HOW IT WORKS

Use these tables to calculate your level of medical decision making. Your assessment of the problems addressed, the data reviewed and the level of risk will determine the overall level of complexity. Remember that two of three elements are required.

MEDICAL DECISION MAKING

	Problem points	Data points	Risk
Minimal complexity	1	1	Minimal
Low complexity	2	2	Low
Moderate complexity	3	3	Moderate
High complexity	4	4	High

Note: Two of three required.

PROBLEMS

	Points
Self-limited or minor (maximum of 2)	1
Established problem, stable or improving	1
Established problem, worsening	2
New problem, with no additional work-up planned (maximum of 1)	3
New problem, with additional work-up planned	4

DATA

	Points
Review or order clinical lab tests	1
Review or order radiology test (except cardiac catheterization or echo)	1
Review or order medicine test (PFTs, ECG, cardiac catheterization or echo)	1
Discuss test with performing physician	1
Independent review of image, tracing or specimen	2
Review and summation of old records	2

RISK	Presenting problem(s)	Diagnostic procedures	Management options
Minimal	• One self-limited or minor problem (e.g., cold, insect bite, tinea corporis).	• Laboratory tests; • Chest X-rays; • ECG/EEG; • Urinalysis; • Ultrasound/Echocardiogram; • KOH prep.	• Rest; • Gargles; • Elastic bandages; • Superficial dressings.
Low	• Two or more self-limited or minor problems; • One stable chronic illness (e.g., well controlled HTN, DM2, cataract); • Acute uncomplicated injury or illness (e.g., cystitis, allergic rhinitis, sprain).	• Physiologic tests not under stress (e.g., PFTs); • Non-cardiovascular imaging studies with contrast (e.g., barium enema); • Superficial needle biopsy; • ABG; • Skin biopsies.	• Over-the-counter drugs; • Minor surgery with no identified risk factors; • Physical therapy; • Occupational therapy; • IV fluids without additives.
Moderate	• One or more chronic illness with mild exacerbation, progression or side effects of treatment; • Two or more stable chronic illnesses; • Undiagnosed new problem with uncertain prognosis (e.g., lump in breast); • Acute illness with systemic symptoms (e.g., pyelonephritis, pleuritis, colitis); • Acute complicated injury (e.g., head injury with brief loss of consciousness).	• Physiologic tests under stress (e.g., cardiac stress test, fetal contraction stress test); • Diagnostic endoscopies with no identified risk factors; • Deep needle or incisional biopsies; • Cardiovascular imaging studies with contrast with no identified risk factors (e.g., arteriogram, cardiac catheterization); • Obtain fluid from body cavity (e.g., LP/thoracentesis).	• Minor surgery with identified risk factors; • Elective major surgery (open, percutaneous or endoscopic) with no identified risk factors; • Prescription drug management; • Therapeutic nuclear medicine; • IV fluids with additives; • Closed treatment of fracture or dislocation without manipulation.
High	• One or more chronic illness with severe exacerbation, progression or side effects of treatment; • Acute or chronic illness or injury, which poses a threat to life or bodily function (e.g., multiple trauma, acute MI, pulmonary embolism, severe respiratory distress, progressive severe rheumatoid arthritis, psychiatric illness with potential threat to self or others, peritonitis, ARF); • An abrupt change in neurological status (e.g., seizure, TIA, weakness, sensory loss).	• Cardiovascular imaging, with contrast, with identified risk factors; • Cardiac EP studies; • Diagnostic endoscopies with identified risk factors; • Discography.	• Elective major surgery (open, percutaneous or endoscopic) with identified risk factors; • Emergency major surgery (open, percutaneous or endoscopic); • Parenteral controlled substances; • Drug therapy requiring intensive monitoring for toxicity; • Decision not to resuscitate or to de-escalate care because of poor prognosis.