

## ED Quick Reference Guide

The following are important details to include in your documentation.

### Asthma

#### Severity

- Mild intermittent (symptoms  $\leq$  2 days a week)
- Mild persistent (symptoms  $>$  2 days a week)
- Moderate persistent (symptoms daily)
- Severe persistent (symptoms throughout the day)

#### Type

- Childhood
- Exercise induced bronchospasm
- Extrinsic allergic
- Idiopathic
- Late-onset

#### Associated conditions

- Pneumonia
- Acute bronchitis
- Bronchiolitis
- COPD
- Chronic obstructive bronchitis
- Acute exacerbation
- Status asthmaticus

### Bronchitis

**Acuity:** Acute, chronic, or acute on chronic

**Type:** Asthmatic, viral, chemical, allergic, etc.

**Document organism if known**

**Document any associated conditions:**

Bronchiectasis, COPD, etc.

### Pharyngitis

**Acuity:** Acute or chronic

**Document etiology if known**

**Document organism if known**

### Sinusitis

**Acuity:** Acute or chronic

**Site:** Frontal, pansinusitis, maxillary, etc.

### Otitis Media

**Acuity:** Acute, chronic, or recurrent

**Type:** Purulent, serous, suppurative, allergic

**Document if with effusion**

**Document with or without rupture of ear drum**

**Laterality:** Specify left, right, or bilateral

### Vertigo

**Type:** Aural, peripheral, benign paroxysmal, of central origin, etc.

**Laterality:** Specify left, right, or bilateral

### Anemia

**Type:** Nutritional, hemolytic, aplastic, blood loss, drug induced, etc.

**Due to:** Chemo, radiation, drug-induced

**Always document any associated conditions**

### OB/Pregnancy

**Specify trimester**

- First ( $<$ 14 weeks, 0 days)
- Second (14 weeks, 0 days to less than 28 weeks, 0 days)
- Third (28 weeks until delivery)

**Document any conditions complicating pregnancy**

### Substance Abuse

**Document substance:** Alcohol, opiates, cocaine, etc.

**Document frequency:** Use, abuse, dependence, or in remission

**Document any related conditions:** Delusions, hallucinations, delirium, withdrawal, etc.

**Describe mode of nicotine use:** Cigarettes, chewing tobacco, pipe, and/or gum

**Document the blood alcohol level when available**

### Abdominal Pain

**Always document specific site of pain:** RUQ, RLQ, LUQ, LLQ, generalized, periumbilic, epigastric, pelvic,

**Laterality:** Specify left, right, or bilateral

**Document if present:** Acute abdomen or rebound tenderness

## ED Quick Reference Guide

### Indwelling Devices

Always document the following devices if present:

- Foley catheter
- PICC line / Hickman catheter
- Intraocular lens implants
- Pacemakers / ICD's
- Pumps (pain / insulin)
- Neurostimulators
- Orthopedic joint prostheses
- Ostomies (gastrostomy, jejunostomy, colostomy, ileostomy, tracheostomy, urostomy)

### Sprains

**Document specific ligament:** Calcaneofibular, deltoid, tibiofibular, etc.

**Laterality:** Specify left, right, or bilateral

**Timing/Episode of care:** Documentation should be clear enough to define the episode of care as:

- **Initial:** Active phase of treatment
- **Subsequent:** After care (document original injury and reason for visit (e.g. cast change))
- **Sequela:** Late effect (document original injury dx and specific sequela dx)

### Strains

**Document specific tendon or muscle:** Achilles, patellar, extensor muscle

**Laterality:** Specify left, right, or bilateral

**Timing/Episode of care:** Documentation should be clear enough to define the episode of care as:

- **Initial:** Active phase of treatment
- **Subsequent:** After care (document original injury and reason for visit (e.g. cast change))
- **Sequela:** Late effect (document original injury dx and specific sequela dx)

### Contusions

**Document specific site:** Face, thigh, forearm

**Laterality:** Specify left, right, or bilateral

**Timing/Episode of care:** Documentation should be clear enough to define the episode of care as:

- **Initial:** Active phase of treatment
- **Subsequent:** After care (document original injury and reason for visit (e.g. cast change))
- **Sequela:** Late effect (document original injury dx and specific sequela dx)

### Fractures

See Orthopedics Reference Card

### Circumstances of Injury

**Specify circumstances:** Accidental, intentional self-harm, assault, or undetermined cause

**Document "how" an injury occurred:** Fall, motor vehicle accident, house fire, etc.

**Document "where" an injury occurred:** Home, work, school, etc.

**Document "activity":** Skiing, ironing, gardening, etc.

**Document "status":** Civilian, military, volunteer, other (specify)

### Head Injury

**Document if injury includes skull fracture**

- Location, laterality, displaced or non-displaced

**Document if injury includes intracranial Injury**

- Portion of the brain involved, specific artery/vessel
- Presence of cerebral edema

**With or without loss of consciousness**

- Length of time of any loss of consciousness; 30 min or less, 31-59 mins, 1 hr – 5:59 mins, 6 to 24 hrs, or greater than 24 hrs

### Coma

**Document if present:** Somnolence, drowsiness, stupor, catatonic stupor, coma, and any associated skull fracture or intracranial injury if present

**Document the Glasgow (coma scale) score**

- Reported as a total score 1-15
- Higher score = higher function
- Also document score from each assessment area
- Eye opening
- Verbal response
- Motor response

### Burns

- **Type:** Corrosion, thermal
- **Specify body part(s) involved**
- **Laterality:** Specify left, right, or bilateral
- **Degree:** First, second, third
- **Document total body surface area (TBSA) burned (percentage)**
- **Specify the percentage of third degree burns**