

Cardiology Progress Note Guidelines

CC: One line. "Chest Pain" or "SOB" or "DOE"

HPI: Just about the heart. Ex: Chest pain began..... Quality (dull, sharp?), Duration, Quantity (# of episodes) Radiation, Alleviating, Worsening. Pueritic? Positional? Fever? Palpitations? Chills? Nausea? Vomitting? Diaphoresis? Overnight events/symptoms. This AM symptoms vs asymptomatic. Do not include PMH here.

Tele: What does EKG or tele monitor show? NSR? Arrythmias?

TRS: Timi Risk Score (see side box)

Calculate Timi Risk Score

PMH: Focus on DM, HTN, Chol, Thyroid

SHx: Any surgeries.

FHx: Males with CAD before age of 55? Females before 65?

Soc: Job? Lifestyle? Married? Lives with whom? Tobacco? EtOH? Street drugs?

1. Age over 65
2. Asprin within last 7 days (prior to admission)
3. Any 3 of the following: DM, HTN, ↑Chol, Tobacco, FHx (see FHx below)
4. Known CAD/Previous MI
5. Two episodes of chest pain lasting more than 20 minutes each in last 24 hours
6. Non-negative cardiac markers (includes indeterminate)
7. ST deviation by more than 0.5mm ↑ or ↓

One point for each of the above. Seven is maximum.

Score of 0-2 less than 3% chance of MI or death.

Score of 3 gives 5% chance of MI or death.

Score of 4 gives 7% chance of MI or death.

Score of 5 gives 12% chance of MI or death.

Score of 6-7 gives 19% chance of MI or death.

All: _____

Meds: _____

RF: See box to right.

RE: See box to right.

VS: Include ranges for BP, HR, Resp, Sat, Tm and Tc. Ex: 122-178 / 67-92

Risk Factors:

1. Male
2. Male > 45 yo
Female > 55 yo
3. Tobacco
4. + FHx Male <55 MI
Female <65MI
5. ↑Cholesterol
6. Obesity

PE: Focus on CV exam, don't forget to include below in exam:

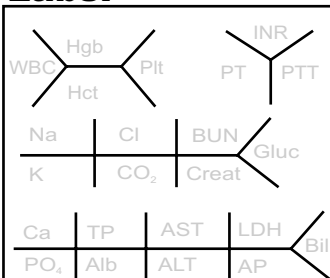
HEENT: JVP (how much?), ∅ Carotid bruits

CV: RRR, or IRR, S1, S2, ∅M, ∅S3, ∅S4, ∅rubs, PMI.

Abd: BS+, ∅abd bruits, ∅RRG

Ext: Pulses +2/4, dp/pt, BL, edema? ∅cce

Labs:



CK: _____
MB: (Three sets of negative Trop: enzymes) _____

EKG: _____

CXR: _____

Risk Equivalent:

1. DM
2. CVA/Carotid Dx
3. Previous MI
4. AAA
5. PAD

A/P: What do you think? Is it cardiac in nature? What is the TRS? What is your diagnosis? What is your plan? Stress? Stress with Myoview? Echo? EKG? Admit to tele? What studies support your plan?