1. PATIENT INFORMATION

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<tr>
<th>a. Date of visit</th>
<th>b. ZIP code</th>
<th>c. Date of birth</th>
<th>d. Sex</th>
<th>e. Ethnicity</th>
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<tr>
<td>Month</td>
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2. REASON FOR VISIT

- Patient’s complaint(s), symptom(s), or other reason(s) for this visit: Use patient’s own words.
  - (1) Most important:
    -  |
  - (2) Other:
    -  |
  - (3) Other:
    -  |

3. CONTINUITY OF CARE

a. Are you the patient’s primary care physician?

- 1 Yes
- 2 No
- 3 Unknown

b. Has the patient been seen in this clinic before?

- 1 Yes, established patient
- 2 No
- 3 New patient
- 4 Unknown

3. INJURY/POISONING/ADVERSE EFFECT

4. INJURY/POISONING/ADVERSE EFFECT

- 1 Yes
- 2 No
- 3 Unknown

b. Cause of injury, poisoning, or adverse effect – Describe the place, intentionality, and events that preceded the injury, poisoning, or adverse event (e.g., allergy to penicillin, bee sting, pedestrian hit by car driven by drunk driver, wife beaten with fists by husband, heroin overdose, inflicted strait, etc.).

4. INJURY/POISONING/ADVERSE EFFECT

5. PHYSICIAN’S DIAGNOSIS FOR THIS VISIT

- 1 Acute problem (<3 mos. onset)
- 2 Initial Visit for problem
- 3 Follow-up visit for problem
- 4 Unknown

6. DIAGNOSTIC/SCREENING SERVICES

- 1 Urinalysis (UA)
- 2 PSA (prostate specific antigen)
- 3 CBC (complete blood count)
- 4 Cholesterol
- 5 Other blood test
- 6 Other

7. MEDICATIONS & INJECTIONS

- 1 Aspirin
- 2 Antidepressant
- 3 Anticonvulsant
- 4 Antihypertensive
- 5 Diuretic
- 6 Thyroid
- 7 Others

8. SURGICAL PROCEDURES

- 1 Ordered/scheduled
- 2 Performed

9. MEDICATIONS & INJECTIONS

- 1 No follow-up planned
- 2 Return if needed
- 3 Refer to other physician
- 4 Telephone follow-up planned
- 5 Admit to hospital
- 6 Other

10. VISIT DISPOSITION

Mark (X) all that apply:

- 1 Discharged
- 2 Admitted
- 3 Return to clinic
- 4 Discharged to institutional care
- 5 Discharged to home or private duty care
- 6 Other

11. PROVIDERS SEEN

Mark (X) all that apply:

- 1 Nurse practitioner/MD/PA
- 2 Resident/Intern
- 3 Other physician
- 4 RN
- 5 LPN
- 6 Other

NHAMS-100A(OPD) (10-12-2000)