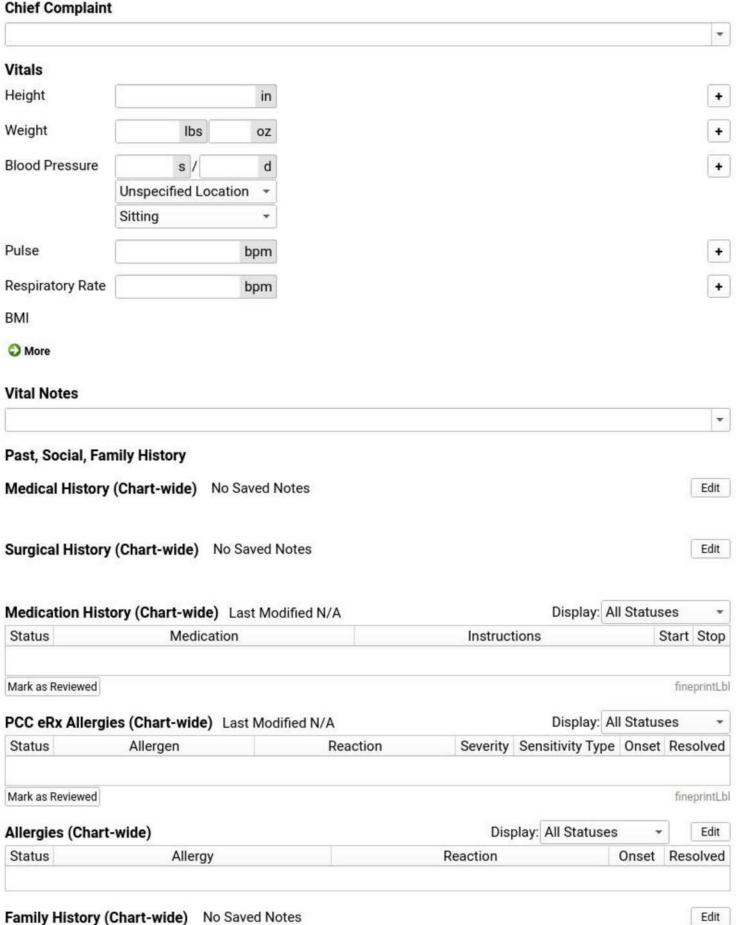
Intake Chief (



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Social His	tory (Chart-	-wide) No Saved	d Notes	Edit
Social His	tory			
Make All:	Yes No	NA		
Yes No NA	A			
000	Nicotine U	lse		
	notes			*
000	add item			-
	notes			-
	ist (Chart-v		Display: All Statuses 🔻	Edit
Status		Problem	Problem Note Onset	Resolved
Dra an bia	*****			
Pre-op his Make All:	YN	N/A		
Y N N/A	Able to achi	eve at least 4 MET	TS of activity without symptoms of cardiovascular disease?	
70.70	notes			
000	Patient histo	ory of reaction to a	anesthesia	
	notes	<u>I</u> .5		*
000	Family histo	ory of reaction to a	nesthesia	
	notes			
000	add item			-
	notes			*
	0.100.000.000			1000

Review of Systems by system

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Ma	ke A	All: A	bn NL N/A		
Abn	NL	N/A			
0	0	0	Constitutional		
			notes	-	
0	0	0	Head		
			notes	*	
0	0	0	Neck		
			notes	_	
0	0	0	Eyes		
			notes	▼	
0	0	0	Ears, Nose, Mouth, Throat		
			notes	-	
0	0	0	Cardiovascular		
			notes	_	
0	0	0	Musculoskeletal		
			notes	•	
0	0	0	Lungs		
			notes		
Abn	NL	N/A			
0	0	0	Gastrointestinal		
			notes	▼	
0	0	0	Neurologic		
			notes	•	
0	0	0	Psychiatric		
			notes	¥	
0	0	0	Skin		
			notes	_	
0	0	0	add item	-	
			notes	*	

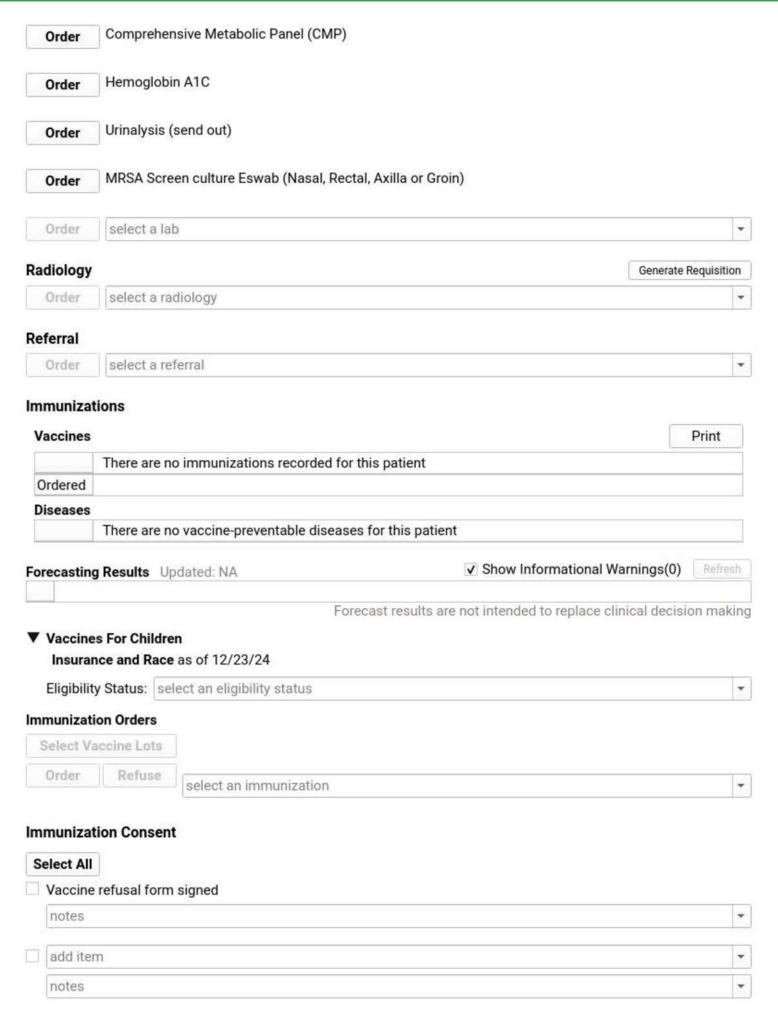
Physical Exam

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Make All: ABN NL N/E					
ABN	NL	N/E			
0	0	0	General Appearance		
			notes	▼	
0	0	0	Head		
			notes	×	
0	0	0	Eyes		
			notes	·	
0	0	0	Ears		
			notes	*	
0	0	0	Nose		
			notes	*	
0	0	0	Oropharynx		
			notes	_	
0 (0	0	Neck		
			notes	*	
0	0	0	Chest		
			notes	*	
ABN	NL	N/E			
0	0	0	Lungs		
			notes	*	
0	0	0	Cardiovascular		
			notes	•	
0	0	0	Back		
			notes	▼	
0	0	0	Abdomen		
			notes	•	
0	0	0	Extremities		
			notes	▼	
0	0	0	Musculoskeletal		
			notes	•	
0	0	0	Neurologic		

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Forms

select a form

Visit Documents

Navigational Anchors in BROOKVILLE Adult Pre-Op

- 1. Intake
- 2. Vitals
- 3. Past, Social, Family History
- 4. Medication History
- 5. PCC eRx Allergies
- 6. Allergies
- 7. Social History Adult PE
- 8. Problem List
- 9. HPI
- 10. Review of Systems by system
- 11. Physical Exam
- 12. EKG
- 13. Diagnoses
- 14. Pre-op plan
- 15. Follow Up
- 16. Labs
- 17. Prescriptions
- 18. Radiology
- 19. Referrals
- 20. Immunizations
- 21. Immunization Consent
- 22. Forms
- 23. Visit Documents

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