



Pregnancy Early Access Center

## PEACE EMR Notes Template Example

**DESCRIPTION:** Included below is an example template provider note to document the use of medication management of early pregnancy loss. Formatting for this note is in the Epic Electronic Medical Record syntax.

PEACE SAB MEDICAL MANAGEMENT CONSULT

Smart Text

PEACE SAB MEDICAL MANAGEMENT CONSULT Progress Notes/Telephone Documentation

Chief Complaint: {SAB COMPLAINTS :106453}.

@NAME@ is a @AGE@ @GP@ presenting today for consult for {SAB COMPLAINTS :106453}.

LMP@LMP@

Pt reports \*\*\*

Prior US this pregnancy: {Yes/No:100433}

\*\*\*

HC G trend: \*\*\* @LASTLAB{hcg:6m}@

This pregnancy was desired: {Yes/No:100433}

Pregnancy is result of consensual sex: {Yes/No:100433}

The patient has the support of\*\*\*.

Patient was referred by \*\*\*.

HISTORY

OB History:

@OB@

Active Medical Problems:

@PROB@

GYN HISTORY:

STI hx: \*\*\*

Desires STI testing: {yes/ no:107576}

PrEP counseling provided? {yes/ no:107576}

Gardasil: {yes/ no:107576}

Pap hx: \*\*\*

Hx of LEEP/CKC/C RYO: {yes/ no:107576}

Last pap: \*\*\*

Pap screening recommended: {yes/ no:107576}

Dysmenorrhea: {yes/ no:107576} Heavy menses: {yes/ no:107576} Fibroids: {yes/ no:107576}

@PMH@

@PSH@

@FAMHX@

@SOC@

Current outpatient prescriptions:

@CMEDLIST@

The patient has the following allergies: @ALG@

REVIEW OF SYSTEMS:

Skin: {ROS -SKIN w/ nl default:103470}

Eyes: {ROS -EYES:103471}

Ears/Nose/Throat: {ROS -ENT:103472}

Respiratory: {ROS -RESP:103473}

Cardiovascular: {ROS -CV:103474}

Gastrointestinal: {ABDHG ROS -GI:103475}

Genitourinary: {ROS -GU:103476}

Musculoskeletal: {MUSHG ROS -MUSCULOSKELETAL:103477}

Neurologic:{NEUHG ROS -NEURO:103478}

Psychiatric: {PSYHG ROS -PSYCH:103479}

Hematologic/Lymphatic/Immunologic: {ROS -HEME:103480}

Endocrine: {ENDHG ROS -ENDO:103481}

PHYSICAL EXAM:

Vitals: @VS@

GENERAL APPEARANCE: {APPEARANCE:5031}

NECK: {NECK {GYN ONC}:101700::"supple","normal range of motion","no

thyromegaly", "no tracheal deviation"]}

CV: {edema:103512}

RESP: {Respiratory Effort:315542}

ABDOMINAL: {TENDER/NON-TENDER:751479}

SKIN: {pe skin brief ob:314459::"normal coloration and turgor, no rashes"}

EXTREMITIES: {extremities:802:a:"normal. No deformities, edema, or skin discoloration"}

NEURO/PSYCHIATRIC: {pe neurologic exam ob:312789::"alert, oriented, normal speech, no focal findings or movement disorder noted"}

Pelvic: conducted with chaperone \*\*\*

External Genitalia: {RWH EXTERNAL GENITALIA:100320}

Vagina: {RWH VAGINA:100321}

Cervix: {RWH CERVIX:100324}

Uterus: {RWH UTERUS:100325}

Adnexa: {RWH ADNEXA:100326}

Anus and Perineum: {RWH ANUS AND PERINEUM:100327}

{FP/PL ULTRASOUND:104193} performed in transverse and longitudinal views {FP/PL US:502252} by @ME@, also interpreted by @ME@; shows {FP/PL

CLINICAL ASSESSMENT:502304), \*\*\*SIUP, at\*\*\* weeks and\*\*\* days by\*\*\*,

measuring \*\*\*, \*\*\*VS, \*\*\*FCA. Placental location is {PLACENTA

LOCATION:106443).

ASSESSMENT /PLAN:

@AGE@ @GP@ at\*\*\* wks with early pregnancy failure.

@ABO@, \*\*\* Rhogam indicated

--After counseling on miscarriage management options she opts for a

medication. This was discussed in detail including risks of bleeding and need for transfusion, infection, pain, risk of needing aspiration and other detrimental effects that are not foreseeable.

--Hb: \*\*\*, safe to proceed with meds

\*\*\*--CBC, T & S ordered. RN will f/u results and notify patient. Patient will await result of CBC to ensure it is safe to proceed.

\*\*\*--Performed contraceptive counseling based on the patient's priorities and preferences using a shared decision-making approach. Discussed all requested contraceptive options in detail. Pt opts for\*\*\*.

--Mifepristone 200 mg dispensed today. Mifepristone consent signed\*\*\*.

--Prescription for misoprostol 800 mcg vaginally. Pt provided with one additional dose and instructed to repeat in 24 hours if no significant bleeding

--Prescriptions for Zofran, Tylenol and Motrin sent to pharmacy. --RN to review and provide written instructions and precautions.

\*\*\*--Pt requests in person follow-up for US in 1-2 weeks.

\*\*\*--Follow-up in 1 week by telehealth, high sensitivity pregnancy test to be taken in 4 weeks. Instructions provided.

--\*\*\*STI testing ordered today

--\*\*\*Pap sent today

@ME@

@TD@ @NOW@

@MDMORTIMEDOC@