

ID & CC _____ RFR: _____ HPI: ☐ unable to obtain (indicate reason) Arrived by: ☐ walk-in ☐ EMS ☐ other: _____ ☐ Ever experienced before?	Patient: _____ Location: _____ Date: _____ Time: _____ Allergies: ☐ NKDA Medications: ☐ OTC Meds ☐ Supplements (Vits/Herbals) ☐ Tylenol PO
ROS: ☐ unable to obtain (indicate reason) * red flag: do not miss CONSTITUTIONAL ☐ Fever * ☐ Chills / rigors * ☐ Appetite / oral intake * ☐ Weight gain CARDIOVASCULAR ☐ Chest pain * ☐ Pleuritic chest pain * ☐ Positional chest pain (better sitting forward) * ☐ Lightheaded / presyncope * ☐ Orthopnea ☐ PND ☐ Leg swelling ☐ Palpitations RESPIRATORY ☐ Shortness of breath * GASTROINTESTINAL ☐ Nausea / vomiting * ☐ Constipation / last BM / flatus GENITOURINARY ☐ Dysuria * ☐ Urine output * ☐ Flank pain * ☐ Frequency / urgency ☐ Blood in urine ☐ Trouble voiding / retention NEUROLOGICAL ☐ Confusion * ☐ Focal weakness / facial droop * ☐ Numbness / tingling ☐ Gait / balance ☐ Memory change SKIN ☐ Itch * FUNCTION ☐ Glasses / hearing aids HISTORY ☐ Diuretic dose and adherence, dietary sodium ☐ Triggers: ischemia, arrhythmia, infection, NSAIDs, uncontrolled hypertension ☐ Nephrotoxic drugs ☐ Catheter or recent instrumentation ☐ Vegetarian or vegan diet ☐ Metformin, PPI use ☐ Bariatric surgery or ileal disease ☐ Medications: opioids, benzodiazepines, anticholinergics ☐ Alcohol or withdrawal ☐ Other: _____	

MULTI-SYSTEM EXAMINATION:

Constitutional: T: _____ HR: _____ ☐ reg BP: _____ RR: _____ SPO2: _____ ☐ RA ☐ _____
☐ irreg

Appearance: ☐ appears well

Orientation: ☐ person ☐ place ☐ time

Respiratory: ☐ symmetrical chest expansion
☐ clear to auscultation and palpation
☐  percussion
☐  WOB

Cardiovascular: ☐  sounds; no murmurs, gallops or rubs ☐ JVP: _____
☐ no carotid bruits ☐  PMI; no thrill
 pulses (indicate) ☐ femoral ☐ pedal ☐ radial ☐ other _____
Edema: ☐ none ☐ 1+ ☐ 2+ ☐ 3+ ☐ 4+
to ☐ shins ☐ thighs ☐ sacrum

Abdominal: ☐ no tenderness;  sounds ☐ no hernias present
☐ no hepatosplenomegaly ☐  digital rectal exam
☐ neg hemocult test

CN	Test
☐ II - visual fields	test for major hemifield deficit
☐ III, IV, VI - eye movements	H pattern; bury sclera
☐ V - trigeminal sensation	lightly touch forehead, cheeks and chin bilaterally
☐ VII - facial nerve	squeeze soap out of eyes; big smile show me teeth
☐ IX, X, XII - glossopharyngeal, vagus, hypoglossal	open mouth - ahhh, move tongue side to side
☐ XI - accessory	shrug shoulders and keep there, turn head to both sides and keep there

FOCUSED EXAM - active issues

GENERAL

☐ Pallor
☐ Mucous membranes / hydration

HEENT

☐ Mouth / dentition / thrush

CARDIOVASCULAR

☐ Hepatojugular reflux
☐ Perfusion (cap refill, warmth, mottling)

ABDOMEN

☐ Bladder / suprapubic (distension, tenderness)
☐ Ascites / shifting dullness
☐ CVA / flank tenderness

GU / RECTAL

☐ Genital / pelvic / prostate exam

NEUROLOGICAL

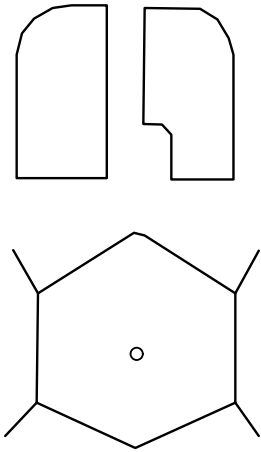
☐ Power / tone / reflexes
☐ Tremor / asterixis / myoclonus
☐ Sensation (incl. vibration, proprioception)
☐ Coordination / gait

SKIN

☐ Lines / IV sites / devices

MENTAL STATUS

☐ Attention / cognition screen



PROBLEM LIST:

- Review:
- ☐ Labs
 - ☐ Radiology
 - ☐ Hosp Records + CO Records (happened before? Course?)
 - ☐ Microbiology including bacteria and sensitivities
 - ☐ Diagnostic Tests & Imaging Ordered (micro)
 - ☐ Any imaging need to be triaged? Page radiology.