

TM-ORAL THRUSH (100199)

Category: Ears, Nose, Mouth, Throat

Scheduled appt type: _____

CC _____

HPI _____ Recent antibiotics: Pacifier/oral appliance use: History of repeated infections:
freeform ROS _____

Structured ROS

Denies: fever/chills	_____
Denies: not sleeping well	_____
Denies: loss of appetite	_____
Denies: fatigue	_____
Denies: sore throat	_____
Denies: runny nose and/or nasal congestion	_____
Denies: daytime cough	_____
Denies: nighttime cough disturbing sleep	_____
Denies: vomiting	_____
Denies: diarrhea	_____
Pert: rashes or dry skin	_____
Denies: history of recurrent infections	_____

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
ABNL: oropharynx: moist mucous membranes, without pharyngeal	, through video connection limited oropharynx inspection completed and demonstrated white patches on tongue,

erythema or intraoral lesions	cheeks and gums, mucous membranes moist
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:	Oral candidiasis(B37.0)
Assessment:	_____
Plan:	History reviewed and exam considered with limitations acknowledged due to nature of virtual visit through a synchronous telecommunications system Discussed pathophysiology of oral candidal infection with parent No indication of immunocompromised state Will treat with oral medication: CINB 1 week, sooner for change/concerns, poor feeding or otherwise acting ill Discontinue use of or clean pacifier/oral appliance if appropriate, if breastfed discussed implications/treatment of mother's breasts Discussed under what circumstances a face-to-face office visit would be appropriate recheck in office prn
Patient Instructions:	

Remaining workflow elements

Procedures

Orders
