Parent Chip: **Fever**

Duration

<3 days

3–7 days

> 7 days

Intermittent

Persistent

Recurrent

Pattern

Continuous

Intermittent

Remittent

Quotidian

Step-ladder

* Relapsing

---

Child Chips

Associated Symptoms

Rash

Cough

Headache

Joint pain

Burning micturition

Vomiting

Abdominal pain

Sore throat

Weight loss

Night sweats

Response to Antipyretics

Responds well

Temporary relief

No relief

---

Grandchild Chips

If Rash

Maculopapular

Petechial

Vesicular

Urticarial

If Cough

Dry

Productive

Hemoptysis

If Joint Pain

Monoarticular

Polyarticular

Migratory

If Burning Micturition

Associated with urgency

Flank pain

If Abdominal Pain

Localized

Diffuse

---

Examination Findings

Temperature (exact)

Pulse rate & pattern

Blood pressure

Respiratory rate

Oxygen saturation SpO2 if <94% red flag

Pallor

Icterus

Lymphadenopathy (location, size, tenderness)

Rash description & distribution

Oral ulcers / pharyngitis

Chest findings (crepitations, bronchial breathing)

Abdominal tenderness / organomegaly

Neurological signs (meningism, focal deficits)

Joint swelling / redness / restriction of movement

---

Red Flags 🚨 (to be included in examination findings)

(If clicked, should generate EMR alert for urgent evaluation)

Altered mental status / confusion

Neck stiffness

Petechiae / purpura

Hypotension (SBP <90 mmHg)

SpO₂ <94%

Persistent vomiting

Severe abdominal pain

Seizures

Signs of shock (cold extremities, weak pulse)

High-grade fever >40°C

Immunosuppressed state (HIV, chemotherapy, transplant)

---

Recommended Investigations

Basic

CBC with Differential

ESR, CRP

Peripheral smear for malaria (thick & thin)

Rapid Malaria Antigen Test

Urine Routine & Culture

Blood Cultures ×2 (before antibiotics)

Chest X-ray

Viral / Bacterial Panels

Dengue NS1, Dengue IgM

Chikungunya IgM & Chikungunya RNA PCR

Influenza A/B & H1N1 PCR

COVID-19 RT-PCR / RAT

Respiratory BioFire® multiplex PCR panel

EBV IgM, CMV IgM

HIV ELISA / Rapid test

Other Specific Tests

Widal / Typhidot / Salmonella PCR

Scrub Typhus IgM

Leptospira IgM / PCR

TB GeneXpert / Interferon Gamma Release Assay

Blood smear for Babesia / other parasites

Stool Routine & Culture (if GI symptoms)

Advanced Imaging & Workup

Ultrasound Abdomen

CT chest/abdomen/pelvis (if focal or unexplained fever)

MRI brain (if neurological symptoms)

PET-CT (for PUO)

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**Cough** — Symptom Chip Structure

Parent Chip

Cough

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1. Onset

Acute (<3 weeks)

Subacute (3–8 weeks)

Chronic (>8 weeks)

2. Duration

Number of days/weeks/months

3. Type

Dry

Productive

4. If Productive — Colour of Sputum

White

Yellow

Green

Brown

5. Quantity of Sputum

Scanty

Moderate

Copious

6. Hemoptysis

Yes →

Streaky

Frank blood

Clots

Approx. volume (ml)

Duration (days/weeks)

No

7. Timing

Daytime predominant

Nighttime predominant

Continuous

8. Associated Features/ Child Chips

Fever

Breathlessness

Wheezing

Chest pain

Weight loss

Voice change

Hempoptysis

---

Examination Findings

1. General Examination

Fever: Yes/No

Pallor: Yes/No

Cyanosis: Yes/No

Clubbing: Yes/No

Lymphadenopathy: Yes/No

2. Respiratory System

Trachea: Central / Shifted

Breath sounds: Normal / Decreased / Absent

Added sounds:

Crepitations (location)

Rhonchi (location)

Pleural rub

3. Other Systems (if indicated)

Cardiac examination

ENT examination (postnasal drip, sinus tenderness)

---

Investigations

CBC

ESR / CRP

Sputum Gram stain & culture

Sputum AFB stain & GeneXpert

Sputum fungal culture

Chest X-ray

HRCT Chest

Spirometry

COVID-19 RT-PCR / RAT

Influenza A/B, RSV PCR

Respiratory BioFire panel

Chikungunya RNA (if outbreak)

ANA (IFA)

ANCA

Serum IgE

Mantoux test / IGRA

Bronchoscopy (if indicated)

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1. **Weight Loss / Gain**

Parent Chip: Weight Change

Weight loss

Onset: sudden / gradual

Duration: \<specify in weeks/months/years>

Amount lost (kg)

Associated symptoms/ Child Chips

: fever / night sweats / cough / diarrhea / abdominal pain / loss of appetite / depression

Weight gain

Onset: sudden / gradual

Duration: \<specify>

Amount gained (kg)

Associated symptoms: swelling of feet / breathlessness / menstrual irregularity / mood changes

Examination Findings:

BMI

General appearance: cachexia / obese / overweight

Edema

Abdominal distension

Lymphadenopathy

Thyroid enlargement

Signs of Cushing’s (moon face, truncal obesity, striae)

Investigations:

CBC

ESR, CRP

FBS, PPBS, HbA1c

LFT, RFT

TSH, Free T4

Serum cortisol (AM & PM)

Lipid profile

HIV ELISA

Chest X-ray

Ultrasound abdomen

ANA (IFA)

Serum protein electrophoresis

Stool occult blood

Tumor markers (CEA, CA 19-9, PSA where indicated)

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2. **Fatigue / Malaise / Loss of Appetite**

Parent Chip: Fatigue / Malaise / Anorexia

Child Chips & Prompts:

Fatigue

Onset: sudden / gradual

Duration: \<specify>

Relation to activity: worse in morning / evening / all day

Malaise

Intermittent / continuous

Associated fever / joint pains / rashes

Loss of appetite

Partial / complete

Associated weight loss / nausea / early satiety

Examination Findings:

General: pallor / jaundice / cachexia

Pulse, BP

Lymphadenopathy

Hepatosplenomegaly

Thyroid enlargement

Signs of depression (flat affect, poor eye contact)

Investigations:

CBC

ESR, CRP

LFT, RFT

FBS, HbA1c

TSH, Free T4

Serum electrolytes

ANA (IFA)

HIV ELISA

Chest X-ray

ECG

Serum ferritin, B12, folate

Urinalysis

Ultrasound abdomen

Malaria, dengue, typhoid tests if indicated

---

3. **Edema – Localised / Generalised**

Parent Chip: Edema

Localised

Site: lower limb / upper limb / periorbital / scrotal / other

Unilateral / bilateral

Pitting / non-pitting

Painful / painless

Redness / warmth present?

Generalised

Duration: acute / subacute / chronic

Associated breathlessness / weight gain / fatigue

Examination Findings:

Pitting / non-pitting grade

Extent (ankle → sacrum)

JVP

BP, HR

Ascites

Signs of nephrotic syndrome / hypothyroidism / heart failure

Investigations:

CBC

ESR, CRP

LFT, RFT

Serum albumin, total protein

Urinalysis (proteinuria, microscopy)

24-hour urine protein

Lipid profile

TSH, Free T4

Chest X-ray

ECG, Echocardiography

Ultrasound abdomen

ANA (IFA)

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4. Generalized Weakness

Parent Chip: Generalized Weakness

Duration: acute / subacute / chronic

Onset: sudden / gradual

Diurnal variation: worse morning / evening / constant

Associated/ Child Chips : myalgia / cramps / breathlessness / paresthesia

Recent illness / medication use / heavy physical exertion

Examination Findings:

Muscle power (MRC grading)

Muscle bulk and tone

Reflexes

Sensory exam

Signs of myopathy / neuropathy

Gait assessment

Investigations:

CBC

ESR, CRP

FBS, HbA1c

LFT, RFT

Serum electrolytes (Na, K, Ca, Mg, Phosphate)

TSH, Free T4

Creatine kinase (CK)

Vitamin D, B12, folate

ECG

ANA (IFA)

EMG / NCS if indicated

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5. **Dizziness**

Parent Chip: Dizziness

Type: lightheadedness / spinning (vertigo) / imbalance

Onset: sudden / gradual

Duration of episodes

Trigger: head movement / standing up / exertion

Associated/ child chips: nausea / vomiting / tinnitus / hearing loss / headache / palpitations

Examination Findings:

Pulse, BP (supine & standing)

Nystagmus

Gait (Romberg, tandem walk)

ENT exam

Cardiovascular exam

Neurological exam

Investigations:

CBC

ESR, CRP

FBS, HbA1c

LFT, RFT

Serum electrolytes

ECG, Holter if needed

Audiometry

Vestibular function tests

MRI brain (if neurological signs)

ANA (IFA)

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6. **Syncope**

Parent Chip: Syncope

Child Chips & Prompts:

Onset: sudden / gradual prodrome

Duration of loss of consciousness

Triggers: exertion / emotional / postural change / urination / cough

Associated/ child chips: palpitations / chest pain / jerks / incontinence

Recovery: spontaneous / prolonged confusion

Examination Findings:

BP (supine & standing)

Pulse rate & rhythm

Cardiac auscultation

Neurological exam

Carotid bruits

Investigations:

CBC

FBS, HbA1c

ECG, Holter

Echocardiography

Tilt table test

EEG (if seizure suspected)

Serum electrolytes

LFT, RFT

ANA (IFA)

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7. **Pallor**

Parent Chip: Pallor

Child Chips & Prompts:

Onset: sudden / gradual

Duration: \<specify>

Associated symptoms/ child chips: fatigue / dyspnea / palpitations / bleeding / weight loss

Examination Findings:

Sites: conjunctiva, tongue, palms, nail beds

Pulse, BP

Lymphadenopathy

Splenomegaly / hepatomegaly

Signs of nutritional deficiency (glossitis, koilonychia)

Investigations:

CBC with peripheral smear

ESR, CRP

Reticulocyte count

Iron studies (serum iron, ferritin, TIBC)

Vitamin B12, folate

LFT, RFT

Stool occult blood

ANA (IFA)

Bone marrow study (if indicated)

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8. **Jaundice**

Parent Chip: Jaundice

Child Chips & Prompts:

Onset: sudden / gradual

Duration: \<specify>

Associated/ child chips: fever / abdominal pain / pruritus / pale stools / dark urine / weight loss

Examination Findings:

Scleral icterus

Hepatomegaly / splenomegaly

Ascites

Spider angiomas, palmar erythema

Scratch marks

Lymphadenopathy

Investigations:

CBC

ESR, CRP

LFT (total, direct, indirect bilirubin; AST, ALT, ALP, GGT)

PT/INR

Viral hepatitis markers (HAV IgM, HBsAg, anti-HCV)

Ultrasound abdomen

ANA (IFA)

Anti-mitochondrial antibody (AMA)

MRCP / ERCP if indicated

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Symptom: **Diarrhea**

Parent chip: Diarrhea

1. Onset

  • Acute (≤14 days)

  • Chronic (>14 days)

  • Recurrent/Intermittent

2. Duration

  • Number of days/weeks

3. Frequency

  • Number of stools/day

4. Stool characteristics

  • Watery

  • Loose, non-watery

  • Greasy/foul smelling (suggestive of steatorrhea)

  • With mucus

  • With blood (dysentery)

  • Colour – brown / yellow / pale / black tarry

  • Undigested food particles

5. Associated features/ child chips

  • Fever

  • Abdominal pain/cramps

  • Tenesmus

  • Vomiting

  • Weight loss

  • Bloating

  • Night-time symptoms

6. Hydration status

  • Signs of dehydration – dry mouth, reduced urine, hypotension, tachycardia

7. Triggers/recent events

  • Recent travel

  • Outside food/water intake

  • Antibiotic use

  • Other medications (e.g., laxatives, chemotherapy)

  • Contact with sick persons

8. Past history

  • Similar episodes in past

  • Chronic GI disease (IBD, IBS, celiac)

---

Symptom: **Constipation**

Parent chip: Constipation

1. Onset

  • Acute (<3 months)

  • Chronic (≥3 months)

  • Recurrent

2. Duration

  • Number of days/weeks/months

3. Stool frequency

  • <3 bowel movements/week

  • Intermittent

  • Continuous

4. Stool characteristics

  • Hard, pellet-like

  • Large, hard mass

  • Straining required

  • Incomplete evacuation

  • Small calibre stool

5. Associated features/ child chips

  • Abdominal pain/cramps

  • Bloating

  • Tenesmus

  • Blood on stool/wiping (fresh red)

  • Weight loss

  • Nausea/vomiting

6. Triggers/recent events

  • Change in diet (low fiber)

  • Low water intake

  • Reduced physical activity

  • Recent travel/immobility

  • Medications (opioids, iron, calcium, anticholinergics)

7. Past history

  • Similar episodes in past

  • Chronic GI disease (IBS, hypothyroidism)

8. Alarm features (need urgent evaluation) Red flags

  • Unexplained weight loss

  • Blood in stool (occult or visible)

  • Anemia

  • Family history of colorectal cancer

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1. **Palpitations**

Parent chip: Palpitations

Child chips:

Onset: Sudden / Gradual

Duration: Seconds / Minutes / Hours / Continuous

Frequency: Once / Intermittent / Frequent / Continuous

Rhythm awareness: Regular / Irregular

Associated symptoms/ child chips: Chest pain, Dyspnoea, Syncope, Sweating, Dizziness

Triggers: Exertion, Stress, Caffeine, Alcohol, Drugs, Fever, Thyroid symptoms

Past episodes: Yes / No

Relevant history: Cardiac disease, Thyroid disease, Anemia, Stimulant use

Examination findings:

Pulse: Rate, Rhythm, Volume, Regularity

BP: Supine & Standing

Signs of heart failure

Signs of thyrotoxicosis

Pallor, Cyanosis, Clubbing, Edema

Investigations:

CBC, ESR, CRP

FBS, HbA1c

TSH, FT4

ECG, Holter monitoring

Echocardiography

Electrolytes (Na, K, Ca, Mg)

Troponin I/T

ANA (IFA)

D-dimer (if PE suspected)

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2. **Nausea / Vomiting**

Parent chip: Nausea / Vomiting

Child chips:

Onset: Acute / Subacute / Chronic

Duration: Hours / Days / Weeks

Frequency: Single / Multiple / Persistent

Contents: Undigested food / Bile / Blood / Feculent

Associated symptoms/ child chips: Abdominal pain, Diarrhea, Fever, Headache, Vertigo

Triggers: Food, Motion, Smell, Medication, Morning occurrence

Relief with: Fasting, Antiemetics, Vomiting itself

Relevant history: Recent travel, Head injury, Pregnancy, Drugs

Examination findings:

Hydration status

Abdominal tenderness / distension

Bowel sounds

Neurological exam (signs of raised ICP)

Signs of liver disease

Investigations:

CBC, ESR, CRP

FBS, Electrolytes (Na, K, Ca)

LFT, RFT

Serum amylase, lipase

Urine pregnancy test

Abdominal USG / CT

Upper GI endoscopy (if chronic)

ANA (IFA)

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3. **Dyspepsia**

Parent chip: Dyspepsia

Child chips:

Onset: Sudden / Gradual

Duration: Weeks / Months / Years

Pattern: Epigastric pain, Burning, Fullness, Early satiety

Relation to food: Worse after meals / Worse on empty stomach

Associated symptoms/ child chips: Nausea, Vomiting, Weight loss, Melena

Aggravating factors: Spicy food, Alcohol, NSAIDs, Stress

Relieving factors: Antacids, PPIs, Food

Alarm features: Dysphagia, Weight loss, Hematemesis

Examination findings:

Epigastric tenderness

Pallor, Jaundice

Lymphadenopathy

Signs of chronic liver disease

Investigations:

CBC, ESR, CRP

LFT

FBS, HbA1c

Upper GI endoscopy

H. pylori testing

Abdominal USG

ANA (IFA)

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4. **Dysphagia**

Parent chip: Dysphagia

Child chips:

Onset: Sudden / Gradual

Duration: Weeks / Months

Type: Solids only / Solids & liquids / Liquids only

Progression: Static / Progressive

Associated symptoms/ child chips: Regurgitation, Weight loss, Aspiration, Cough

Site felt: Throat / Mid-chest / Lower chest

History of heartburn: Yes / No

Pain on swallowing: Yes / No

Examination findings:

Nutritional status

Neck mass / lymph nodes

Oral cavity / oropharyngeal lesions

Neurological exam (CN IX, X, XII)

Investigations:

CBC, ESR, CRP

Barium swallow

Upper GI endoscopy

Manometry

CECT neck & chest

ANA (IFA)

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5. **Polydipsia**

Parent chip: Polydipsia

Child chips:

Onset: Acute / Gradual

Duration: Days / Weeks / Months

Quantity: Approx litres/day

Associated symptoms/ chid chips: Polyuria, Weight loss, Fatigue, Nocturia

History of diabetes: Yes / No

Medication history: Steroids, Diuretics

Examination findings:

Signs of dehydration

BMI

Evidence of endocrine disorder

Investigations:

FBS, HbA1c

Serum electrolytes (Na, K, Ca)

Serum osmolality

Urine osmolality

Water deprivation test (if needed)

ANA (IFA)

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6. Polyphagia

Parent chip: Polyphagia

Child chips:

Onset: Acute / Gradual

Duration: Days / Weeks / Months

Relation to meals: Constant / Episodic / Night eating

Associated symptoms/ child chips: Weight gain / Weight loss, Polydipsia, Polyuria

History of diabetes: Yes / No

Examination findings:

BMI

Signs of endocrine disease

Thyroid status

Investigations:

FBS, HbA1c

TSH, FT4

Lipid profile

ANA (IFA)

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7. **Nocturia**

Parent chip: Nocturia

Child chips:

Onset: Acute / Gradual

Duration: Days / Weeks / Months

Frequency: Times/night

Associated symptoms/ child chips : Polyuria, Dysuria, Urgency, Incontinence

Relevant history: Diabetes, Prostate disease, Heart failure

Examination findings:

Abdominal exam (bladder)

Prostate exam (if male)

Cardiac exam (heart failure signs)

Investigations:

FBS, HbA1c

Urine routine & culture

Renal function tests

USG KUB & Prostate

ANA (IFA)

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8. **Swelling in Neck / Lumps**

Parent chip: Swelling in Neck / Lumps

Onset: Sudden / Gradual

Duration: Days / Weeks / Months

Progression: Increasing / Static / Regressing

Pain: Present / Absent

Associated symptoms/ child chips: Fever, Weight loss, Dysphagia, Hoarseness

Location: Midline / Lateral / Diffuse

Examination findings:

Size, shape, consistency, mobility

Local temperature

Lymphadenopathy

Thyroid status

Investigations:

CBC, ESR, CRP

FNAC

USG neck

Thyroid function tests

CECT neck (if needed)

ANA (IFA)

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9. **Excessive Sweating / Night Sweats**

Parent chip: Excessive Sweating / Night Sweats

Child chips:

Onset: Acute / Gradual

Duration: Days / Weeks / Months

Pattern: Generalised / Localised

Timing: Daytime / Nocturnal / Both

Associated symptoms/ child chips: Fever, Weight loss, Palpitations, Anxiety

Triggers: Heat, Exercise, Emotional stress

Relevant history: Tuberculosis, Lymphoma, Thyroid disease

Examination findings:

Temperature

Lymphadenopathy

Signs of thyrotoxicosis

BMI

Investigations:

CBC, ESR, CRP

FBS, HbA1c

TSH, FT4

Chest X-ray

Blood culture

ANA (IFA)

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