

221 S. Main St., Ste. 201
Royal Oak, MI 48067
Tel: (248) 398-6459 (248) 398-4770

Patient: Facility:
Examiner: Date: Rm#:

CHIEF COMPLAINT (or original targeted Sx's):

INTERVAL HISTORY OF PRESENT ILLNESS (progress of Sx's of PI, response to Tx, med. side effects; duration, timing, severity):

(HPI: brief=1-3,07/08; extended >3, 09/10)

INTERVAL MED/SOCIAL/FAMILY HX: No change since last visit, date:
Except:

(Psych/Med Hx, Family&Social Hx: N/A 07/08; Problem Pertinent=Psi/Med only 09; Complete = Psi/Med + Familr & Social Hx 10)

Current Psychotropic Medications:

Labs/AIMS/DISCUS Results (if applicable):

INTERVAL REVIEW OF SYSTEMS: No change since last visit, date:
Except:

(N/A 07; Problem Pertinent, wonly N/A, 08; Extended, all positive responses, 2 to 9 negative responses, 09; Complete, 10 or more, 10)

Nature of Presenting Problem: Stable/Improving(07) Minor Complication/Inadequately Responding(08) Significant Complication or New Problem(09) Unstable or Significant New Problem Requiring Immediate Attention (10)

Mental Status Examination:

Constitutional: Recent Weight Loss Recent Weight Gain Excessive Fatigue Fever None
Vitals: BP PR: R: Temp:
Grooming: Good Fair Poor
Motor Movements: WNL Agitation Retardation Choreic Spastic Hemiplegia Tardive Dyskinesia
Flaccidity/Atrophy Other
Stature: Frail Well-nourished Obese Sitting Standing Lying
Gait: Steady Steady w/assist Ataxic W/C self W/C assist
Level of consciousness: Alert Drowsy Unable to sustain arousal without verbal/physical cueing
Demeanor: Cooperative Engaging Pleasant Resistant Oppositional Apathetic Impulsive
Affect: Broad/Mobile Constricted Blunted Flat Labile Pseudobulbar State
Mood: Euthymic Depressed Anxious Angry Irritable Elevated Elated Other
Speech/Language: Mute Clear Slurred Dysarthric / Coherent Incoherent / Spontaneous Restricted Guarded
Normal Rate Slow rate / Normal Volume Loud Soft / Hyperverbal Pressured Dysnomic Dysfluent
Perseveration Poverty of speech
Global aphasia Expressive aphasia Receptive aphasia
Thought Process: Intact Logical Illogical Confused/Disorganized Periods of confusion Loose Slowed
Circumstantial Tangential Flight of Ideas Confabulation Ideas of reference
Thought Content:

Suicidal/Homicidal Ideation:

Psychotic S/S (e.g., delusions, hallucinations - describe, including whether associated with significant subjective distress and/or effects on behavior):

Other Perceptual Disturbances: Illusions Depersonalization Derealization
Fund of Knowledge: Good Fair Poor Judgment: Good Fair Poor Insight: Good Fair Poor
Orientation: Person - WNL / Impaired Place - WNL / Impaired Time - WNL / Impaired
Attention: WNL / Impaired Concentration: WNL / Impaired
Memory: Recent - WNL / Impaired Remote - WNL / Impaired
Sleep problems: None Initiating Sustaining Hypersomnia Appetite: Good Fair Poor
Additional MS Observations: _____

(Problem Focused =1-5 elements, 07; Expanded PF=6-8, 08; Detailed=9 or more, 09; Comprehensive=All + at least 3 Constitutional, 10)

DIAGNOSIS (if applicable, indicate "New" or "Revised"): _____

Global Assessment of Functioning: _____

ASSESSMENT/FORMULATION:

MDS-FS(ADL) _____ MDS-BEH _____ MMSE _____ GDS _____
PHQ-9 _____ BIMS _____ CAM _____ Other _____

GDR Considerations or, a GDR is not being considered this visit:

Yes, I will attempt the following GDR _____

No, a GDR was determined to be contraindicated at this time for the following reason:

Counseling and/or Coordination of Care (complete this section only if >50% of eval. time involved C/C of C and coding based on time):
TOTAL TIME of eval: _____ More than 50% of the time of this evaluation involved counseling and/or coordination of care

Prolonged Service (complete this section only if attaching PS code 99356 [and 99357] to the Core Service code)

START TIME of Face-to-Face Contact: _____ STOP TIME of Face-to-Face Contact: _____

Complexity of Medical Decision Making: Straightforward (07) Low (08) Moderate (09) High (10)

OTHER RECOMMENDATIONS (state diagnosis & goals/benefits corresponding with any new med Rx's): _____

