

Sample History and Physical Note
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Note for Cameron Carre on 4/2/03 - Chart 21875

Date of Last Physical Exam: 09/18/2002, New patient

Date of Birth: 05/16/1941 **Age:** 61

Marital status of patient is: married. The number of children the patient has is 4.

Chief Complaint (1/1): This 61 year-old male presents today with recent finding of abnormal serum PSA of 16 ng/ml.

Associated signs and symptoms: Associated signs and symptoms include dribbling urine, inability to empty bladder, nocturia, urinary hesitancy and urine stream is slow.

Timing (onset/frequency): Onset was 6 months ago.
Patient denies fever and chills and denies flank pain.

Allergies: Patient admits allergies to adhesive tape resulting in severe rash. Patient denies an allergy to anesthesia.

Medication History: Patient is not currently taking any medications.

Past Medical History: Childhood Illnesses: (+) asthma, **Cardiovascular Hx:** (-) angina, **Renal / Urinary Hx:** (-) kidney problems.

Past Surgical History: Patient admits past surgical history of appendectomy in 1992.

Social History: Patient admits alcohol use, Drinking is described as heavy, Patient denies illegal drug use, Patient denies STD history, Patient denies tobacco use.

Family History: Patient admits a family history of gout attacks associated with father.

Review of Systems: Unremarkable with exception of chief complaint.

Physical Exam: BP Sitting: 120/80 Resp: 20 HR: 72 Temp: 98.6

Patient is a pleasant, 61 year-old male in no apparent distress who looks his given age, is well-developed and nourished with good attention to hygiene and body habitus.

Neck: Neck is normal and symmetrical, without swelling or tenderness.

Thyroid is smooth and symmetric with no enlargement, tenderness or masses noted.

Respiratory: Respirations are even without use of accessory muscles and no intercostal retractions noted. Breathing is not labored, diaphragmatic, or abdominal.

Lungs clear to auscultation with no rales, rhonchi, wheezes, or rubs noted.

Cardiovascular: Normal S1 and S2 without murmurs, gallop, rubs or clicks.

Peripheral pulses full to palpation, no varicosities, extremities warm with no edema or tenderness.

Gastrointestinal: Abdominal organs, bladder, kidney: No abnormalities, without masses, tenderness, or rigidity.

Hernia: absent; no inguinal, femoral, or ventral hernias noted.

Liver and/or Spleen: no abnormalities, tenderness, or masses noted.

Stool specimen not indicated.

Genitourinary: Anus and perineum: no abnormalities. No fissures, edema, dimples, or tenderness noted.

Scrotum: no abnormalities. No lesions, rash, or sebaceous cyst noted.

Epididymides: no abnormalities, masses, or spermatocele, without enlargement, induration, or tenderness.

Testes: symmetrical; no abnormalities, tenderness, hydrocele, or masses noted.

Urethral Meatus: no abnormalities; no hypospadias, lesions, polyps, or discharge noted.

Penis: no abnormalities; circumcised; no phimosis, peyronie's, condylomata, or lumps noted.

Prostate: size 60 gr, RT>LT and firm.

Seminal Vesicles: no abnormalities; symmetrical; no tenderness, induration, or nodules noted.

Sphincter tone: no abnormalities; good tone; without hemorrhoids or masses.

Skin/Extremities: Skin is warm and dry with normal turgor and there is no icterus. No skin rash, subcutaneous nodules, lesions or ulcers observed.

Neurological/Psychiatric: Oriented to person, place and time.

Mood and affect normal, appropriate to situation, without depression, anxiety, or agitation.

Test Results: No tests to report at this time.

Impression: Elevated prostate specific antigen (PSA).

Plan:

Cystoscopy in the office.

Diagnostic & Lab Orders: Ordered serum creatinine. Urinalysis and C & S ordered using clean-catch specimen. Ordered free prostate specific antigen (PSA). Ordered ultrasound of prostate.

I have discussed the findings of this follow-up evaluation with the patient. The discussion included a complete verbal explanation of any changes in the examination results, diagnosis and current treatment plan. Discussed the possibility of a TURP surgical procedure; risks, complications, benefits, and alternative measures discussed. There are no activity restrictions. Instructed Ben to avoid caffeinated or alcoholic beverages and excessively spiced foods. Questions answered. If any questions should arise after returning home I have encouraged the patient to feel free to call the office at 327-8850.

Prescriptions :

Proscar Dosage: 5 mg tablet Sig: once daily Dispense: 30 Refills: 0 Allow Generic: No

Patient Instructions:

Patient completed benign prostatic hypertrophy questionnaire

_____ Dr. Urologist, M.D.

Sample Referral Letter
Charting Plus™ - Electronic Medical Records
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4/2/03

A. General Practitioner
1231 8th Street
West Des Moines, IA 50265

Dear Dr. General Practitioner:

Cameron Carre was seen in my office for evaluation following your initial referral. Thank you again for allowing me to participate in the care of your patients. In an attempt to provide your patients with quality patient care through improved communication, the following represents my notes from their last office visit:

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Hernia: absent; no inguinal, femoral, or ventral hernias noted.

Liver and/or Spleen: no abnormalities, tenderness, or masses noted.

Stool specimen not indicated.

Genitourinary: Anus and perineum: no abnormalities. No fissures, edema, dimples, or tenderness noted.

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Prostate: size 60 gr, RT>LT and firm.

Seminal Vesicles: no abnormalities; symmetrical; no tenderness, induration, or nodules noted.

Sphincter tone: no abnormalities; good tone; without hemorrhoids or masses.

Skin/Extremities: Skin is warm and dry with normal turgor and there is no icterus. No skin rash, subcutaneous nodules, lesions or ulcers observed.

Neurological/Psychiatric: Oriented to person, place and time.

Mood and affect normal, appropriate to situation, without depression, anxiety, or agitation.

Test Results: Not returned

Impression: Elevated prostate specific antigen (PSA).

Plan:

Cystoscopy in the office.

Diagnostic & Lab Orders: Ordered serum creatinine. Urinalysis and C & S ordered using clean-catch specimen.

Ordered free prostate specific antigen (PSA). Ordered ultrasound of prostate.

I have discussed the findings of this follow-up evaluation with the patient. The discussion included a complete verbal explanation of any changes in the examination results, diagnosis and current treatment plan. Discussed the possibility of a TURP surgical procedure; risks, complications, benefits, and alternative measures discussed. There are no activity restrictions. Instructed Ben to avoid caffeinated or alcoholic beverages and excessively spiced foods. Questions answered. If any questions should arise after returning home I have encouraged the patient to feel free to call the office at 327-8850.

Prescriptions:

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Patient Instructions:

Patient completed benign prostatic hyperptrophy questionnaire

If I may be of any further assistance in the care of this patient, please let me know.

Sincerely,

Dr. Urologist, M.D.

Sample Patient Instruction
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Patient Instructions for Cameron Carre on 4/2/2003

BENIGN PROSTATIC HYPERPLASIA

Circle the numerical score for each question below.

OVER THE LAST MONTH OR SO:

1. How many times did you most typically get up to urinate from the time you went to bed at night until the time you got up in the morning?

- | | |
|-----------------|---|
| None | 0 |
| 1 time | 1 |
| 2 times | 2 |
| 3 times | 3 |
| 4 times | 4 |
| 5 or more times | 5 |

2. How often have you had a sensation of not emptying your bladder completely after you finished urinating?

- | | |
|-------------------------|---|
| Not at all | 0 |
| Less than 1 time in 5 | 1 |
| Less than half the time | 2 |
| About half the time | 3 |
| More than half the time | 4 |
| Almost always | 5 |

3. How often have you had to urinate again less than two hours after you finished urinating?

- | | |
|-------------------------|---|
| Not at all | 0 |
| Less than 1 time in 5 | 1 |
| Less than half the time | 2 |
| About half the time | 3 |
| More than half the time | 4 |
| Almost always | 5 |

4. How often have you found that you stopped and started again several times when you urinate?

- | | |
|-------------------------|---|
| Not at all | 0 |
| Less than 1 time in 5 | 1 |
| Less than half the time | 2 |
| About half the time | 3 |
| More than half the time | 4 |
| Almost always | 5 |

5. How often have you found it difficult to postpone urination?

- | | |
|-------------------------|---|
| Not at all | 0 |
| Less than 1 time in 5 | 1 |
| Less than half the time | 2 |
| About half the time | 3 |
| More than half the time | 4 |
| Almost always | 5 |

6. How often have you had a weak urinary stream?

Not at all	0
Less than 1 time in 5	1
Less than half the time	2
About half the time	3
More than half the time	4
Almost always	5

7. How often have you had to push or strain to begin urination?

Not at all	0
Less than 1 time in 5	1
Less than half the time	2
About half the time	3
More than half the time	4
Almost always	5

TOTAL SCORE: _____
(sum of questions 1-7)

Source: 2002 Griffith's 5-Minute Clinical Consult

Sample Billing Statement
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Billing Statement - Wednesday, April 02, 2003

Provider: Dr. Urologist, M.D.
Patient: Cameron Carre, Chart 21875
1st Street
West Des Moines, IA 50266

Diagnoses

1. 790.93 Elevated Prostate Specific Antigen (PSA)

Treatments

1. 52000 Cystourethroscopy (Separate Procedure)
Related Diagnoses:
Modifiers:
Units:
2. 84154 Prostate Specific Antigen (PSA); Free
Related Diagnoses:
Modifiers:
Units:
3. 82565 Creatinine; Blood
Related Diagnoses:
Modifiers:
Units:
4. 87086 Culture, Bacterial; Quantitative Colony Count, Urine
Related Diagnoses:
Modifiers:
Units:
5. 99212 Office or other outpatient visit - est. patient - 10 min.
Related Diagnoses:
Modifiers:
Units:

Referring Physician: General Practitioner
Date Last Seen: 9/18/2002

Sample Prescription
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Dr. Urologist, M.D.

DEA#:

Name: Cameron Carre
Address: 1st Street
West Des Moines, IA 50266

Date: 4/2/2003

Proscar
5 mg tablet
once daily

X _____
Substitution Permitted

X _____
Dispense as written

Refills: 0

Dispense: 30

Allow Generic: No