



Patient Demographics

Edit

Date of Birth:
Sex:

Birth History

GA at Birth:
Multiple Birth: Undetermined

Race, Ethnicity, and Preferred Language

Race:
Ethnicity:
Pref. Language:
Other Language:
Other Language:

Patient Information

Patient Flags:
PCP:
Custom 1:
Custom 2:
Custom 3:
Old ID#:
Relation to Bill Payer:

Alternate Identifiers

Siblings (Chart-wide)

None

Independent Historian/Relationship

[Empty dropdown menu]

Primary Care Physician (Chart-wide) No Saved Notes

Edit

Chief Complaint

[Empty text area]

Medications

Any allergies to medications? If so, which one?

notes [dropdown arrow]

Current Medications

notes [dropdown arrow]

Vitamins, herbal remedies, homeopathic remedies?

notes [dropdown arrow]

Pharmacy/Hospital of Choice

notes [dropdown arrow]

Vitals

Weight [input] lbs [input] oz [plus icon]

Temperature [input] °F [plus icon]
Tympanic [dropdown arrow]

Pulse [input] bpm [plus icon]



O₂ Saturation %

Blood Pressure s / d

Unspecified Location

Sitting

Height in

More

Vital Notes

Pertinent Past Medical History

Make All:

Yes No N/a

ADHD

Concussion

Anxiety

Depression

Learning disability/developmental delays

Migraines/Frequent Headaches

Sleep Disorder

Other

Yes No N/a



History of Present Illness

CONCUSSION--HPI

Date of injury

Description of injury

Hospital visit?

Attendance at school

Current school and grade level

Baseline Academic performance

Feels % back to normal

Returned to play

Start of return to play

CONCUSSION -Symptoms

Make All: YES NO N/A

YES NO N/A

Headache

Pressure in head

Neck Pain



Nausea or Vomiting

notes

Dizziness

notes

Blurred vision

notes

Balance problems

notes

Sensitivity to light

notes

YES NO N/A

Sensitivity to noise

notes

Feeling Slowed down

notes

Feeling like 'in a fog'

notes

"Don't feel right"

notes

Difficulty Concentrating

notes

Difficulty remembering

notes

Fatigue or low energy

notes

Confusion

notes

YES NO N/A

Drowsiness

notes

More Emotional



 Feeling Irritable

 Sadness

 Nervous or Anxious

 Trouble falling asleep

 add item

ROS

Make All:

Abn NL NA

 Constitutional (fever, chills, HA, body aches, dizziness, appetite, malaise, night sweats, disrupted sleep, fussiness)

 Eyes (itchy, pain, redness, drainage, photophobia, change in visual acuity, double vision)

 ENT (runny nose/congestion, ear pain, pressure or fullness in ears or sinuses, mouth ulcers, sore throat, difficulty swallowing, change in taste perception)

 Cardiovascular (chest pain, color change, sweating with feeds, dyspnea on exertion, dizziness with exercise, palpitations)

 Respiratory (cough-daytime/nighttime, chest pain, SOB, DOE, exposure to cigarette smoke, need to use asthma rescue med >2x/wk)

 Gastrointestinal (abdominal pain, nausea, vomiting, diarrhea, stool pattern changes, blood in stool, feeding pattern)

 Genitourinary (change in frequency, urgency, dysuria, enuresis, flank pain, testicular pain, vaginal irritation/discharge)



notes

- Musculoskeletal (muscle aches, back pain, joint pain/redness/swelling, recurrent sprains/dislocations)

notes

Abn NL NA

- Integumentary (rash, lesion, eczema, acne)

notes

- add item

notes

Growth Charts

Growth Charts are not available when patient's sex is unknown.

Medication History (Chart-wide) Last Modified N/A

Display: All Statuses

Status	Medication	Instructions	Start	Stop

Mark as Reviewed

fineprintLbI

Medical History (Chart-wide) No Saved Notes

Edit

Family Medical History (Chart-wide)

Edit

Condition	Relationship	Note

Social History (Chart-wide) No Saved Notes

Edit

Problem List (Chart-wide)

Display: All Statuses

Edit

Status	Problem	Problem Note	Onset	Resolved

Allergies (Chart-wide)

Display: All Statuses

Edit

Status	Allergy	Reaction	Onset	Resolved

Physical Exam - Concussion

Make All:

NL ABN N/A

- General (3 VS; Appearance)

notes



- Head**
- Eyes (conjunctiva/lids, PERRLA; fundus)**
- Ears, Nose, Mouth, Throat (external ears/nose; otoscopic, assessment of hearing, OP, lips/teeth/gums)**
- Neck (masses/symmetry/tracheal position; thyroid)**
- Respiratory (effort, percussion, palpation, auscultation)**
- Chest (inspection, palpation)**
- Cardiovascular (PMI, auscultation, edema, pulses)**
- NL ABN N/A**
- Gastrointestinal (masses/tenderness, liver/spleen; hernias, anus/perineum, rectum; occult blood)**
- Genitourinary (male - scrotum; testis; female - external, bladder fullness/tenderness; adnexal tenderness)**
- Lymphatic (2 or more areas - neck, axilla, groin, other)**
- Skin (rashes/lesions/ulcers; palpation - induration/warmth/edema)**
- Musculoskeletal (gait/station/inspection - clubbing, cyanosis, ischemia; bones - alignment/ROM, stability, strength)**
- Psychiatric (judgement, orientation, mood, memory)**
- Neurologic (CNs, DTRs, Sensation)**
- Vestibular/Ocular Motor Screening**



notes

NL ABN N/A

Baseline Symptoms Headache (H) Dizziness (D) Nausea (N) Fogginess (F)

notes

Smooth Pursuits

notes

Saccades - Horizontal

notes

Saccades - Vertical

notes

Convergence (Near Point) nl < 6 cm

notes

VOR - Horizontal

notes

VOR - Vertical

notes

Visual Motor Sensitivity Test

notes

NL ABN N/A

add item

notes

Medical Procedure

Order select a medical procedure

Medical Test

Order select a medical test

Referral

Order select a referral

Assessment - Concussion

Select All

- ImPACT scoring with composite scores (Impaired <1-2%, Borderline 3-8%, Low Average 9-24%, Average 25-75%, High Average 76-90%, Superior 91-99%, Very Superior 99.9%)



notes

Memory composite (verbal) %

notes

Memory composite (visual) %

notes

Visual motor speed composite %

notes

Reaction time %

notes

Impulse control tally

notes

Total symptom score

notes

add item

notes

Assessment Notes

Diagnoses

Concussion with no loss of consciousness

Refine the diagnosis of Concussion with no loss of consciousness

Include on Patient Reports

notes

Add to Problem List Onset: Problem Note:

Concussion with loss of consciousness

Refine the diagnosis of Concussion with loss of consciousness

Include on Patient Reports

notes

Add to Problem List Onset: Problem Note:

Posttraumatic headache

Refine the diagnosis of Posttraumatic headache



Include on Patient Reports

notes ▼

Add to Problem List Onset: Problem Note:

Superficial injury of head

Refine the diagnosis of Superficial injury of head ▼

Include on Patient Reports

notes ▼

Add to Problem List Onset: Problem Note:

select diagnosis ▼

notes ▼

Counseling - Concussion

Select All

Educated on the metabolic and energy crisis occurring in the brain

notes ▼

Educated on the importance of limiting both cognitive and physical exertion

notes ▼

Discussed risk of complications and the signs and symptoms that require immediate medical attention

notes ▼

Provided reassurance and answered patient and/or parents questions and concerns

notes ▼

Discussed return to school criteria

notes ▼

Discussed no sports until cleared

notes ▼

Instructed on return to play protocol 1. No activity, complete rest until asymptomatic, then proceed to step 2

notes ▼

Step 2: light aerobic exercise (walking, stationary cycling), then proceed to step 3

notes ▼

Step 3: Sport-specific training (running/skating), then proceed to step 4

notes ▼



- Step 4: Non contact running drills, then proceed to step 5

notes ▼

- Step 5: Full - contact training after medical clearance, then proceed to step 6

notes ▼

- Step 6: full return to play

notes ▼

- add item ▼

notes ▼

Concussion Plan

Select All

- Education as outlined in counseling:

notes ▼

- Academic Plan:

notes ▼

- No school

notes ▼

- May return to school on:

notes ▼

- May return to school with an abbreviated day, limiting exposure to classes such as math and science which are harder to manage post concussion, then slowly progress to full day as tolerated

notes ▼

- No physical activity

notes ▼

- Return to play:

notes ▼

- Melatonin 3-5 mg as needed for sleep

notes ▼

- Omega 3, 1000 mg once a day

notes ▼

- Tylenol or ibuprofen as directed for pain

notes ▼



- Take rest periods when symptoms increase or reappear

notes

- Parent and/or patient understood and agreed with plan of care

notes

- Request evaluation by vestibular physical therapist

notes

- School note provided

notes

- Follow up as soon as symptoms resolve

notes

- Follow up in 7-10 days if symptoms do not resolve

notes

- Other:

notes

- add item

notes

Number and Complexity of Problems Addressed

Select All

- LEVEL 2: 1 self - limited or minor problem

notes

- LEVEL 3: 2 or more self - limited or minor problems; OR 1 stable chronic illness; OR 1 acute uncomplicated illness or injury OR 1 stable acute illness; OR 1 acute uncomplicated illness or injury requiring hospital inpatient or observation level of care

notes

- LEVEL 4: 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; OR 2 or more stable chronic illnesses; OR 1 undiagnosed new problem with uncertain diagnosis; OR 1 acute illness with systemic symptoms; OR 1 acute complicated injury

notes

- LEVEL 5: 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; OR 1 acute or chronic illness or injury that poses a threat to life or bodily function

notes

- add item





Amount and/or Complexity of Data

- LEVEL 2: Minimal or None



- LEVEL 3: ONE CATEGORY REQUIRED: CATEGORY 1: (2/3) 1. Review of prior external notes from each unique source 2. Ordering of each unique test or 3. Review of the results of each unique test OR CATEGORY 2: assessment requiring an independent historian



- LEVEL 4: ONE CATEGORY REQUIRED: CATEGORY 1: (3/4) 1. Review of prior external notes from each unique source 2. Ordering each unique test 3. Review of the results of each unique test 4. Assessment requiring an independent historian OR CATEGORY 2: independent interpretation of test performed by another MD/QHCP/ appropriate source (not separately reported) OR CATEGORY 3: Discussion of management or test interpretation with external MD/QHCP/ appropriate source (not separately reported)



- LEVEL 5: TWO CATEGORIES REQUIRED: CATEGORY 1: (3/4) 1. Review of prior external notes from each unique source 2. Ordering of each unique test or 3. Review of the results of each unique test 4. Assessment requiring an independent historian OR CATEGORY 2: Independent interpretation of test performed by another MD/QHCP (not separately reported) OR, CATEGORY 3: Discussion of management or test interpretation with external MD/QHCP/ appropriate source (no separately reported)



- add item





Risk of morbidity from additional diagnostic testing/treatment

- LEVEL 2: Minimal Risk



- LEVEL 3: Low Risk



- LEVEL 4: Moderate risk-prescription drug management



- LEVEL 4: Moderate risk-dx or treatment significantly limited by SDoH



- LEVEL 4: Moderate risk-decision re: minor surgery w/identified pt or procedure risk factors





- LEVEL 5: High risk - decision re: hospitalization OR ESCALATION OF HOSPITAL LEVEL CARE

notes



- LEVEL 5: High risk - decision re: emergency major surgery

notes



- LEVEL 4: Moderate risk-decision re: elective major surgery w/o identified pt or procedure risk factors

notes



- add item



notes



Today's Total Time

Select All

- Pre - visit: reviewing notes, results, correspondence, reports, past records (note sources, dates)

notes



- Visit: history from pts and others

notes



- Visit: exam; discussion; counseling; education; planning

notes



- Visit: ordering; referrals; documentation

notes



- Visit: prescriptions; PA

notes



- Post - visit: care coordination

notes



- Post - visit: chart documentation

notes



- Post - visit: independent interpretation of tests (not separately billed)

notes



- Post - visit: reviewing and communication results

notes



- Total time

notes



 add item notes

Visit Documents

Navigational Anchors in TOPEKAKF Concussion Initial

1. Medications
2. Vitals
3. Pertinent Past Medical History
4. History of Present Illness
5. CONCUSSION--HPI
6. CONCUSSION -Symptoms
7. ROS
8. Physical Exam - Concussion
9. Referral Orders
10. Diagnoses
11. Counseling - Concussion
12. Concussion Plan
13. Number and Complexity of Problems Addressed
14. Amount and/or Complexity of Data
15. Risk of morbidity from additional diagnostic testing/treatment
16. Today's Total Time
17. Prescriptions
18. Visit Documents