

TM-DYSMENORRHEA (100236)

Category: Genitourinary

Scheduled appt type: _____

CC _____

HPI _____ Menarche: LMP:

freeform ROS _____

Structured ROS

Denies: fever/chills	_____
Denies: fatigue	_____
Denies: weight loss or gain	_____
Denies: headache	_____
Denies: red eyes or eye drainage	_____
Denies: change in visual fields	_____
Denies: daytime cough	_____
Denies: nighttime cough disturbing sleep	_____
Denies: palpitations	_____
Denies: change in exercise tolerance	_____
Denies: nausea	_____
Denies: vomiting	_____
Denies: diarrhea	_____
Denies: constipation	_____
Denies: blood in stool	_____
Denies: unexplained weight loss	_____
Denies: cramping	_____
Denies: dysuria	_____
Denies: urinary frequency	_____
Denies: flank pain	_____
Reports: dysmenorrhea	_____
Pert: irregular periods	_____
Denies: spotting	_____
Pert: sexual activity	_____

Denies: muscle aches (myalgias)	_____
Denies: rashes or dry skin	_____
Denies: skin tone or texture changes	_____
Denies: increased acne	_____
Denies: hair texture or color changes	_____
Denies: easy bruising	_____
Denies: history of anemia	_____
Denies: feeling more tired than usual	_____
Denies: fatigue	_____
Denies: polydipsia	_____
Denies: polyuria	_____
Denies: cold intolerance	_____
Denies: constipation	_____
Denies: hair or skin texture changes	_____
Denies: weight change	_____
Denies: skin pigmentation changes	_____

Structured exam

NL: general appearance: alert, pleasant, not ill appearing, no distress	_____
NL: conjunctivae & lids: pink & moist	, no pallor or icterus (asked patient/parent to pull down lower eyelids to assess sclera and conjunctiva which was observed via video connection)
NL: external ears & nose	_____
NL: nares (nasal mucosa, septum and turbinates): clear	through video connection anterior nares inspected and clear without nasal flaring
NL: oropharynx: moist mucous membranes, without pharyngeal erythema or intraoral lesions	, through video connection limited oropharynx inspection completed and normal
NL: neck: supple, trachea midline, no masses or significant adenopathy	, with limited virtual inspection no obvious thyroid enlargement/goiter
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, no increased hair distribution/hirsutism

Remaining template documentation elements

Counseling:	
Coordination of Care:	
Diagnosis:	DYSMENORRHEA(625.3)
Assessment:	
Plan:	History reviewed and exam considered with limitations acknowledged due to nature of virtual visit through a synchronous telecommunications system Discussed with patient/parent cramping/dysmenorrhea Discussed use of NSAIDS at onset of period If OTC Ibuprofen/Aleve not helpful, discussed consideration given to OCPs Other causes of dysmenorrhea discussed including PCOS Discussed blood work and elected to order the following if indicated: Discussed consideration of referral to GYN Phone or portal message follow-up after trial of NSAIDS when anticipate period onset Discussed under what circumstances a face-to-face office visit would be appropriate Recheck in office prn
Patient Instructions:	

Remaining workflow elements

Procedures

Orders