

TM-Pink eye(s) (100187)

Category: Symptoms

Scheduled appt type: _____

CC pink eye(s)
HPI Exposure to ill contacts: History of trauma to/foreign body in eye(s):
freeform ROS _____

Structured ROS

| | |
|--|-------|
| Reports: fever/chills | _____ |
| Pert: fever/chills | _____ |
| Pert: not sleeping well | _____ |
| Pert: change in visual acuity | _____ |
| Reports: red eyes or eye drainage | _____ |
| Pert: photophobia | _____ |
| Pert: pain in or around eyes | _____ |
| Pert: sore throat | _____ |
| Pert: runny nose and/or nasal congestion | _____ |
| Pert: daytime cough | _____ |
| Pert: nighttime cough disturbing sleep | _____ |
| Pert: nausea | _____ |
| Pert: vomiting | _____ |
| Pert: diarrhea | _____ |
| Pert: decreased appetite | _____ |
| Pert: rashes or dry skin | _____ |

Structured exam

Remaining template documentation elements

| | |
|-----------------------|--------------|
| Counseling: | _____ |
| Coordination of Care: | _____ |
| Diagnosis: | _____ (____) |

| | |
|-----------------------|--|
| Assessment: | |
| Plan: | |
| Patient Instructions: | |

Remaining workflow elements

Procedures

Orders