

Documenting Single-System Exams

If you perform single-system exams, you need to be familiar with these guidelines.

While family physicians are generally much more likely to perform multisystem exams than single-system exams, the 1997 version of Medicare's Documentation Guidelines for Evaluation and Management Services should also enable you to document any intensive single-system exams you do perform with greater confidence that you'll survive Medicare's scrutiny. (An article in the May/June 2010 issue of *FPM* described the requirements for general multisystem exams; see <http://www.aafp.org/fpm/2010/0500/p24>.)

The following 11 exams are defined in the revised guidelines:

- Cardiovascular,
- Ears, Nose, Mouth and Throat,
- Eyes,
- Genitourinary (Female),
- Genitourinary (Male),
- Hematologic/Lymphatic/Immunologic,
- Musculoskeletal,
- Neurological,
- Psychiatric,
- Respiratory,
- Skin.

The guidelines list the clinical elements for each organ system exam in separate charts. For the purpose of illustration, we've reproduced the chart for the cardiovascular system exam on the next page.

You'll notice an important difference between the format of the single-system exam chart, the significance of which has to do with the definition of a comprehensive single-system exam. For now, suffice it to say that organ systems and body areas that include elements essential to the exam are shaded. Organ systems and body areas that

include elements that are pertinent, but not essential, to the exam are not shaded. Organ systems or body areas that are not pertinent to the exam are listed without elements.

No substitutions may be made for the bulleted elements listed, and because the clinical elements are *minimum* standards for comprehensive exams of each system, physicians shouldn't feel the need to make substitutes, according to the guidelines.

Otherwise, the same rules that apply to the multisystem exam chart apply to the single-system exam chart:

- Parenthetical examples provide clarification and guidance within the chart;
- Any numeric requirements included in the description of the element (such as "Measurement of any three of the following seven ...") must be satisfied;
- Elements that have multiple components but that include no specific numeric requirement (such as "Examination of liver and spleen") require documentation of at least one of the components.

Single-system exam requirements

To qualify for a given level of single-system exam, the following standards must be met:

- **Problem focused:** performance and documentation of *one to five bulleted* elements;
- **Expanded problem focused:** performance and documentation of *at least six bulleted* elements;
- **Detailed:** performance and documentation of *at least 12 bulleted* elements (note this exception: eye and psychiatric examinations should include the performance and documentation of at least nine bulleted elements);

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CARDIOVASCULAR EXAMINATION

Constitutional

- Measurement of any three of the following seven vital signs: 1) sitting or standing blood pressure, 2) supine blood pressure, 3) pulse rate and regularity, 4) respiration, 5) temperature, 6) height, 7) weight (may be measured and recorded by ancillary staff)
- General appearance of patient (e.g., development, nutrition, body habitus, deformities, attention to grooming)

Eyes

- Inspection of conjunctivae and lids (e.g., xanthelasma)

Ears, Nose, Mouth and Throat

- Inspection of teeth, gums and palate
- Inspection of oral mucosa with notation of presence of pallor or cyanosis

Neck

- Examination of jugular veins (e.g., distention; a, v or cannon a waves)
- Examination of thyroid (e.g., enlargement, tenderness, mass)

Respiratory

- Assessment of respiratory effort (e.g., intercostal retractions, use of accessory muscles, diaphragmatic movement)
- Auscultation of lungs (e.g., breath sounds, adventitious sounds, rubs)

Cardiovascular

- Palpation of heart (e.g., location, size and forcefulness of the point of maximal impact; thrills; lifts; palpable S3 or S4)
- Auscultation of heart including sounds, abnormal sounds and murmurs
- Measurement of blood pressure in two or more extremities when indicated (e.g., aortic dissection, coarctation)

Examination of:

- Carotid arteries (e.g., waveform, pulse amplitude, bruits, apical-carotid delay)
- Abdominal aorta (e.g., size, bruits)
- Femoral arteries (e.g., pulse amplitude, bruits)
- Pedal pulses (e.g., pulse amplitude)
- Extremities for peripheral edema and/or varicosities

Gastrointestinal (Abdomen)

- Examination of abdomen with notation of presence of masses or tenderness
- Examination of liver and spleen
- Obtain stool sample for occult blood from patients who are being considered for thrombolytic or anticoagulant therapy

Musculoskeletal

- Examination of the back with notation of kyphosis or scoliosis
- Examination of gait with notation of ability to undergo exercise testing and/or participation in exercise programs
- Assessment of muscle strength and tone (e.g., flaccid, cog wheel, spastic) with notation of any atrophy and abnormal movements

Extremities

- Inspection and palpation of digits and nails (e.g., clubbing, cyanosis, inflammation, petechiae, ischemia, infections, Osler's nodes)

Skin

- Inspection and/or palpation of skin and subcutaneous tissue (e.g., stasis dermatitis, ulcers, scars, xanthomas)

Neurologic/Psychiatric

Brief assessment of mental status, including:

- Orientation to time, place and person;
- Mood and affect (e.g., depression, anxiety, agitation)

Note: This exam includes no elements in the following systems and body areas: Head and Face; Chest (Breasts); Genitourinary; Lymphatic.

• **Comprehensive:** performance of *all bulleted* elements and documentation of *every* element in each shaded box and *at least one* element in each unshaded box.

It's worth noting that although the clinical elements distinguish the general multisystem exam from the single-system exam, the performance and documentation requirements for the first three levels of exam (problem focused, expanded problem focused and detailed) are essentially the same. For example, in either case, you must perform and document at least six bulleted elements to qualify for an expanded problem focused exam.

Second, like the guidelines for the comprehensive general multisystem exam, the guidelines for comprehensive single-system exams distinguish between what you are expected to perform and what you are expected to docu-

ment. The shading of boxes in the single-system charts complicates matters somewhat. The guidelines indicate that, for a comprehensive single-system exam, you should perform *all bulleted* elements and document *every* element in *each* shaded box but you need only document *one* element in each unshaded box.

Despite the distinction, you and your patient will probably be better served if you document everything you do; that way, if you can't remember that the documentation requirements differ according to the shade of the box, it's not a stumbling block.

Practice

To see what all this means in context, let's apply the

guidelines to part of a sample note. The patient is a 55-year-old man with hypertension who presents with increasing shortness of breath and edema.

Compare the following note with the chart for the cardiovascular exam:

BP 126/86, P 82, WT 190. Pt. appears tired. HEENT: conjunctivae WNL w/o erythema; PERRLA, EOMs intact; TMs nl; oropharynx benign w/o pallor. NECK: supple w/o JVD, bruits or thyromegaly. RESP: lungs clr to percussion and auscultation w/o retractions or rubs. CV: hs WNL w/o gallop, murmur, rub or thrill; no bruits were noted of the aorta or femoral arteries. GI: abdomen soft, non-tender w/o organomegaly or masses; bowel sounds WNL; no guarding or rebound tenderness. MUSC: back w/o CVA tenderness, scoliosis or kyphosis. EXT: distal pulses intact w/o cyanosis or clubbing; 2+ pedal edema was noted. SKIN: WNL w/o stasis dermatitis or ulcers. NEURO: patient was oriented x 3; affect appeared normal.

The note documents every element in each shaded box and at least one element in each unshaded box. If all elements in the chart have been performed (and the medical necessity standard is met), the exam qualifies as *comprehensive*. Here's how the note and the bulleted elements in the chart match up:

- Constitutional: Measurement of any three of the following seven vital signs ... (“BP 126/86, P 82, WT 190”);
- Constitutional: General appearance of the patient (“Pt. appears tired”);
- Eyes: Inspection of conjunctivae and lids (“conjunctivae WNL w/o erythema”);
- Ears, Nose, Mouth and Throat: Inspection of oral mucosa with notation of presence of pallor or cyanosis (“oropharynx benign w/o pallor”);
- Neck: Examination of the jugular veins (“supple”);
- Neck: Examination of thyroid (“w/o ... thyromegaly”);
- Respiratory: Assessment of respiratory effort (“lungs clr to percussion and auscultation w/o retractions or rubs”);
- Respiratory: Auscultation of lungs (“lungs clr to ... auscultation”);
- Cardiovascular: Palpation of heart (“hs WNL”);
- Cardiovascular: Auscultation of heart including sounds, abnormal sounds and murmurs (CV: “hs ...w/o gallop, murmur, rub or thrill”);
- Cardiovascular: Examination of carotid arteries (NECK: “w/o JVD, bruits”);
- Cardiovascular: Examination of abdominal aorta (“no bruits were noted of the aorta”);
- Cardiovascular: Examination of femoral arteries (“no bruits were noted of the ... femoral arteries”);
- Cardiovascular: Examination of pedal pulses (“distal pulses intact”);
- Cardiovascular: Examination of extremities for

peripheral edema and/or varicosities (“2+ pedal edema was noted”);

- Gastrointestinal: Examination of abdomen with notation of presence of masses or tenderness (“abdomen soft, non-tender w/o ... masses; ... no guarding or rebound tenderness”);

- Gastrointestinal: Examination of liver and spleen (“abdomen ... w/o organomegaly”);

- Musculoskeletal: Examination of the back with notation of kyphosis or scoliosis (“back w/o CVA tenderness, scoliosis or kyphosis”);

- Extremities: Inspection and palpation of digits and nails (“w/o cyanosis or clubbing”);

- Skin: Inspection and/or palpation of skin and subcutaneous tissue (“WNL w/o stasis dermatitis or ulcers”);

- Neurologic/Psychiatric: Brief assessment of mental status, including orientation to time, place and person (“patient was oriented x 3”);

- Neurologic/Psychiatric: Brief assessment of mental status, including mood and affect (“affect appeared normal”).

The following two elements are necessary to perform and document only under certain circumstances. Neither was indicated for the patient in our sample exam:

- Gastrointestinal: Obtain stool sample for occult blood (necessary only if patient were “being considered for thrombolytic or anticoagulant therapy,” according to the guidelines);

- Cardiovascular: Measurement of blood pressure in two or more extremities (necessary only “when indicated,” according to the guidelines).

Comparing the exam requirements

Note that the comprehensive cardiovascular exam requires that 11 systems or body areas be examined and that 23 elements be documented. That's five elements and two organ systems or body areas *more* than the *comprehensive general multisystem exam*, which requires documentation of 18 elements, or two elements from each of nine organ systems or body areas.

In fact, the documentation in our sample note goes far beyond the documentation requirements for the *comprehensive general multisystem exam*. Like the single-system exam, the multisystem exam requires that all specified elements be performed. The elements differ, and the general multisystem exam includes one body area and two systems that are not represented in the cardiovascular exam: Chest (Breasts), Genitourinary and Lymphatic.

Whichever type of exam you perform and document, we suggest that you note it on the chart to avoid confusion should you be audited. 

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