



Physician Chart Review Tool

Reviewer Smith

Visit Date _____

Primary Physician: _____

PID _____

☒ Medical Record Appropriate

☐ Medical Record Not Appropriate

Deficient charts will be reviewed by the Patient Safety Committee and MEC/MSC

REVIEW / AUDIT	YES / NO N/A OR COMMENT
Door to Door Time: _____	yes
Patient's chief complaint documented including pain rating (as applicable)	yes
Nursing V/S reviewed, agreed and notes?	yes
Assessment and ROS complete?	yes
Family and Social Hx Complete?	yes
Were vital signs documented on medical record?	yes
Sufficient H&P/HPI examination documented for chief complaint?	yes
Lab, X-Ray, EKG, imaging (CT, ultrasound) ordered and results documented?	yes
All other order, cardiac or other monitoring, meds, IV, etc... documented?	yes
Was diagnosis/ clinical impression complete & documented on medical record?	yes
Was medical record documentation sufficient to support diagnosis?	yes
Treatment appropriate for diagnosis?	
Was response consultation with specialist obtained and documented?	
Consultation or Transfer documentation:	
• Time Called	
• Discussion recorded	
• If transferred, MOT completed and signed	
Appropriate disposition and patient condition on discharge documented?	yes
Appropriate follow-up given, patient education? Documented?	yes
Discharge instructions were given to patient to include specific indication for return to emergency center or see PCP or another specialist?	yes
OBS ONLY: Patient meets criteria IAW with protocol?	
• OBS ordered by physician?	
• Meds/ treatment / diet order?	
• Re-assessments/ re-evaluations documented?	
• Disposition is documented?	