

		Bullet Counter
History of Presenting Illness		
Element	Description Examples	
1	Location	site of problem, localized, diffues, radiating
2	Quality	sharp, dull, throbbing, stabbing, burning
3	Severity	VAS Pain Scale
4	Duration	intermittent, constant, length of time
5	Time	nightly, after meals, evenings, mornings with exercise
6	Context	improving, worsening, recurrent
7	Modifying Factors	what makes it better or worse
8	Associated Symptoms	bruising, swelling, locking, tingling, numbness
note: one bullet per numbered area described		

Review of Systems		
Systems	Symptom Examples	
1	Constitutional	unexpected weight loss, weight gain, fever, chills, fatigue
2	Eyes	corrected lenses, blurred/double vision, eye pain, redness, watering
3	ENT	headache, difficulty swallowing, ringing in ears, nose bleeds, earache
4	Cardiovascular	chest pain, palpitations, murmurs, fainting
5	Respiratory	SOB, wheezing, coughing, pain on inspiration, snoring
6	Gastrointestinal	heartburn, nausea, vomiting, diarrhea, constipation, bloody/tarry stools
7	Genitourinary	frequency, urgency, difficulty or painful urination, flank pain, bleeding
8	Musculoskeletal	joint pains, swelling, instability, stiffness, redness, muscle pain, heat
9	Skin	skin changes, rash, itching, poor healing, redness
10	Psychiatric	nervousness, anxiety, depression, hallucinations
11	Neurological	Numbness/tingling, unsteady gait, tremors, dizziness, seizures
12	Hematologic	easy bleeding, bruising
13	Endocrine	excessive urination or thirst, heat/cold intolerance
14	Allergy	reactions to foods or enviroment
<p>Note 1: 1 bullet for each system described</p> <p>Note 2: symptoms (shortness of breath, chest pain) NOT diseases (heart attack, COPD)</p> <p>Note 3: This section can be obtained by ancillary staff or questionnaire. Physician must initial and date form and refer to it in the evaluation</p> <p>Note 4: For follow up visits a ROS obtained at a previous visit need not be re-recorded if the physician describes any changes in the previous symptoms and notes the changes in the previous information, and notes the date and location of the earlier ROS</p>		

Past, Family, & Social Histories		
History Areas	Examples	
1	Past History	Illness, hospitalizations, meds, surgeries, injuries, allergies
2	Family History	inherited diseases, patient risk factors, medical events
3	Social History	Marital status, occupation, alcohol, tabacoo, drug use