**BAPTIST HEALTH {Visit Location:41128} MULTIDISCIPLINARY CLINIC**

**SURVIVORSHIP VISIT: {location header:41122}**

**{Survivorship Visit Type:41113} {Initial Visit/Follow-Up Visit:41112}**

@NAME@ is a pleasant @AGE@ @SEX@ being followed by \*\*\* MD for \*\*\*. Reviewed today {Survivorship Location:41119}, for {initial/follow-up:41120} {Survivorship Visit Type:41121} visit.

**HPI**

\*\*\*

{Survivorship HPI Options:41123} ***Here I may add pertinent tobacco use history or patient self-reported measures collected for older adult assessments.***

**TREATMENT HISTORY:**

@ONCHIST@ ***Pulls in oncologic history***

@MEDICALHX@

@SURGICALHX@

@SOCHX@

**Psychiatric History:**

Previous psychotropic medications include: \*\*\*\*. Current psychotropic medications include: \*\*\* prescribed by \*\*\*. They {do/do not:21268} not have a mental health provider currently.

@LASTLAB(LDH,URICACID)@

@RESUFAST(GLUCOSE,BUN,CREATININE,EGFRIFNONA,EGFRIFAFRI,BCR,SODIUM,K,CHLORIDE,CO2,CALCIUM,PROTENTOTREF,ALBUMIN,GLOBULIN,LABIL2,BILIRUBIN,ALK PHOS,AST,ALT)@

@CBCWDIFF@

@ALGENC@

**MEDICATIONS:**

{survivorship med review:41124} ***Typically a statement that I have reviewed the medications and if pertinent, treating physician notes***

**@REVIEWOFSYSTEMSBYAGE@**

@VS@

@LASTWT(3)@

@PAINSCORE@

PHQ-9 Total Score: @FLOWABB(774376::1)@

GAD7 Total Score: \*\*\*

Distress Score: \*\*\*

Fatigue Severity Scale: \*\*\*

@**PHYSICALEXAM@**

@ACPBEGIN@

Patient {DOES/ DOES NOT:29568} have advance care planning complete, {LivingWill:41194}

Patient {has/has not Iqbal:31003} designated a healthcare surrogate: \*\*\*

Brief discussion and written information provided regarding advance care planning and appropriateness for all healthy adults, choosing a healthcare surrogate, prior experiences with loved ones who have been seriously ill, and exploration of goals of care in the event of a sudden injury or illness.

Information provided on upcoming Advance Care Planning classes offered virtually each month through the Cancer Resource Center. Advised arrangements can be made to schedule an appointment with myself or another advance care planning facilitator at their convenience.

@ACPEND@

**DISCUSSION HELD TODAY:**

*{discussion:41116}* ***If this is a treatment summary visit I include this standard statement:***

“Discussed NCCN recommendations for all cancer survivors of 150 minutes/week moderate intensity exercise, achieve and maintain a healthy weight, plants-based whole-foods diet, avoid tobacco and second hand smoke, avoid alcohol or minimize alcohol intake - no more than 1 drink in a day for adults.

After review of the Survivorship Treatment Summary & Care Plan, the patient verbalized understanding of recommendations for follow-up. As outlined in the care plan, they were advised to continue with follow-up care in accordance with the NCCN surveillance guidelines while transitioning back to their primary care physician for continued general preventive and healthcare needs. We discussed the importance of healthy eating, exercise and weight management. We reviewed current guidelines for routine screening of other cancers.

A copy of the Survivorship Treatment Summary & Care Plan for @M@ @LNAME@ was provided to and forwarded to the providers identified on the care team.”

***Problems identified:***

1. \*\*\*

***Plan and recommendations:***

1. \*\*\*
2. Call my office as needed at 502-928-8792 for additional information, resources or support.

@VISITDX@ ***Pertinent visit diagnosis code(s) populate here***

@ORDERSENC@ ***Orders associated with visit are populated here***

I spent \*\*\* minutes caring for this patient on this date of service by {face2face vs tele:41117}. This time includes time spent by me in the following activities: {TIMEACTIVITIES:40334}

***I use time based billing codes 99215, 99214 etc***

I spent \*\*\* minutes on the separately reported service of \*\*\*. This time is not included in the time used to support the E/M service also reported today. ***This separate statement is needed for “Add-on” services such as tobacco treatment, or advance care planning codes and they must be described separately.***