

TM-ENCOPRESIS (100233)

Category: Gastrointestinal

Scheduled appt type: _____

CC _____

HPI Details of toilet training history and issues with soiling:

freeform ROS _____

Structured ROS

Denies: fever/chills	_____
Denies: not sleeping well	_____
Denies: malaise	_____
Denies: change in visual acuity	_____
Denies: sore throat	_____
Denies: mouth ulcers	_____
Denies: difficulty swallowing	_____
Denies: daytime cough	_____
Pert: daytime cough	_____
Denies: nighttime cough disturbing sleep	_____
Denies: vomiting	_____
Pert: diarrhea	_____
Reports: constipation	_____
Pert: localized abdominal pain	_____
Denies: unexplained weight loss	_____
Denies: rectal bleeding	_____
Pert: diffused abdominal pain	_____
Pert: decreased appetite	_____
Reports: soiling of underwear	_____
Pert: mucous in stool	_____
Pert: dysuria	_____
Denies: dysuria	_____
Pert: enuresis	_____
Denies: rashes or dry skin	_____

Denies: change in gait or coordination	_____
Denies: weakness of lower extremities	_____

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: 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: Findings:	no gross distension of abdomen
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:	Encopresis(F98.1)
Assessment:	_____
	History reviewed and exam considered with limitations acknowledged due to nature of virtual visit through a synchronous telecommunications system Discussed encopresis/constipation at length, its causes and treatments. Discussed this is not voluntary behavior in

Plan:	children and supportive, positive treatment approaches should be followed. Also discussed how resolution may take weeks to months and can be frustrating for patients and families. Strategies toward positive resolution discussed. Patient/parent educated on common inability to sense/feel stool in rectal vault and inability to control leaking. Abdominal flat plate xray ordered if indicated by history and exam and instructions for follow up regarding results discussed. Discussed treatment must involve cleaning out bowel and appropriate prescription or OTC medications/dosing. Discussed increasing fruits and fiber in diet as well as adequate fluid intake. Also discussed responding to body cues of need to defecate when they occur, and consideration to planned toilet sitting. Medication trial of: Discussed under what circumstances a face-to-face office visit would be appropriate recheck:
Patient Instructions:	

Remaining workflow elements

Procedures

Orders
