



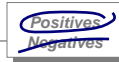
# 4A - Respiratory Problem

**Time:** \_\_\_\_\_ **Primary MD:** \_\_\_\_\_  
**Room:** \_\_\_\_\_ **Specialist:** \_\_\_\_\_  
**Mode of Arrival:** \_\_\_\_\_ **Historian:** \_\_\_\_\_ **Hx limited by:** \_\_\_\_\_ **Prehospital orders:** \_\_\_\_\_  
*private auto* *patient* *AMS* [ ] see EMS flowsheet  
*EMS* *family* *unconscious*  
*police* *friend* *dementia*  
*wheelchair van* *caretaker* *acuity*  
*EMS*  
*old chart*



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**Chief Complaint:** shortness of breath / wheezing / asthma attack



## History of Present Illness:

**Duration:** \_\_\_\_\_ minutes / hours / days / weeks / months / years  
**Onset:** just prior to arrival today @: \_\_\_\_\_ yesterday

**Timing:** still occurring  
 improved  
 worse  
 resolved

**Severity:** mild  
 moderate  
 severe  
 \_\_\_\_\_ (1-10)

### Modifying Factors:

**Aggravating:** [ ] none  
 exertion  
 lying down  
 cough

**Alleviating:** [ ] none  
 rest  
 sitting up

### Current / Associated Symptoms:

dyspnea  
 dyspnea on exertion  
 PND  
 orthopnea  
 wheezing  
 stridor  
 palpitations  
 rapid  
 skipped beats  
 lightheadedness / syncope  
 legs - R / L  
 pain  
 swelling

chest pain / discomfort  
 quality:  
 tight  
 heavy  
 pressure  
 sharp  
 pleuritic  
 with cough

location:  
 left  
 central  
 right  
 back

timing:  
 constant  
 intermittent  
 duration \_\_\_\_\_

fevers / chills / sweats  
 subjective / \_\_\_\_\_ ° F  
 cough  
 non-productive  
 productive  
 color \_\_\_\_\_ / bloody  
 hemoptysis  
 URI symptoms  
 earache  
 sore throat  
 sinus pain / pressure / discharge  
 medications / inhalers / nebulizers used:

### CAD risk factors:

[ ] none  
 n/a  
 known CAD  
 smoking  
 cholesterol

HTN  
 family history  
 diabetes mellitus  
 cocaine use

### PE risk factors:

[ ] none  
 n/a  
 previous PE / DVT  
 malignancy  
 obesity  
 trauma  
 Greenfield's  
 pregnancy

postpartum smoking  
 immobilization surgery last 60 days  
 coag disorder  
 estrogen med  
 other: \_\_\_\_\_

### TAD risk factors:

[ ] none  
 n/a  
 HTN  
 FHx (1st degree)

Turner's  
 AV disease  
 connective tissue disorder

### Quality Measures:

AMI - aspirin  
 chest pain - EKG  
 syncope - EKG

pneumonia:  
 vital signs  
 O<sub>2</sub> saturations  
 mental status  
 empiric antibiotic

### AAA risk factors:

[ ] none  
 n/a  
 known AAA  
 HTN

FHx (1st degree)  
 connective tissue disorder

### Context / Narrative:

### Other Data Reviewed:

EKG:  
 respiratory therapy:  
 old records: [ ] requested [ ] reviewed  
 [ ] summarized [ ] unavailable  
 additional Hx from family / caretaker / other

### Prior Similar Episodes:

workup:  
 diagnosis:  
 treatment:

## Review of System

**Constitutional:** fever  
 chills  
 malaise

**Respiratory:** cough  
 shortness of breath

**Skin:** pruritus  
 rash

**All / Imm:** hay fever  
 arthritis  
 HIV

**Eyes:** vision problem  
 discharge  
 eye pain

**GI:** abdominal pain  
 N / V / D

**Neurologic:** headache  
 numbness  
 weakness

**Heme / Lymph:** easy bruising  
 nodes  
 CA  
 blood thinners

**ENT:** ear pain  
 hearing loss  
 nasal / sinus  
 congest / disch  
 sore throat

**CV:** chest pain  
 CAD Hx  
 syncope

**MSK:** myalgias  
 pain:  
 DVT / PE Hx

**Psychiatric:** anxiety  
 depression

**Endocrine:** DM  
 thyroid disease

[ ] All systems reviewed & negative except as noted above.

**Medications:** [ ] see nursing note  
**Allergies:** [ ] see nursing note  
 [ ] NKDA

[ ] nursing note reviewed

**Past Medical History:** [ ] negative [ ] noncontributory

lung disease  
 COPD  
 asthma  
 last hospitalization  
 last steroids  
 ICU admissions  
 intubations

cardiac cath  
 date: \_\_\_\_\_

findings:  
 stent x \_\_\_\_\_

cardiac disease  
 AMI  
 CAD  
 angina  
 CHF - cardiomyopathy  
 SVT  
 AFib  
 PVCs  
 ventricular-dysrhythmias  
 valve disease

hypertension  
 CVA  
 IDDM / NIDDM  
 DVT / PE  
 PUD / GERD  
 CRF / ESRD

**Surgical History:** [ ] negative [ ] noncontributory

CABG  
 splenectomy

appendectomy  
 angioplasty  
 valve replacement

cholecystectomy  
 pacemaker

**Relevant Immunizations:** up to date [ ] yes [ ] no

**Family History:** [ ] unknown [ ] noncontributory

CAD  
 father  
 mother  
 sibling

hypertension  
 diabetes mellitus

CVA  
 cancer

### Social History:

tobacco \_\_\_\_\_ppd  
 \_\_\_\_\_yrs  
 quit \_\_\_\_\_yrs

alcohol  
 social  
 daily  
 binge \_\_\_\_\_

drugs  
 THC  
 cocaine  
 amphetamines

occupation:

L1-3: 1-3 elements; L4-5: 4+ elements

relevant problem L4: 2-9 systems; L5: 10+ systems

L1-3

of 3 areas

L1-4

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Positives  
Negatives

**Physical Exam:**

Nursing record reviewed  
 Vital signs reviewed  
**Vital Signs:**  
 BP: \_\_\_\_\_ / \_\_\_\_\_ L  
 BP: \_\_\_\_\_ / \_\_\_\_\_ R  
 HR: \_\_\_\_\_  
 RR: \_\_\_\_\_  
 Temp: \_\_\_\_\_ ° F / C  
 Pulse Ox: \_\_\_\_\_ % RA / \_\_\_\_\_ L O<sub>2</sub>

**General Appearance:**  
 alert  
 oriented  
 well-perfused  
**Distress:**  
 no acute  
 mild  
 moderate  
 severe

**Airway / Breathing Assessment:**  exam limited by urgency of condition  
 Airway: patent / obstructed  
 Gag Reflex: present / absent  
 Breathing: adequate / shallow / apneic  
 Effort: tiring / deteriorating

**Eyes:**  
 PERRL / EOMI anisocoria / gaze palsy  
 conjunctivae clear conjunctivae injected / discharge

**ENT:**  
 TMs nl TM red - R / L  
 no discharge discharge - clear / colored  
 pharynx nl pharynx red / exudate  
 moist mucosa dry mucosa  
 airway patent stridor  
 voice nl muffled voice

**Neck:**  
 nontender tender \_\_\_\_\_  
 supple meningismus

**Respiratory:**  
 no distress distress - mild / moderate / severe  
 lungs clear rales / rhonchi / wheezes / reduced - \_\_\_\_\_

**Cardiovascular:**  
 RRR irregular rhythm / tachycardia / bradycardia  
 no murmur murmur - grade \_\_\_\_\_ / 6 - systolic / diastolic  
 S1, S2 nl gallop - S3 / S4 / rub  
 no JVD JVD \_\_\_\_\_ cm  
 pulses nl pulse deficit \_\_\_\_\_

**Abdominal:**  
 soft guarded  
 nontender tender: epigastric - R / L - upper / lower / mid / diffuse  
 nondistended distended - mild / moderate / severe  
 bowel sounds nl abnormal bowel sounds - increased / decreased / absent  
 CVA nontender CVA tenderness - R / L  
 guaiac-negative guaiac-positive

**Lymph:**  
 neck nodes nl enlarged / tender nodes

**Musculoskeletal:**  
 head atraumatic trauma \_\_\_\_\_  
 chest nontender tender ribs \_\_\_\_\_  
 spine nontender tender T-spine / L-spine \_\_\_\_\_  
 extrs nontender tender extremity \_\_\_\_\_  
 no edema edema - 1 2 3 4 + R / L  
 nl capillary refill delayed capillary refill \_\_\_\_\_ seconds

**Skin:**  
 color nl pallor / cyanosis / jaundice  
 warm / dry cool / diaphoretic

**Neurologic:**  
 A&O x3 confused / agitated / obtunded  
 CN nl as tested CN palsy \_\_\_\_\_  
 motor nl motor deficit \_\_\_\_\_  
 sensory nl sensory deficit \_\_\_\_\_

**Psychiatric:**  
 affect nl depressed / anxious / delusional

**COMMENTS:**

**Medical Decision Making:**

**Differential Dx:**  
 asthma foreign body aspiration AMI  
 COPD exacerbation pneumothorax pneumonia  
 PE URI sepsis  
 CHF influenza pleural effusion(s)  
 cor pulmonale cardiac ischemia other:  
 pericardial effusion

Potential Diagnoses

**Laboratory Data:** Note results

**CBC:**  nl  nl except WBC Hct plts polys bands  
**Chem:**  nl  nl except Na K Cl CO<sub>2</sub> BUN Cr Glu

BNP INR D-dimer

**ABG:** pH \_\_\_\_\_ PO<sub>2</sub> \_\_\_\_\_ PCO<sub>2</sub> \_\_\_\_\_

**Cardiac Enzymes:**  
 time: \_\_\_\_\_ CK-MB \_\_\_\_\_ CK \_\_\_\_\_ troponin \_\_\_\_\_

**CXR:**  nl  interpreted by me  reviewed / discussed with Radiology  
 abnl \_\_\_\_\_

**CT** \_\_\_\_\_:  nl  reviewed / discussed with Radiology  
 abnl \_\_\_\_\_

**U/S** \_\_\_\_\_:  nl  reviewed / discussed with Radiology  
 abnl \_\_\_\_\_

**EKG:**  see EKG interpretation addendum

**Physic** **persived Infusion Therapy:** given over 60 / 90 / 120 / \_\_\_\_\_ min  
 indice dehydration / nausea / vomiting / pain \_\_\_\_\_  
 fluid \_\_\_\_\_ mL NS / LR \_\_\_\_\_ response: improved hydration  
 \_\_\_\_\_ response: improved nausea / vomiting  
 \_\_\_\_\_ improved pain

see procedure addendum # \_\_\_\_\_

**course / Additional Data:**  
 evaluated: time: \_\_\_\_\_  improved  unchanged

O<sub>2</sub> \_\_\_\_\_ L nasal cannula / NRB \_\_\_\_\_ L  
 albuterol / Atrovent x 1 2 3  
 prednisone \_\_\_\_\_ mg PO / Solu-Medrol \_\_\_\_\_ mg IVP  
 BiPAP / Lasix / nitrates

**Rx:**

**Faculty Note:** I interviewed and examined the patient. I discussed with PA/resident and agree with their evaluation and plan as documented here.

**Consultation:**  
 Discussed with Dr. \_\_\_\_\_ time: \_\_\_\_\_  
 Recommends: \_\_\_\_\_  
 Will see in:  ED  floor  ICU  cath lab  office in \_\_\_\_\_ days.

**Vital signs reviewed prior to disposition.**

**Disposition:**  
 discharge  admit floor / telemetry / ICU / cath lab  
 discharge instructions  
 transfer to: \_\_\_\_\_  
 via POV / ground EMS / helicopter  
 Counseled pt / fam regarding probable diagnosis and disposition plan.  
 Pt / fam agrees to t/u in ED for worsening symptoms/ fever / pain / shortness of breath / syncope.

Condition:  unchanged  improved  stable  serious  critical  
 see addendum  critical care time: \_\_\_\_\_

**Clinical Impression:**

\_\_\_\_\_  
 PA, Resident Signature MD/DO

\_\_\_\_\_  
 ED Physician Signature MD/DO

dictation  written addendum # \_\_\_\_\_  
 copy to PMD  
 template complete

L 2.3: 2-4 organ/areas; L4: 5-7 organ/areas; L5: 8+ organ/areas

L1: straightforward; L2-3: low/complex

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