J	ewis	h	Hos	pital	
A	service	of	Jewish	Hospital	4

A service of Jewish Hospital & St. Mary's HealthCare					
•					
Critically  ill  injured patient Total full-attention by attending:  addtl. 30 min x (total REQUESTED BY:	first 31-74 min time:)				
INITIAL		CONSULT NOTE		Attending:	
Information from: P	atient Fam	nily Caregiv	/er		
Reason:					
Present Illness: Main sign/sympto	om (1/1/4/4/4): (location,	quality, severity, duration	, timing, context, modi	fiers, associated signs/sympto	oms)
MEDO					
MEDS:					
ROS: Checked areas (✓) were explo	ared but pogative; areas	numbered (#) were positi	ve as described (Ne c	1/2/10/10)	
Constitutuional, skin,					
Lymph, neuro, Psych	, endocrine,	Immune,			
Positives:					
Pact History (0/0/4/2/2): 1		· · · · · · · · · · · · · · · · · · ·			3
Past History (0/0/1/3/3): [	JRUG ALLERGIE	.5.			
Medical					
Social				O	
				Physicians Orders/Progress Notes	
Family					

Physical: BP: Pulse: Resps: Weight: Temp:  Physical exam (1/6/12/2x9/2x9): At a minimum, areas checked (✓) were examined, but were normal/non-contributory; areas crossed (X) were abnormally relevant as described by #:	-
were normal/non-contributory; areas crossed (x) were abnormally relevant as described by #:  1. Appearance	10. Scrotum/testes penis prostate 11. Ext/vagina urethra bladder cervix uterus adnexa 12. Gait/station digit/nails insp/palp ROM Stability Musc. Strength/tone 13. Neck LN axillae LN groin LN DTR/ Babinski sensation 15. Judgement/insight orientation memory mood/affect digit Records Reviewed (2) Requested 5 Da=
Plan:	
2	
y.	
(1/1/2/3/4)	
☐ COUNSEL MORE THAN 50% OF (20/40/55/80/110) MIN SESSION	N Old records requested: Obtain Hx from family:
Signature:	