

TM-SINUSITIS (100203)

Category: Ears, Nose, Mouth, Throat

Scheduled appt type: _____

CC

HPI _____

freeform ROS _____

Structured ROS

Pert: fever/chills	_____
Denies: body aches	_____
Pert: not sleeping well	_____
Pert: whining or crankiness	_____
Denies: red eyes or eye drainage	_____
Denies: sore throat	_____
Pert: pressure or fullness in ears/sinuses	_____
Pert: change in hearing	_____
Denies: difficulty swallowing	_____
Reports: postnasal drip	_____
Reports: runny nose and/or nasal congestion	_____
Denies: ear pain	_____
Reports: daytime cough	_____
Pert: nighttime cough disturbing sleep	_____
Denies: wheezing or difficulty breathing	_____
Denies: nausea	_____
Denies: vomiting	_____
Denies: diarrhea	_____
Pert: decreased appetite	_____

Structured exam

NL: general appearance: alert, pleasant, not ill appearing, no distress	_____

NL: conjunctivae & lids: pink & moist	, no pallor or scleral injection, no crusting of lashes
NL: external ears & nose	_____
ABNL: nares (nasal mucosa, septum and turbinates): clear	through video connection anterior nares inspected and clear nasal congestion with pale mucosa, no flare
NL: oropharynx: moist mucous membranes, without pharyngeal erythema or intraoral lesions	, through video connection limited oropharynx inspection completed and normal
NL: without meningeal signs	patient/parent asked to flex and extend neck without any difficulty on visualization or compensatory elevation of shoulders
NL: respiratory effort: no retractions, no tachypnea	, also no audible grunting or other indication for increased work of breathing
NL: extremities: no edema, brisk capillary refill	, with cooperation of patient/parent through video visualization of good perfusion with brisk capillary refill confirmed (asking patient/parent to demonstrate)
NL: inspection (includes subcutaneous tissue): no rash	, no rash, no petechiae or bruising or other markings of skin

Remaining template documentation elements

Counseling:	_____
Coordination of Care:	_____
Diagnosis:	Sinusitis(J01.90)
Assessment:	_____
Plan:	History reviewed and exam considered with limitations acknowledged due to nature of virtual visit through a synchronous telecommunications system Differential diagnosis reviewed but most consistent with sinusitis Discussed sinusitis, cause and treatments Increase fluids/avoid airway irritants Antibiotics (if indicated) as prescribed: Symptomatic treatment as needed Disc prevention strategies for recurrence (including avoiding cigarette smoke exposure, allergen triggers) if applicable Call if no better 3-5 days, sooner for change/concerns Discussed under what circumstances a face-to-face office visit would be

	appropriate recheck prn
Patient Instructions:	

Remaining workflow elements

Procedures

Orders