District 2 Public Health

PCM Visits and VHN

3/1/2016
Begin working down the list.
Case Manager Initial Assessment:

- Fill out Charting Form completely
- Sign RN signature
- Print for Medicaid
Initial Assessment by Patient:
Fill out Charting Form completely
Sign RN signature
Print for Medicaid

**NOTE:** on Health Info Tab the Yes/No dials switch places halfway down the page. Pay attention to marking correctly.
Reproductive Life Plan:

Fill out Charting Form completely
Sign RN signature
Print for Medicaid
PCM Care Plan:

Enter a minimum of 3 problems you addressed with the patient, but you can add up to 5 if needed.

Sign RN signature

Print and have patient sign for Medicaid
Continue working down the workflow.
Perform Ht/Wt/BP and Enter into Vitals
Review allergies
Z32.01 Encounter for positive Pregnancy Test

Add additional Dx codes as necessary.

Examples:

R11.0 Nausea

026.811 Pregnancy related exhaustion first trimester

Z72.0 Tobacco use
Office Visit: Full PCM/AH visit

New: 99203

Established: 99213
Procedures:

Presumptive application

Tobacco Use Counseling if needed. Choose Tobacco Cessation Services Intermediate 99406.
Education:
Check off appropriate Education topics. Additional education can be written in your Narrative Note.
Continue working down the workflow:

- Review Immunization for Flu vaccine and Tdap.
- Order Hgb screening and Preg Test if performed.
Confirm that all your check marks are Green and all items completed before hitting “Sign Encounter”
Write out Narrative Note before signing and saving.
See next page for items to include.
Once complete Sign/Save
ENCOUNTER NOTE FOR IMA TEST, VHN # 97656

FORSYTH BOARD OF HEALTH
428 CANTON HIGHWAY
CUMMING, GEORGIA 30040-2002

Phone: 770-781-6900 Fax: 770-781-6929

Name: IMA TEST Patient #: 97656 Date of Service: 02/24/2016

Subjective

Chief Complaint
PCMH TEST ENCOUNTER

Visit Type
VISIT TYPE: ADMISSION/NEW

Objective

Office Visits
9/2013-NEW PT DETAILED OV

Assessment

Problems/Diagnoses (Last reviewed by ALISON H WARD on 02/24/2016)
ENCOUNTER FOR PREGNANCY TEST, RESULT POSITIVE (115256904-SNOMED)
PREGNANCY RELATED EXHAUSTION AND FATIGUE, FIRST TRIMESTER (88495004-SNOMED)
NAUSEA WITH VOMITING, UNSPECIFIED (169350000-SNOMED)

Procedures
LU111-PRESUMPTIVE APPLICATION
E-charts
ECHART PCM: Case Manager Initial Assessment-02/24/2016
ECHART PCM: Initial Assessment by Patient-02/24/2016
ECHART REPRODUCTIVE LIFE PLAN (GA)-02/24/2016
ECHART PCM Care Plan-02/24/2016

Vitals
BMI: 23.6
BP: 120/70 mm Hg
HR: 78; RR 9; Temp: 98.6 F
Weight: 160 Lbs, 0 Oz.

Plan
Ed Topics
LU062-DOMESTIC VIOLENCE(AHD)
LU053-EXERCISE(AHD)
LU056-GENERAL DIETARY COUNSELING(AHD)
LU060-IRON RICH FOODS(AHD)
LU063-PREGNANCY REFERRAL(AHD)

Lab Orders
HEMOGLOBIN 03/04/2016

Overview

This is where you write out your Narrative Note. Include a brief description of patient's pregnancy due date, past medical/pregnancy problems, current medical/pregnancy problems, medical provider. Include a description of their support system. List any problems and concerns and associated advice for patient.

Acknowledges a review of systems, any reported problems and associated referrals. List education and information given. Utilize MACROS for commonly used narrative items. This summary should provide a highlight of the entire visit.
Once the Encounter is Complete you will go to the Adult Menu
Choose “Maternal”
This Page must be added and completed because of the CMO notification

You will complete Page 1 and 2

Page 1
You’re Done!

District 2 Public Health
3/2016