
SAMPLE DOCUMENTATION TEMPLATES

UPHS – Department of Medicine
Subsequent Inpatient Visit Note

(2) MULTI-SYSTEM EXAM: (any 12 = Level 3; any 6 = Level 2; ² any 5 = Level 1) Elaborate Abnormal Findings

Constitutional:

n (Document 3) T: ____ P: ____ BP: ____ RR: ____ WT: ____

n See Vital Sign Flow Sheet

n APPEARANCE: _____

Eyes: n no scleral icterus

n PERRLA

Ears/Nose/Mouth/Throat: n nl teeth, lips, gums

~~nl~~ oropharynx

Neck: n nl appearance and palpation

Resident/Fellow Signatur