

TM-CONCUSSION FOLLOW UP (100244)

Category: Neurologic

Scheduled appt type: _____

CC _____

HPI Date of Original Injury: Nature of Original Injury: History of rest/activity taken since last visit:

freeform _____

ROS _____

Structured ROS

Denies: not sleeping well	_____
Denies: fatigue	_____
Denies: headache	_____
Denies: sleeping more than usual	_____
Denies: sleeping less than usual	_____
Denies: drowsiness	_____
Denies: trouble falling asleep	_____
Denies: change in visual acuity	_____
Denies: photophobia	_____
Denies: double vision	_____
Denies: sensitivity to light	_____
Denies: sensitivity to noise	_____
Denies: nausea	_____
Denies: vomiting	_____
Denies: decreased appetite	_____
Denies: headaches that are worse in the morning	_____
Denies: morning vomiting	_____
Denies: change in short term memory	_____
Denies: numbness or tingling	_____
Denies: change in language, academic or work performance	_____
Denies: fine motor difficulties	_____
Denies: headaches increasing in severity or frequency	_____
Denies: balance problems	_____

Denies: feeling mentally foggy	_____
Denies: problems concentrating	_____
Denies: problems remembering	_____
Denies: feeling more slowed down	_____
Denies: emotionally labile	_____
Denies: irritability	_____
Denies: sadness	_____
Denies: nervousness	_____

Structured exam

NL: general appearance: alert, pleasant, not ill appearing, no distress	alert, pleasant, no distress
NL: conjunctivae & lids: pink & moist	_____
NL: pupils & irises: PERRLA	as demonstrated with caregiver assistance with examiner visualization virtually
NL: nares (nasal mucosa, septum and turbinates): clear	_____
NL: oropharynx: moist mucous membranes, without pharyngeal erythema or intraoral lesions	, tongue protrudes midline without fasciculations
NL: without meningeal signs	_____
NL: respiratory effort: no retractions, no tachypnea	_____
NL: extremities: no edema, brisk capillary refill	,as observed by provider with instructions to caregiver/patient
NL: gait and station	normal heel-toe walk forward and backward, Romberg: negative
NL: inspection (includes subcutaneous tissue): no rash	_____
NL: age appropriate gait & coordination on observation	_____
NL: age appropriate social/language interaction	_____
Pert: Extraocular movements	, intact as observed visually assisted by caregiver/patient guided instructions
Pert: heel to toe walking	observed through virtual interface following instructions by examiner
NL: orientation to time, place & person	_____
NL: recent & remote memory	_____
NL: mood & affect	_____

Remaining template documentation elements

Counseling:	_____
Coordination of Care:	_____

Diagnosis:	Concussion without loss of consciousness, subsequent encounter(S06.0x0D)
Assessment:	_____
Plan:	History reviewed and exam considered with limitations acknowledged due to nature of virtual visit through a synchronous telecommunications system Discussed at length with patient/family Improved per exam and history Disc nature of concussion and full recovery expectations Clearance for school: full academic workload with catch up work over next few weeks, cleared for testing Clearance for sports: resume/complete stepwise return to play: Notes written for school as needed Discussed under what circumstances a face-to-face office visit would be appropriate Recheck prn
Patient Instructions:	_____

Remaining workflow elements

Procedures

Orders
