

# TM-COVID19 SUSPECTED (100216)

Category: Infectious Diseases

Scheduled appt type: \_\_\_\_\_

CC \_\_\_\_\_

HPI Social hx: Recent travel to COVID19 high risk area: Exposure to known contact with confirmed COVID19 PMHx: history of underlying respiratory condition or other chronic health problem which may put this patient at increased risk:

freeform  
ROS \_\_\_\_\_

## Structured ROS

Reports: fever/chills	_____
Pert: body aches	_____
Pert: not sleeping well	_____
Pert: loss of appetite	_____
Pert: fatigue	_____
Pert: headache	_____
Pert: red eyes or eye drainage	_____
Reports: sore throat	_____
Denies: difficulty swallowing	_____
Pert: postnasal drip	_____
Reports: runny nose and/or nasal congestion	_____
Pert: ear pain	_____
Reports: daytime cough	_____
Pert: nighttime cough disturbing sleep	_____
Pert: wheezing or difficulty breathing	_____
Denies: chest pain	_____
Pert: nausea	_____
Pert: vomiting	_____
Pert: diarrhea	_____
Reports: decreased appetite	_____
Denies: rashes or dry skin	_____

Structured exam

ABNL: general appearance: alert, pleasant, not ill appearing, no distress	alert, pleasant, not toxic appearing but uncomfortable appearing, no distress
NL: conjunctivae & lids: pink & moist	_____
ABNL: nares (nasal mucosa, septum and turbinates): clear	congested with clear discharge, no flare
NL: oropharynx: moist mucous membranes, without pharyngeal erythema or intraoral lesions	, through video connection limited oropharynx inspection completed and normal with moist mucous membrane
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	, and no audible grunting or other evidence of 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:	Other viral illness(B33.8)
Assessment:	Respiratory Viral Illness with COVID19 suspected or in differential diagnosis
	History reviewed and exam considered with limitations acknowledged due to nature of virtual visit through a synchronous telecommunications system Discussed with patient/family that patient most likely has a respiratory viral illness Differential diagnosis includes COVID19 for which there is currently no known treatment other than supportive care Based on local public health recommendations regarding testing for COVID19 including availability of testing and risk

<b>Plan:</b>	to healthcare personnel performing test and available personal protective equipment, decision made to perform or defer testing: Currently no evidence of respiratory difficulty on exam (no increased work of breathing on exam) Treatment recommendations include avoid airway irritants, increase fluids, use fever reducing medication as discussed (acetaminophen or ibuprofen if older than 6 months of age) including appropriate dosing Discussed expected course of illness which may be a week or more. Discussed social distancing/isolation and decreasing spread of illness by good hand-washing and cleaning of household surfaces according to CDC and local public health recommendations. Discussed minimizing contact with others who may be at risk for more serious illness including the elderly. Discussed return to school/daycare which at a minimum is 24 hours fever free without any fever-reducing medication on board, but also consistent with local recommendations based on prevalence in community. Call if not improved in 7-10 days, sooner for worsening condition including signs of increased work of breathing (grunting, flaring, retracting, shortness of breath) which was discussed with patient/family. Discussed under what circumstances a face-to-face office visit would be appropriate Recheck in office prn.
<b>Patient Instructions:</b>	

Remaining workflow elements

**Procedures**

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**Orders**

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