

# AMBULATORY PATIENT CHECKLIST FOR MEDICAL ASSISTANTS

This checklist was designed to help medical assistants remember key steps in a patient's visit. The steps are color-coded to show which influence efficiency (blue), which influence reimbursement (green), and which influence patient safety (red).

## Check-in

- Pre-ordered and pre-protocol labs drawn/urine collected
- Evaluate for abnormalities
  - Labs for physicals and all procedures
- Vital signs
  - Height, weight, BP, HR, RR
  - Temp on all sick visits
  - Pulse ox for all respiratory, O2 users
  - Visual acuity for all eye visits, DOT physicals, and children's physicals
  - Critical vitals relayed to provider
- Assess for IV, O2, EKG, nebs, ambulance, procedure room
- Main reason for visit is HPI item
- Acute/follow up – chief complaint
  - Follow up plans from last visit are HPI items
  - "Do you have any other items you want to discuss with (provider) today?"
- Physicals – health checkup HPI
  - Medicare – all chronic illnesses listed
  - Acute complaints
  - Any other complaints
- Review of systems
- Patient paperwork asked for and filled out
- Allergies/medications filled out or confirmed
- No blanks in PMH, FH, SH (document tobacco)

- Assess for additional studies (ABI, EKG, x-ray, etc.)
- Flowsheets filled out
  - Back pain
  - CAD
  - Hyperlipidemia
  - Hypertension
  - Preventive care
  - Diabetes
  - Vital signs
- Patient education sheets identified and linked
- Recheck blood pressure if elevated (>129/84)
- Patient assessed for gown
- Expectation management
- Doctor notified

## Check-out

- Referrals and appointments made
- Prescriptions given and picked up at dispensary
- Recommendation sheet given to patient
- Patient asked if he/she understands the doctor's orders
- Patient survey offered
- Signed up for patient portal
- Follow up scheduled



**FPM Toolbox** To find more practice resources, visit <https://www.aafp.org/fpm/toolbox>.

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