PCP recently restarted at 200 mg BID while awaiting referral. Biggest c/o is hand pain, swelling. Deformity & disability has been escalating over last yr even before running out of Plaquenil. She asks about new meds for RA she's seen advertised; prev MD was considering this before she had to move to Mobile due to husband's job.
hand pain & stiffness	

Diagnostics

Comments

Working down the **SOAP** tab, you come to the **Review of Systems**. Note that some items that are shared with the HPI popups may already be documented. For an established patient, this may be all the ROS you wish to perform.

Specialty ▼ Rheumatology      Visit Type ▼ Office Visit

Intake    Histories    **SOAP**    Finalize    Checkout

Standing Orders | Adult Immunizations | Peds Immunizations | My Plan | Procedures | Order Management

Care Guidelines | Global Days |      Panel Control: Toggle Cycle

Reason for Visit

**Review of Systems**

System	Neg/Pos	Findings
Constitutional	Positive	Fatigue.
Constitutional	Negative	Weight loss.
Eyes	Negative	Eye symptoms.
GI	Negative	Anorexia.
Integumentary	Negative	Rash.
Musculoskeletal	Positive	Activity limitation, Joint swelling.
MS	Negative	MS symptoms.
Reproductive	Positive	The patient is post-menopausal.

Constitutional  
HEENT  
Respiratory  
Cardiovascular  
Vascular  
Gastrointestinal  
Genitourinary  
Reproductive  
Metabolic | Endocrine  
Neuro | Psychiatric  
Dermatologic  
Musculoskeletal  
Hematologic  
Immunologic

One Page ROS - Female

If you need to record further ROS, a good place to start is with the one-screen ROS option you see, which is age & gender-specific. Click **One Page ROS - Female**.

Make additional entries as necessary. You can click on any system heading to take you to a more detailed ROS for that system. And you can save & reuse presets.

ROS-Female

Information on this ROS that has been pre-populated from a HPI must be changed on the HPI to prevent conflicting documentation.

ROS Defaults:

<b>Constitutional</b> <input type="checkbox"/> All neg	<b>Cardiovascular</b> <input type="checkbox"/> All neg	<b>Reproductive</b> <input type="checkbox"/> All neg	<b>Neurological</b> <input type="checkbox"/> All neg	<b>Musculoskeletal</b> <input type="checkbox"/> All neg
<b>Neg Pos</b>	<b>Neg Pos</b>	<b>Neg Pos</b>	<b>Neg Pos</b>	<b>Neg Pos</b>
<input type="radio"/> Chills	<input type="radio"/> Chest pain	<input type="radio"/> Abnormal Pap	<input checked="" type="radio"/> Dizziness	<input checked="" type="radio"/> Back pain
<input type="radio"/> Fatigue	<input checked="" type="radio"/> Claudication	<input type="radio"/> Dysmenorrhea	<input type="radio"/> Extremity numbness	<input type="radio"/> Joint pain
<input checked="" type="radio"/> Fever	<input type="radio"/> Edema	<input type="radio"/> Dyspareunia	<input type="radio"/> Extremity weakness	<input type="radio"/> Joint swelling
<input type="radio"/> Malaise	<input type="radio"/> Palpitations	<input type="radio"/> Hot flashes	<input type="radio"/> Gait disturbance	<input type="radio"/> Muscle weakness
<input type="radio"/> Night sweats	<input type="radio"/> Other:	<input type="radio"/> Irregular menses	<input checked="" type="radio"/> Headache	<input type="radio"/> Neck pain
<input type="radio"/> Weight gain	<input type="text"/>	<input type="radio"/> Vaginal discharge	<input type="radio"/> Memory loss	<input checked="" type="radio"/> Other:
<input checked="" type="radio"/> Weight loss		<input type="radio"/> Other:	<input type="radio"/> Seizures	<input type="text" value="hand stiffness"/>
<input type="radio"/> Other:		<input type="text"/>	<input type="radio"/> Tremors	
<input type="text"/>			<input type="radio"/> Other:	

<b>HEENT</b> <input type="checkbox"/> All neg	<b>Gastrointestinal</b> <input type="checkbox"/> All neg	<b>Integumentary</b> <input type="checkbox"/> All neg	<b>Psychiatric</b> <input type="checkbox"/> All neg	<b>Hematologic / Lymphatic</b> <input type="checkbox"/> All neg
<b>Neg Pos</b>	<b>Neg Pos</b>	<b>Neg Pos</b>	<b>Neg Pos</b>	<b>Neg Pos</b>
<input type="radio"/> Ear drainage	<input type="radio"/> Abdominal pain	<input type="radio"/> Breast discharge	<input type="radio"/> Anxiety	<input type="radio"/> Easy bleeding
<input type="radio"/> Ear pain	<input type="radio"/> Blood in stools	<input type="radio"/> Breast lump	<input type="radio"/> Depression	<input type="radio"/> Easy bruising
<input type="radio"/> Eye discharge	<input type="radio"/> Change in stools	<input type="radio"/> Brittle hair	<input type="radio"/> Insomnia	<input type="radio"/> Lymphadenopathy
<input type="radio"/> Eye pain	<input type="radio"/> Constipation	<input type="radio"/> Brittle nails	<input type="radio"/> Other:	<input type="text"/>
<input type="radio"/> Hearing loss	<input type="radio"/> Diarrhea	<input type="radio"/> Hair loss	<input type="text"/>	
<input checked="" type="radio"/> Nasal drainage	<input type="radio"/> Heartburn	<input type="radio"/> Hirsutism		
<input type="radio"/> Sinus pressure	<input type="radio"/> Loss of appetite	<input type="radio"/> Hives		
<input checked="" type="radio"/> Sore throat	<input checked="" type="radio"/> Nausea	<input type="radio"/> Pruritis		
<input type="radio"/> Visual changes	<input checked="" type="radio"/> Vomiting	<input type="radio"/> Mole changes		
<input type="radio"/> Other:	<input type="radio"/> Other:	<input checked="" type="radio"/> Rash		
<input type="text"/>	<input type="text"/>	<input type="radio"/> Skin lesion		
		<input type="radio"/> Other:		
		<input type="text"/>		

<b>Respiratory</b> <input type="checkbox"/> All neg	<b>Genitourinary</b> <input type="checkbox"/> All neg	<b>Metabolic / Endocrine</b> <input type="checkbox"/> All neg	<b>Immunologic</b> <input type="checkbox"/> All neg
<b>Neg Pos</b>	<b>Neg Pos</b>	<b>Neg Pos</b>	<b>Neg Pos</b>
<input checked="" type="radio"/> Chronic cough	<input checked="" type="radio"/> Dysuria	<input checked="" type="radio"/> Cold intolerance	<input type="radio"/> Contact allergy
<input type="radio"/> Cough	<input type="radio"/> Hematuria	<input type="radio"/> Heat intolerance	<input type="radio"/> Environmental allergies
<input type="radio"/> Known TB exposure	<input type="radio"/> Polyuria	<input type="radio"/> Polydipsia	<input type="radio"/> Food allergies
<input checked="" type="radio"/> Shortness of breath	<input type="radio"/> Urinary frequency	<input type="radio"/> Polyphagia	<input type="radio"/> Seasonal allergies
<input type="radio"/> Wheezing	<input type="radio"/> Urinary incontinence	<input type="radio"/> Other:	<input type="radio"/> Other:
<input type="radio"/> Other:	<input type="radio"/> Urinary retention	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="radio"/> Other:		
	<input type="text"/>		

All others negative

When done click **Save & Close**.

Your new entries display.

You can also directly access other system-specific ROS popups from here to make additions, changes, & deletions.

System	Neg/Pos	Findings
Constitutional	Positive	Fatigue.
Constitutional	Negative	Fever and weight loss.
ENMT	Negative	Nasal drainage and sore throat.
Eyes	Negative	Eye symptoms.
Respiratory	Positive	Chronic cough.
Respiratory	Negative	Dyspnea.
Cardio	Negative	Chest pain and claudication.

Constitutional  
HEENT  
Respiratory  
Cardiovascular  
Vascular  
Gastrointestinal  
Genitourinary  
Reproductive  
Metabolic | Endocrine  
Neuro | Psychiatric  
Dermatologic  
Musculoskeletal  
Hematologic  
Immunologic

One Page ROS - Female

And you can save & reuse all of these entries, whether entered on the one-screen ROS or the system-specific ones, as discussed in the User Personalization demo.

Continuing down the **SOAP** tab, you can review the **Vital Signs** again. You can add another entry, review a history of previous readings, or see them in graph form.

### Vital Signs ⚠ Vital Signs Outside Normal Range

Health Promotion Plan | History | Graph

Time	Ht (in)	Wt (lb)	BMI	BP	Pulse	Respiration	Temp (F)	Pulse Ox Rest	BSA	Pain level	Comments
11:55 AM	65.00	170.00	28.29	138/84	86	16	99.2	95			

Add

Edit

Remove

### Physical Exam

Exam Findings Details

- One Page Exam
- Constitutional
- Eyes
- Neck | Thyroid
- Respiratory
- Cardiovascular
- Lymphatic
- Skin | Hair
- Back | Spine
- ROM Exam
- Connective Tissue Exam
- Musculoskeletal
- Extremities
- Additional

You'll next move down to the **Physical Exam** section.

First notice the **Office Diagnostics** button. Click **that**.

Office Diagnostics

Office Services 1

## Orders

(Highlight a row to select)

Display category: 

Order Category	Lab Name	Proc. Code	Side	Diagnosis Description
ALL	Allergen immunotherapy, 2+ injections	95117		
ALL	Allergen immunotherapy, one injection	95115		
ALL	Allergen immunotherapy, one injection	95115		BUDD-CHIARI SYNDROME
ALL	Antigen therapy services, single/mult antigen	95165		
ALL	Assay, albumin, urine, microalbumin, semiquan	82044		
ALL	Assay, blood PKU	84030		

This gives you a chance to review any office tests the nurse did via clinic standing orders, if you didn't note them earlier on the Home Tab. (Perhaps the results weren't ready yet when you first entered the room.) There are none in this example. When done click **Save & Close**.

## Today's Orders

 Submit to Superbill  Verbal order/needs sign-off  Send task automatically

Additional Orders | Task

Status	Office Diagnostic Description	Side	Interpretation	Result	Performed By
completed	Spirometry		see detail	See scanned results & MD's interpretation.	Robert L. Duffy

Quick Task

Place Order

Update

Diagnostic History Entry 0

Save &amp; Close

Cancel



Intake

Histories

SOAP

Finalize

Checkout

Standing Orders

Adult Immunizations

Peds Immunizations

My Plan

Procedures

Order Management

Physical Exam documentation is performed similarly to the ROS demonstrated above. You can directly access any system from the headings on the left, but you'll often want to start with the age & gender-specific [One Page Exam](#).

11:55 AM 03/00 170.00 28.25 138/84 80 10 99.2 99

Add

Edit

Remove

Physical Exam



One Page Exam  
Constitutional  
Eyes  
Neck | Thyroid  
Respiratory  
Cardiovascular  
Lymphatic

Even better, start from a saved preset, as covered in the User Personalization lesson.

While you may well complete the physical exam documentation later after you're done working with the patient, for the ease of discussion I'll go ahead & do it now, illustrating the value of using saved preset exams.

Time	Ht (in)	Wt (lb)	BMI	BP	Pulse	Respiration	Temp (F)	Pulse Ox Rest	BSA	Pain level	Comments
5:12 PM	66.00	199.00	32.12	158/94	80	16	97.7				

Add Edit Remove

Physical Exam

One Page Exam	Exam	Findings	Details
Constitutional			



I'm going to click the **Open Preset icon** & double-click on **PEFullNIFemale-RLD**, a preset I've previously saved as my starting point for a typical normal exam for an adult female. It includes items entered via the **One Page Exam** & some of the **system-specific exams**. (Details on setup of these presets are covered in the User Personalization demo.)

Ngkbn Td Dbp Filter

Set Name

- PEFullNAdultMale-RLD
- PEFullNIFemale-RLD

Refresh OK Cancel

Office Diagnostics

Your baseline exam displays. Let's change a few pertinent items. Click on **One Page Exam**.

PUL Summary | Standing Orders | Adult Immunizations | Peds Immunizations | My Plan | Procedures | Order Management

Care Guidelines | Global Days

Panel Control: [Dropdown] Toggle [Left Arrow] [Right Arrow] Cycle [Refresh]

Reason for Visit

Review of Systems

Vital Signs

Physical Exam



One Page Exam

Constitutional

Ears

Nose | Mouth | Throat

Neck | Thyroid

Lymphatic

Respiratory

Cardiovascular

Vascular

Abdomen

Skin | Hair

Musculoskeletal

Extremities

Psychiatric

Additional

Exam	Findings	Details
Constitutional	*	Overall appearance - In no acute distress.
Ears	*	Canal - Right: No excess wax or inflammation, Left: No excess wax or inflammation. TM - Right: Benign, Left: Benign.
Nasopharynx	*	Oropharynx - No redness or drainage.
Neck Exam	Normal	Palpation - Normal. Thyroid gland - Normal.
Breast	Normal	Inspection - Bilateral: Normal. Palpation - Bilateral: Normal.
Respiratory	Normal	Auscultation - Normal. Effort - Normal.
Cardiovascular	Normal	Regular rhythm. No murmurs, gallops, or rubs.
Abdomen	Normal	No abdominal tenderness.
Genitourinary	Normal	No suprapubic tenderness.
Extremity	Normal	No edema.
Neurological	*	Sensory - Grossly normal. Motor - Grossly normal.

Office Diagnostics

◆ Constitutional:

Overall appearance:  Normal  In no acute distress  **Overweight**

◆ Eyes: ◆ Vision Screening:

Conjunctiva: R  Normal [ ] L  Normal [ ]

Pupil: R  Normal [ ] L  Normal [ ]

Fundus: R  Normal [ ] L  Normal [ ]

◆ Ears ◆ Nose/Mouth/Throat:

External ear: R  Normal [ ] L  Normal [ ]

Canal: R  Normal [ No excess wax or inflammation ] L  Normal [ No excess wax or inflammation ]

TM: R  Normal [ Benign ] L  Normal [ Benign ]

Hearing: R  Normal [ ] L  Normal [ ]

External nose:  Normal [ ]

Lips/teeth/gums:  Normal [ ]

Oropharynx:  Normal [ No redness or drainage ]

Tonsils:  Normal [ ]

◆ Neck/Thyroid: ◆ Lymphatic:

Neck inspection:  Normal [ ] Thyroid gland:  Normal [ ]

Neck palpation:  Normal [ ] Lymph nodes:  Normal [ ]

◆ Breast:

Breast inspection:  Normal [ ] Breast palpation:  Normal [ ]  Breast exam deferred

◆ Respiratory:

Effort:  Normal [ ]

	Side:	Location:	Findings:
Inspection:	<input type="checkbox"/> Normal	[ ]	[ ]
Auscultation:	<input type="checkbox"/> Normal	[ ]	<b>Distant but clear bilat</b>

◆ Cardiovascular:

Auscultation:  Normal [ ]

◆ Vascular: ◆ Extremity

Pedal pulses:  Normal [ ] Capillary refill:  Less than 2 seconds  Greater than 2 seconds

Edema:  No  Yes

◆ Abdomen:

Inspection:  Normal [ No masses ]

Auscultation:  Normal [ ]

◆ Genitourinary:

External genitalia:  Normal [ ]

Urethra:  Normal [ ]

Cervix:  Normal [ ]

Uterus:  Normal [ ]

Adnexa:  Normal [ ]

Sphincter tone:  Normal [ ]

Fecal occult blood test:  Negative  Positive  Not indicated

◆ Musculoskeletal:

Overview:  Normal [ ]

◆ Skin:

Inspection:  Normal [ ]

◆ Neurological:

Memory:  Normal [ ]

Cranial nerves:  II - XII grossly intact  I is grossly intact

DTRs:  Normal [ ]

Sensory:  Normal [ No focal deficits ]

◆ Psych:

No	Yes	No	Yes
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oriented to person, place, time, situation		Poor judgement	
Appropriate mood and affect		Poor insight	
<input type="checkbox"/> Carry forward comments			

Comments: [ ]

Here I've amended my exam to comment on her weight & lung exam.

When done click **Save & Close**.

Vital Signs ! Vital Signs Outside Normal Range

Time	Ht (in)	Wt (lb)	BMI	BP	Pulse	Respiration
11:55 AM	65.00	170.00	28.29	138/84	86	16

Your findings display on the grid.

Add

Edit

Remove

## Physical Exam

One Page Exam

Constitutional

Eyes

Neck | Thyroid

Respiratory

Cardiovascular

Lymphatic

Skin | Hair

Back | Spine

ROM Exam

Connective Tissue Exam

Musculoskeletal

Extremities

Additional

Exam	Findings	Details
Constitutional	*	Overall appearance - In no acute distress, Overweight.
Ears	*	Canal - Right: No excess wax or inflammation, Left: No excess wax or inflammation. TM - Right: Benign, Left: Benign.
Nasopharynx	*	Nares - Right: Clear, Left: Clear. Oropharynx - No redness or drainage.
Neck Exam	Normal	Palpation - Normal. Thyroid gland - Normal. Cervical lymph nodes - Normal.
Respiratory	*	Effort - Distant but clear bilat.
Respiratory	Normal	Auscultation - Normal.
Cardiovascular	Normal	Heart rate - Regular rate. Rhythm - Regular. Murmurs - None. Extremities - No edema. Regular rate and rhythm. No murmurs, gallops, or rubs.
Abdomen	*	Inspection - No masses.
Abdomen	Normal	No abdominal tenderness.
Extremity	Normal	No edema.
Neurological	*	Sensory - No focal deficits. Motor - No focal deficits. Balance & gait - Grossly normal.

You can also use the menu on the left to pick systems to document. In particular, **ROM Exam & Connective Tissue Exam** give you some graphic methods to document your findings.

Physical Exam

Assessment/Plan

Assessments

My Plan

Moving to the bottom of the **SOAP** tab, you might next perform any of several activities: Document assessments & plans, prescribe meds, order labs, plan X-rays, or request referrals.

For this exercise, let's address Assessment/Plan. Begin by clicking the **Add/Update** button.

 Resident-Attending discussion took place  Attending saw patient

Consent

Procedure Scheduling

Add/Update

Remove

✦ Consent

Provider  
Comm.

Meds



Procedures

Patient  
Plan

Visit Document

Document Library



EM Coding



Dictation

## Today's Concerns/Reason for Visit:

1. Rheumatoid arthritis 2. hand pain &amp; stiffness

(Select a row from any grid to add to Today's Assessments)  Add Assessments on 1-clickDiagnosis History  Show Chronic only

Diagnosis Description	Code
Acute bronchitis	466.0
Acute laryngitis without mention of obstruction	464.00
Allergic Rhinitis	477.9
Asymptomatic postmenopausal status (age-related) (natural)	V49.81
Benign essential hypertension	401.1
Cerumen Impaction	380.4
Chronic frontal sinusitis	473.1
Constipation, unspecified	564.00
COPD	496
Cough	786.2
Disorders of bursae and tendons in shoulder region, unspecified	726.10
Dysuria	788.1

Add Common Assessment | Diagnosis Code Lookup

## Clinical Problems

 Show Chronic  Show My Tracked problems  No active problems

Description	Onset Date
Allergic rhinitis	
Benign essential hypertension	
Chronic obstructive lung disease	02/24/2014

My Favorites Favorites Category: All Filter:

Description	Code
Benign essential hypertension	401.1
Coronary artery disease	414.00
Cough	786.2
CVA	434.91

Dx description: Code: Status: Site:

Impression: Differential Dx:

 Mark diagnosis as chronic Add assessment to:  Clinical problems  My tracked problems  My favorites

Add/Update

A group of tabbed popups appears; let's call this the **Assessment-Plan Suite**. Here you have multiple ways to select diagnoses. The easiest involve picking something from the patient's previous **Diagnoses History**, the **Problems list**, or your **My Favorites list**. (Details are covered in another lesson.)

Today's Concerns/Reason for Visit:

1. Rheumatoid arthritis 2. hand pain & stiffness

(Select a row from any grid to add to Today's Assessments)  Add Assessments on 1-click

Diagnosis History  Show Chronic only

Diagnosis Description	Code
Acute bronchitis	466.0
Acute laryngitis without mention of obstruction	464.00
Allergic Rhinitis	477.9
Asymptomatic postmenopausal status (age-related) (natural)	V49.81
Benign essential hypertension	401.1
Cerumen Impaction	380.4
Chronic airway obstruction, not elsewhere classified	496
Chronic frontal sinusitis	473.1
Conjunctivitis, unspecified	564.00
Disorders of bursae and tendons in shoulder region, unspecified	786.2
Disorders of bursae and tendons in shoulder region, unspecified	726.10
Disorders of bursae and tendons in shoulder region, unspecified	788.1

Clinical Problems

Show Chronic  Show My Tracked problems  No active problems

Description	Onset Date
Allergic rhinitis	
Benign essential hypertension	
Chronic obstructive lung disease	02/24/2014

My Favorites Favorites Category: All Filter:

Description	Code
Benign essential hypertension	401.1
Coronary artery disease	414.00
Cough	786.2
CVA	434.91

Here I've made a few selections from the Clinical Problems list.

Now let's document some plans. The My Plan tab has some potential, but we're still investigating how well that can be applied to our practice setting. So let's move on to A/P Details.

Today's Assessments

#	Description(code) Status Site	Impression/Differential Dx
1	Rheumatoid arthritis (714.0)	
2	Osteoarthritis knees (715.36)	
3	Benign essential hypertension (401.1)	
4	Chronic airway obstruction, not elsewhere classified (496)	
5	Mixed hyperlipidemia (272.2)	

Save & Close

Sort

Remove

Today's Assessments: (Select an assessment and enter the details below.)

Assessment/Plan Expanded View ⓘ

#	Description	Code	Status
1	Rheumatoid arthritis	714.0	
2	Osteoarthritis knees	715.36	
3	Benign essential hypertension	401.1	
4	Chronic airway obstruction, not elsewhere classified	496	
5	Mixed hyperlipidemia	272.2	

Selected Assessment: Rheumatoid arthritis

Add

Edit

Sort DX

Remove

Impression/Comments:

My Phrases

Differential Diagnosis:

My Phrases

(Only the first 215 characters will be displayed in the Diagnosis Module.)

Plan Details

[Previous Patient Details](#) | [Previous Provider Details](#) | [Health Promotion Plan](#)

Patient Details:

My Phrases

Common Phrases

Provider Details:

My Phrases

Common Phrases

Since lab from previous MD is so recent & complete, I don't really need to order anything else right now. I will get X-rays of both hands, however. I'll review those & look more closely at the records from previous MD. Since hydroxychloroquin

Record your plans. While you can type your instructions here, you can also use **My Phrases** to greatly reduce your work for things you say repeatedly. (Setup of **My Phrases** is discussed in the User Personalization demo.)

Save &amp; Close

Cancel

Assessment Plan Details

- Assessments
- My Plan
- A/P Details
- Labs
- Diagnostics
- Referrals
- Office Procedures
- Cosign Orders

Today's Assessments: (Select an assessment and enter the details below.)

Assessment/Plan Expanded View

#	Description	Code	Status
1	Rheumatoid arthritis	714.0	
2	Osteoarthritis knees	715.36	
3	Benign essential hypertension	401.1	
4	Chronic airway obstruction, not elsewhere classified	496	
5	Mixed hyperlipidemia	272.2	

Now go to the Diagnostics Tab to order some hand X-rays.

Selected Assessment: Rheumatoid arthritis

Impression/Comments:

(Only the first 215 characters will be displayed in the Diagnosis Module.)

Plan Details

Patient Details:

- My Phrases
- Common Phrases

Since lab from previous MD is so recent & complete, I don't really need to order anything else right now. I will get X-rays of both hands, however. I'll review those & look more closely at the records from previous MD. Since hydroxychloroquine was just recently resumed, I want to observe her on that for 6 more weeks. Continue meloxicam as well; given handout on adjunctive topical/thermal therapy options to help pain. Plan recheck in 6 wks time to see what sort of response she is having & further discuss the use of DMARDs.

Provider Details:

- My Phrases
- Common Phrases

(Provider details will not print on the patient plan.)

Today's Orders:

[Empty text area for Today's Orders]

- Manage My Phrases
- Follow Up
- Counseling Details
- Save & Close
- Cancel

Insurance name: AFLAC Policy #: 234567890

Today's Assessments

Select a diagnosis to associate with the desired order(s) below.

#	Diagnosis Description	Code
1	OBSTRUCTIVE CHRONIC BRONCHITIS, WITHOUT EXACERBATION	491.20
2	Rheumatoid arthritis	714.0

Select Rheumatoid Arthritis, then click X-ray Upper Extremity.

Selected diagnosis: Rheumatoid arthritis

Add Edit Remove

Orders

When ordering studies requiring contrast, enter the proposed contrast medium into the medication module to check for p

Allergy

LEMON OIL

Medication

loratadine 5 mg/5 mL oral solution

- + X-ray Head/Spine
- + X-ray Upper Extremity
- + X-ray Lower Extremity
- + X-ray Body
- + CT Head/Spine
- + CT Body/Extremities

Service Item Mstr

Description	Service Item Id
X-ray exam, AC joints, both sides	73050
X-ray exam, clavicle, complete	73000
X-ray exam, elbow, 2 views	73070
X-ray exam, elbow, complete, 3+ views	73080
X-ray exam, finger(s), 2+ views	73140
X-ray exam, forearm, 2 views	73090
X-ray exam, hand, 2 views	73120
X-ray exam, hand, 3+ views	73130
X-ray exam, humerus, 2+ views	73060
X-ray exam, shoulder, complete, 2+ views	73030
X-ray exam, shoulder, one view	73020
X-ray exam, sternoclav joint(s), 3+ views	71130
X-ray exam, wrist, 2 views	73100

Refresh OK Cancel

Currently pregnant  No  Yes  Possible  Not pertinent

Qty: 1 Diagnostic study: Side: Site:

Billing Diagnosis:  Do not add to Today's Assessments Location: Phone no:

Rheumatoid arthritis 714.0

Diagnostic Studies Ordered This Visit

Status	Order	Date Completed	Diagnosis	Code	Comments

Select your film from the ensuing popup.

Quick Task Save & Close Cancel

**Diagnostic Studies**

Assessments | My Plan | A/P Details | Labs | **Diagnostics** | Referrals | Office Procedures | Cosign Orders

Insurance name: AFLAC

**Today's Assessments**  
Select a diagnosis to associate with the study order below.

#	Diagnosis Description	Code
1	OBSTRUCTIVE CHRONIC BRONCHITIS WITHOUT EXACERBATION	491.20
2	Rheumatoid arthritis	714.0

Selected diagnosis: Rheumatoid arthritis

**Orders**  
When ordering studies requiring contrast, enter the proposed contrast medium into the medication module.

Allergy: LEMON OIL  
Medication: loratadine 5 mg/5 mL oral solution

Currently pregnant:  No  Yes  Possible  Not pertinent

Qty: Diagnostic study: Side: Site: Modifier: Position: Orientation: Timeframe:  Read only

Location: Phone number: Authorization required:  No  Yes [Order Module Processing](#)

**Next click in the Side box & choose Bilateral.**

Select side of the body

Bilateral  
Left  
Right

Close

**We have no other details to add, so click Place Order.**

**Dismiss the tasking popup that may appear & click Save & Close.**

Place Order

Authorization	Date Completed	Diagnosis	Code	Comments
---------------	----------------	-----------	------	----------

Quick Task | **Save & Close** | Cancel

## Assessment/Plan

Assessments My Plan A/P Details Labs Diagnostics Referrals Office Procedures Review/Cosign Orders View Immunizations Office Diagnostics Physical Therapy Orders Health Promotion Plan	1.	Assessment	Rheumatoid arthritis (714.0).
		Patient Plan	Since lab from previous MD is so recent & complete, I don't really need to order anything else right now. I will get X-rays of both hands, however. I'll review those & look more closely at the records from previous MD. Since hydroxychloroquine was just recently resumed, I want to observe her on that for 6 more weeks. Continue meloxicam as well; given handout on adjunctive topical/thermal therapy options to help pain. Plan recheck in 6 wks time to see what sort of response she is having & further discuss the use of DMARDs.
		Plan Orders	Further diagnostic evaluations ordered today include X-ray exam, hand, 3+ views Bilateral to be performed.
	2.	Assessment	Osteoarthritis knees (715.36).
	3.	Assessment	Benign essential hypertension (401.1).
		Patient Plan	Continue meds from PCP.
	4.	Assessment	Chronic airway obstruction, not elsewhere classified (496).
		Patient Plan	Discussed importance of smoking cessation; it may be the single most important thing you can do for your health. I urge you to quit as soon as possible. Free assistance & nicotine patches are available at <a href="http://www.alabamaquitnow.com">www.alabamaquitnow.com</a> or 800-784-8669. A wealth of information & assistance is also available at the American Lung Association, <a href="http://www.lung.org/stop-smoking">www.lung.org/stop-smoking</a> , or 800-586-4872.
	5.	Assessment	Mixed hyperlipidemia (272.2).

Your assessments & plans display. (We'll show you how you or your staff can print that X-ray requisition in a minute.)

Resident-Attending discussion took place  Attending saw patient

Consent

Procedure Scheduling

Add/Update

Remove

+ Consent

Let's complete her prescriptions. Click **Meds**.



Provider  
Comm.



Meds



Procedures



Patient  
Plan

Visit Document

Document Library



EM Coding



Dictation

Last Audit	Status	Medication Name	Generic Name	Start Date	Stop Date	Sig	Original Start
	Active	Advair Diskus 250 mcg-50 mcg/dose pow...	FLUTICASON/SALMETEROL	03/26/2014		1 puff 2 times daily approx 12 hours apart	03/26/2014
	Active	albuterol sulfate HFA 90 mcg/actuation A...	ALBUTEROL SULFATE	03/26/2014		2 puffs every 4-6 hrs as needed for sh...	03/26/2014
	Active	bupropion HCl XL 300 mg 24 hr tablet, ex...	BUPROPION HCL	03/04/2014			01/21/2014
	Active	fluticasone 50 mcg/actuation Nasal Spray...	FLUTICASON PROPIONATE			2 sprays each nostril daily for 1 wk, the...	
	Active	hydrocortisone 2.5 % Topical Cream	HYDROCORTISONE	03/04/2014		Apply twice daily to rash	03/04/2014
	Active	hydroxychloroquine 200 mg tablet	HYDROXYCHLOROQUINE SULFATE	03/26/2014		1 twice daily	03/26/2014
	Active	lisinopril 20 mg-hydrochlorothiazide 25 m...	LISINOPRIL/HYDROCHLOROTHIAZIDE	01/21/2014		1 daily	01/21/2014
	Active	loratadine 10 mg tablet	LORATADINE	02/20/2014		1 daily as needed for allergies	02/20/2014
	Inactive	amoxicillin 875 mg tablet	AMOXICILLIN	03/04/2014	03/13/2014	take 1 tablet by oral route every 12 ho...	03/04/2014
	Inactive	bupropion HCl XL 300 mg 24 hr tablet, ex...	BUPROPION HCL	01/21/2014	03/04/2014	1 daily in AM	01/21/2014

Medication Module details are reviewed in another lesson.

We've refilled her hydroxychloroquine so she'll have enough to last until the next visit. We'll ERx that, then return to the **SOAP Tab**.

Comments: *This field is for nonclinical comments to the pharmacist. Any additional clinical instructions for this prescription should be added using the 'Additional Instructions' segment of the Sig Builder.*

Provider: DUFFY, ROBERT LAMAR MD

Location: USA MASTIN

Note: [Add Note...](#)

Formulary Data:

Last Renewed:

Times Renewed:

[Full History](#)

[Dispense History](#)

[Additional Prescription Detail](#)

## Assessment/Plan

Assessments  
My Plan  
A/P Details  
Labs  
Diagnostics  
Referrals  
Office Procedures  
Review/Cosign Orders  
View Immunizations  
Office Diagnostics  
Physical Therapy Orders  
Health Promotion Plan

1.	Assessment	Rheumatoid arthritis (714.0).
	Patient Plan	Since lab from previous MD is so recent & complete, I don't really need to order anything else right now. I will get X-rays of both hands, however. I'll review those & look more closely at the records from previous MD. Since hydroxychloroquine was just recently resumed, I want to observe her on that for 6 more weeks. Continue meloxicam as well; given handout on adjunctive topical/thermal therapy options to help pain. Plan recheck in 6 wks time to see what sort of response she is having & further discuss the use of DMARDs.
	Plan Orders	Further diagnostic evaluations ordered today include X-ray exam, hand, 3+ views Bilateral to be performed.
2.	Assessment	Osteoarthritis knees (715.36).
3.	Assessment	Benign essential hypertension (401.1).
	Patient Plan	Continue meds from PCP.
4.	Assessment	Chronic airway obstruction, not elsewhere classified (496).
	Patient Plan	Discussed importance of smoking cessation; it may be the single most important thing you can do for your health. I urge you to quit as soon as possible. Free assistance & nicotine patches are available at <a href="http://www.alabamaquitnow.com">www.alabamaquitnow.com</a> or 800-784-8669. A wealth of information & assistance is also available at the American Lung Association, <a href="http://www.lung.org/stop-smoking">www.lung.org/stop-smoking</a> , or 800-586-4872.
	Assessment	Mixed hyperlipidemia (272.2).

One of the Meaningful Use criteria requires patients to receive a summary of the visit. Click **Patient Plan**.

Resident-Attending discussion took place  Attending saw patient

Consent

Procedure Scheduling

Add/Update

Remove

✦ Consent



Provider  
Comm.



Meds



Procedures



Patient  
Plan

Visit Document

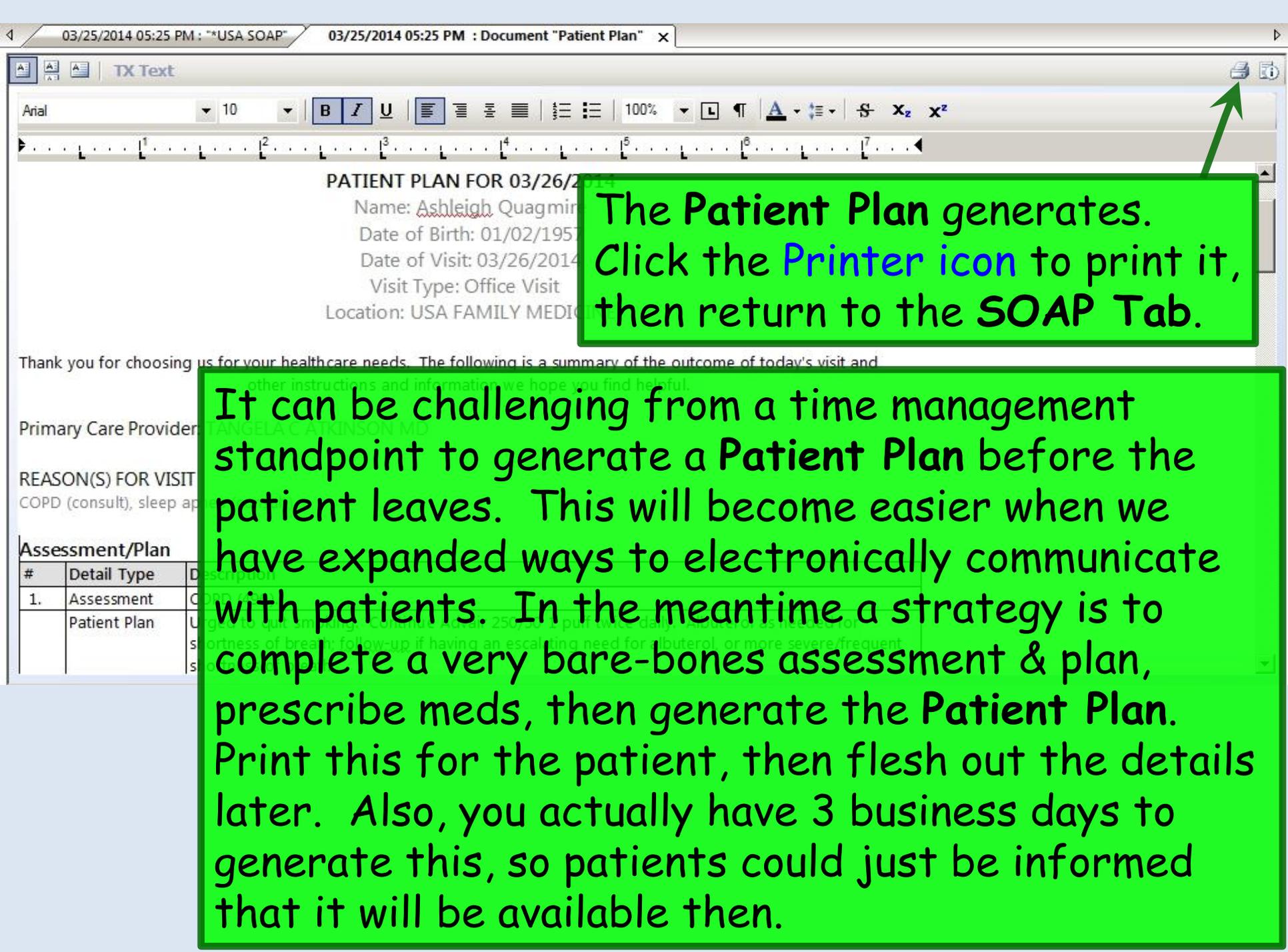
Document Library



EM Coding



Dictation



The Patient Plan generates. Click the Printer icon to print it, then return to the SOAP Tab.

It can be challenging from a time management standpoint to generate a Patient Plan before the patient leaves. This will become easier when we have expanded ways to electronically communicate with patients. In the meantime a strategy is to complete a very bare-bones assessment & plan, prescribe meds, then generate the Patient Plan. Print this for the patient, then flesh out the details later. Also, you actually have 3 business days to generate this, so patients could just be informed that it will be available then.

Assessment/Plan	
#	Detail Type
1.	Assessment
	Patient Plan

## Assessment/Plan

Assessments  
My Plan  
A/P Details  
Labs  
Diagnostics  
Referrals  
Office Procedures  
Review/Cosign Orders  
View Immunizations  
Office Diagnostics  
Physical Therapy Orders  
Health Promotion Plan

1.	Assessment	Rheumatoid arthritis (714.0).
	Patient Plan	Since lab from previous MD is so recent & complete, I don't really need to order anything else right now. I will get X-rays of both hands, however. I'll review those & look more closely at the records from previous MD. Since hydroxychloroquine was just recently resumed, I want to observe her on that for 6 more weeks. Continue meloxicam as well; given handout on adjunctive topical/thermal therapy options to help pain. Plan recheck in 6 wks time to see what sort of response she is having & further discuss the use of DMARDs.
	Plan Orders	Further diagnostic evaluations ordered today include X-ray exam, hand, 3+ views Bilateral to be performed.
2.	Assessment	Osteoarthritis knees (715.36).
3.	Assessment	Benign essential hypertension (401.1).
	Patient Plan	Continue meds from PCP.
4.	Assessment	Chronic airway obstruction, not elsewhere classified (496).
	Patient Plan	Discussed importance of smoking cessation; it may be the single most important thing you can do for your health. I urge you to quit as soon as possible. Free assistance & nicotine patches are available at <a href="http://www.alabamaquitnow.com">www.alabamaquitnow.com</a> or 800-784-8669. A wealth of information & assistance is also available at the American Lung Association, <a href="http://www.lung.org/stop-smoking">www.lung.org/stop-smoking</a> , or 800-586-4872.
5.	Assessment	Mixed hyperlipidemia (272.2).

Now generate today's visit note.  
One way to do this would be to  
click **Visit Document**.

Resident-Attending discussion took place  Attending saw patient

Consent

Procedure Scheduling

Add/Update

Remove

✦ Consent



Provider  
Comm.



Meds



Procedures



Patient  
Plan

Visit Document

Document Library



EM Coding



Dictation

## TX Text

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PATIENT: Ashleigh Quagmire  
DATE OF BIRTH: 01/02/1957  
DATE: 03/26/2014 10:24 AM  
VISIT TYPE: Office Visit

This 57 year old female presents for Rheumatoid arthritis and hand pain & stiffness.

#### History of Present Illness:

1. Rheumatoid arthritis  
Onset was 20 years ago. She reports a gradual onset of joint pain with use. It occurs persistently. The problem is fluctuating. Symptom is aggravated by activity. Relieving factors include rest. She is experiencing activity limitation, fatigue, and swelling of joints. Digit(s) Peroneal nerve entrapment, eye symptoms, weight loss, and depression.  
Referred to rheumatology after moving to area. She brought some records from her previous rheumatologist. She was on Plaquenil until the move, when she ran out. PCP recently restarted at 200 mg BID while awaiting referral. Her RA has been escalating over last yr even before running out of Plaquenil. She asks about new meds for RA she's seen advertised; prev MD was considering this before she had to move to Mobile due to husband's job.
2. hand pain & stiffness

PROBLEM LIST:

Your visit note displays. You can review & edit it if desired. You can also click the **Check Mark** to sign it off; this is the same as signing the document in your PAQ.

- Navigation
- Take
- History
- SOAP
- Finalize
- Check Out
- > Order Management
- > Orders/Plan
- > Standing Orders
- > Standing Orders
- Anticoagulation
- Procedures
- Tobacco Cessation
- Tuberculin Skin Test
- Nutrition
- Chart Abstraction
- Demographics
- Document Library
- Immunizations
- Patient Comment
- Provider Test Action
- Vital Signs
- Screening Tools
- CQM Check
- MU Check

But it can take 30-60 seconds to generate the document in real time, which can be annoying when you're trying to move on to the next patient. As an alternative, you can generate the note offline. To do this, hover the mouse over **Navigation** to get the **Navigation Bar** to slide out.

When the **Navigation Bar** displays, click **Offline**.

Preview Offline

took place  Attending saw patient

Consent Procedure Scheduling Add/Update Remove

Consent

Meds Procedures Patient Plan Visit Document Document Library EM Coding Dictation

## Assessment/Plan

Assessments My Plan A/P Details Labs Diagnostics Referrals Office Procedures Review/Cosign Orders View Immunizations Office Diagnostics Physical Therapy Orders Health Promotion Plan	1.	Assessment	Rheumatoid arthritis (714.0).
		Patient Plan	Since lab from previous MD is so recent & complete, I don't really need to order anything else right now. I will get X-rays of both hands, however. I'll review those & look more closely at the records from previous MD. Since hydroxychloroquine was just recently resumed, I want to observe her on that for 6 more weeks. Continue meloxicam as well; given handout on adjunctive topical/thermal therapy options to help pain. Plan recheck in 6 wks time to see what sort of response she is having & further discuss the use of DMARDs.
		Plan Orders	Further diagnostic evaluations ordered today include X-ray exam, hand, 3+ views Bilateral to be performed.
	2.	Assessment	Osteoarthritis knees (715.36).
	3.	Assessment	Benign essential hypertension (401.1).
		Patient Plan	Continue meds from PCP.
	4.	Assessment	Chronic airway obstruction, not elsewhere classified (496).
		Patient Plan	Discussed importance of smoking cessation; it may be the single most important thing you can do for your

Now move to the **Finalize** Tab. You can do this by navigating back to the top & clicking the **Finalize Tab**, but if you're at the bottom of the **SOAP Tab**, there is a shortcut to get there directly. Click **EM Coding**.

Resident-Attending discussion took place  Attending saw patient

Consent

Procedure Scheduling

Add/Update

Remove

✦ Consent



Provider  
Comm.



Meds



Procedures



Patient  
Plan

Visit Document

Document Library



EM Coding



Dictation

Specialty Rheumatology Visit Type Office Visit

Intake Histories SOAP Finalize Checkout

Standing Orders Adult Immunizations Peds Immunizations My Plan Procedures Order Management Document Library

Care Guidelines Global Days

Panel Control: Toggle Cycle

General

Established patient New patient

Today's Assessment

Provider Sign Off

Physician Sign Off Request: Submit to supervising physician for review

E&M coding is reviewed in another lesson. For this exercise, click Moderate complexity for Medical decision making, then Calculate Code.

Evaluation and Management Coding

Medical Decision Making View MDM Guidelines | View Risk Table

Straight forward Low complexity Moderate complexity High complexity

Counseling Counseled greater than 50% of time and documented content Total visit time (minutes): Total counsel time (minutes):

Evaluation and Management Code Visit code: Modifier(s): Calculate Code Submit Code

CQM Check Calculated EM code: Submitted code: Calculated eRx code: Submitted eRx code:

Additional E&M Code View Other Codes SNOMED Visit Type (optional) Medicare Preventive Codes

New patient: Established: Consultation: Preventive new: Preventive established: Preventive counseling: Post Op: Prenatal: Behavioral Health: 90791 90792 90846

Specialty Rheumatology Visit Type Office Visit

Intake Histories SOAP Finalize Checkout

Standing Orders Adult Immunizations Peds Immunizations My Plan Procedures Order Management Document Library

Care Guidelines Global Days

Panel Control: Toggle Cycle

General

Established patient New patient

PE Type: Multi system Single system: E&M Guidelines1997: Web

Today's Assessment

Provider Sign Off

Physician Sign Off Request:

Submit to supervising physician for review

Supervising Physician Sign Off:

I have reviewed and agree with the diagnosis and treatment plan

I have met with the patient and participated with the plan of care

I was available at the time of service and agree with the plan of care

If the calculated code is acceptable to you, click Submit Code.

Evaluation and Management Coding

Medical Decision Making

Straight forward Low complexity

Moderate complexity High complexity

Counseling

Counseled greater than 50% of time and documented content

Total visit time (minutes): Counseling Details

Total counsel time (minutes):

Evaluation and Management Code

Visit code: 99203

Modifier(s):

Calculate Code Submit Code

CQM Check

Calculated EM code: 99203

Submitted code:

Calculated eRx code:

Submitted eRx code:

Additional E&M Code View Other Codes SNOMED Visit Type (optional) Medicare Preventive Codes

New patient:

- 99201 99202 99203 99204 99205

Established:

- 99211 99212 99213 99214 99215

Consultation:

- 99241 99242 99243 99244 99245

Preventive new:

- 99381 99382 99383 99384 99385 99386 99387

Preventive established:

- 99391 99392 99393 99394 99395 99396 99397

Preventive counseling:

- 99401 99402 99403 99404

Post Op:

- 99024

Prenatal:

- 59425

Visits 4-6:

- 59426

Visits greater than 6:

- 59426

Behavioral Health:

- 90791 (Initial eval, no med services) 90792 (Initial eval, w/ med services)

- 90846 (Family/Couple therapy, w/o patient)

Specialty ▼ Rheumatology

Visit Type ▼ Office Visit

Intake

Histories

SOAP

Finalize

Checkout

Standing Orders

Adult Immunizations

Peds Immunizations

My Plan

Procedures

Order Management

Document Library

Care Guidelines

Global Days

Panel Control: Toggle Cycle

## Today's Orders

! Lab/Radiology Order Processing | Task | Immunizations

	Status	Order	Side	Site	Location	Timeframe
Labs	ordered	X-ray exam, hand, 3+ views Bilateral	Bilateral			
▶ Diagnostics (1)						
Referrals						
Office Services						
Procedures						
Follow up						
Medications (3)						
Patient Education						
Physical Therapy						

Requisition

The **Checkout Tab** may be utilized by office staff to document completion of various orders, referrals, appointments, etc. For example, this is where the X-ray requisition can be printed.

This concludes the  
NextGen Adult Rheumatology Visit  
demonstration.

The trouble with life is there's no background music.