

Medical Records For : Scanlon, Graham
Date of Birth : 05/22/1999
Date of Service : 03/01/2024
Electronically signed by : No Doctor Assigned 03/01/2024
Tabs Filled Out : ARRA [pages:4]

☐ Ignore this record for Meaningful Use

Field Color GuideMU3CQMsMultiple Reporting Agencies

Notes

Status - Allergy Agent - Reaction - Severity
- Empty List - -

☐ No known drug allergies

Prescribed Date - Medication Name - Status - Form
05/30/2024 - Ritalin - Active -

Is Primary Care Provider?

☐ Transitioned In ☐ Referred In
☐ Patient Transferred In/Referred To This Provider
☐ Medication Reconciliation performed
☐ Summary of care provided for transfer
☐ Received Consultant Rpt
☐ Asked for electronic copy
☐ Received electronic copy
☐ E-Prescribed medication
☐ Patient has received clinical summary of this visit
☐ Patient was provided education resource
(By checking this box, you agree that Crystal was used to determine proper resource)

☐ No current medications

Medications DocumentedReason Current Medications Not Documented

Reason Current Medications Not Documented (AOA)

Pharmacy

RaceEthnicityPreferred LanguageSexual Orientation

Race (More Granular)Ethnicity (More Granular)Gender Identity

HeightWeightBlood PressureBody TemperatureBMIBMI PercentileBMI Followup?Counseling Physical Activity
ftinlbs/

Reason Diastolic Blood Pressure Not TakenHypertension?Reason BMI Not DoneCounseling Nutrition

Reason Systolic Blood Pressure Not TakenHbA1c Lab Test ResultRecvd Flu Immun.

Heart RateRespiratory RatePulse Oximetry

Smoking StatusDiscussed Cessation

Tobacco UseTobacco Non-User

Tobacco Use ScreeningReason Tobacco Use Screening Not Done

Tobacco Use Cessation CounselingReason Tobacco Use Cessation Counseling Not Done

Cup to Disc ratio ODCup to Disc ratio OSReason Cup to Disc Ratio Not Done
H V H V

Optic Nerve EvaluationOptic disc or retinal nerve abnormalities:
OD OSReason Optic Disc Exam for Struct. Abnorm. Not Done

Optic Disc Exam for Structural Abnormalities - Result - Right Eye

Optic Disc Exam for Structural Abnormalities - Result - Left Eye

Dilated Macular/Fundus ExamMacular EdemaReason Macular Exam Not Done

Macular Edema Findings Present Type

Macular Edema Findings Present Type Communicated

Reason Not Communicated - Macular Edema

Macular Edema Findings Absent Type

Macular Edema Findings Absent Type Communicated

Reason Not Communicated - Macular Edema

Communicated to Diabetes Care Provider: Retinopathy Severity Level Level of Severity of Retinopathy Type Communicated

Exam Findings Severity of Retinopathy

Retinal or Dilated Exam Negative Finding Reason Not Communicated - Level of Severity of Retinopathy

Retinal/Dilated Eye Exam Retinal or Dilated Eye Exam Type (AOA)

Retinal or Dilated Eye Exam Type

Fall Screening

____ Depression Screening

Depression Screening Result

Reason Depression Screening not taken

Diagnosis Code

Description

Bill ID

CPT

Description

Billing Modifiers

Description

Date - Type - Primary - Status - Code - Problem - Code System - Nullflavor - Value Set - Start Date - End Date - Notes

MU Measures Outside Of Crystal PM

Medication Orders

Lab Orders

Radiology Orders

Imaging Orders (non-Radiology)

Linked Images

Relationship - Disease or Condition

Empty List -

____ Unknown family history

PQRS Billing Grid

Chief Complaint (SNOMED)

Bill ID - CPT - Bill Description - Modifier Code - Modifier Description

Code: Description: System:

Participants

Informant - Title - First - Middle - Last - Relation - Area Code - Phone - Address1 - Address2 - City - State - Zip - Country

Care Team

Employee - Data Enterer - Participation Function - Taxonomy - Title - First - Middle - Last

Procedures

Date - Code - Description - Code System - Nullflavor - TS Code - TS Description - TS Code System - Start Date - End Date - Reason Done - Reason Not Done - Discharge Disposition - Perform

Vital Signs

Code - Value - Unit - Start Date - End Date

Smoking Status

Date - Code - Code (AOA) - Obs. Start Date - Obs. End Date - Start Date - End Date

Implantable Devices

___ Show Inactive

Date - Status - Start Date - End Date - Description-GMDN - Brand Name - Version or Model Number - Company Name - Device Identifier - UDI - Lot-Batch - Serial Number - Contains NRL

Type - Plan

Interventions

Date - Code - Nullflavor - Category - Reason Done - Reason Not Done - Start Date - End Date - Performed Start Date - Performed End Date

Diagnostic Study Grid

Date - Code - Description - Code System - Value Set - Nullflavor - Reason Not Done - Order Date - Performed Start Date - Performed End Date

Addendum: