

ProVation[®] MD

Leading the Way in Procedure Documentation
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Gastroenterology

Inbound Demographic

Inbound Scheduling

Comprehensive
Medical Content

Outbound Results

Medical and Imaging
Device Interface

General Hospital - Sample GI Note

ProVation[®] MD


Patient Name: Mohit Datta
Procedure Date: 01/02/2008 10:30:00
Date of Birth: 01/01/1959
Admit Type: Outpatient
Note Status: Finalized

Gender: F
MRN: 094885
Age: 47
Admit #: 002045
Attending MD: John H. White

Procedure: Colonoscopy
Indications: Hematochezia, Personal history of colonic polyps
Providers: John H. White MD, Kevin P. Taylor MD (Fellow)
Referring MD: William Jones, MD
Medications: Midazolam 2 mg IV, Fentanyl 100 mcg IV

Procedure:
A History and Physical has been performed, and patient medication allergies have been reviewed. The patient's tolerance of previous anesthesia has been reviewed. The risks and benefits of the procedure and the sedation options and risks were discussed with the patient. All questions were answered and informed consent was obtained. Mental Status Examination: alert and oriented. Airway Examination: normal oropharyngeal airway and neck mobility. Respiratory Examination: clear to auscultation. CV Examination: RR90, no murmurs, no S3 or S4. After reviewing the risks and benefits, the patient was deemed in satisfactory condition to undergo the procedure. The anesthesia plan was to use conscious sedation. Immediately prior to administration of medications, the patient was assessed for adequacy to receive sedatives. The heart rate, respiratory rate, oxygen saturations, blood pressure, adequacy of pulmonary ventilation, and response to cues were monitored throughout the procedure. The physical status of the patient was re-assessed after the procedure. After I obtained informed consent, the scope was passed under direct vision. The colonoscope was introduced through the anus and advanced to the caecum, identified by appendicolocolic & IC veins. The quality of the prep was good. The patient tolerated the procedure well.

Findings:
A sessile, non-bleeding polyp was found in the rectum. The polyp was 5 mm in size. Polypectomy was performed with a snare resection technique using the hot snare. Resection and retrieval were complete. Estimated blood loss was minimal.
One pedunculated, non-bleeding polyp was found in the sigmoid colon. The polyp was 7 mm in size. Polypectomy was performed with a hot snare. Resection and retrieval were complete. Estimated blood loss was minimal.
Multiple large-mouthed diverticula were found in the descending colon.
Interval, non-bleeding, protruded with spontaneous reduction (grade 1) hemorrhoids were found on retroflexion.



1. Rectum/Proximal 2. Rectum/Polyp 3. Sigmoid/Colon/Polyp 4. Descending Colon/Diverticula

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Impression:
- One 5 mm benign appearing polyp in the rectum. Resected and retrieved.
- One 7 mm polyp in the sigmoid colon. Resected and retrieved.
- Diverticulosis.
- Interval hemorrhoids were found.

Recommendations:
- High fiber diet
- Await pathology results.
- The findings and recommendations were discussed with the patient.

E-signed by John H. White, MD
John H. White, MD
Signed Date: 01/02/2008 11:35:05
Number of Attestations: 0
Note generated on: 1/2/2008

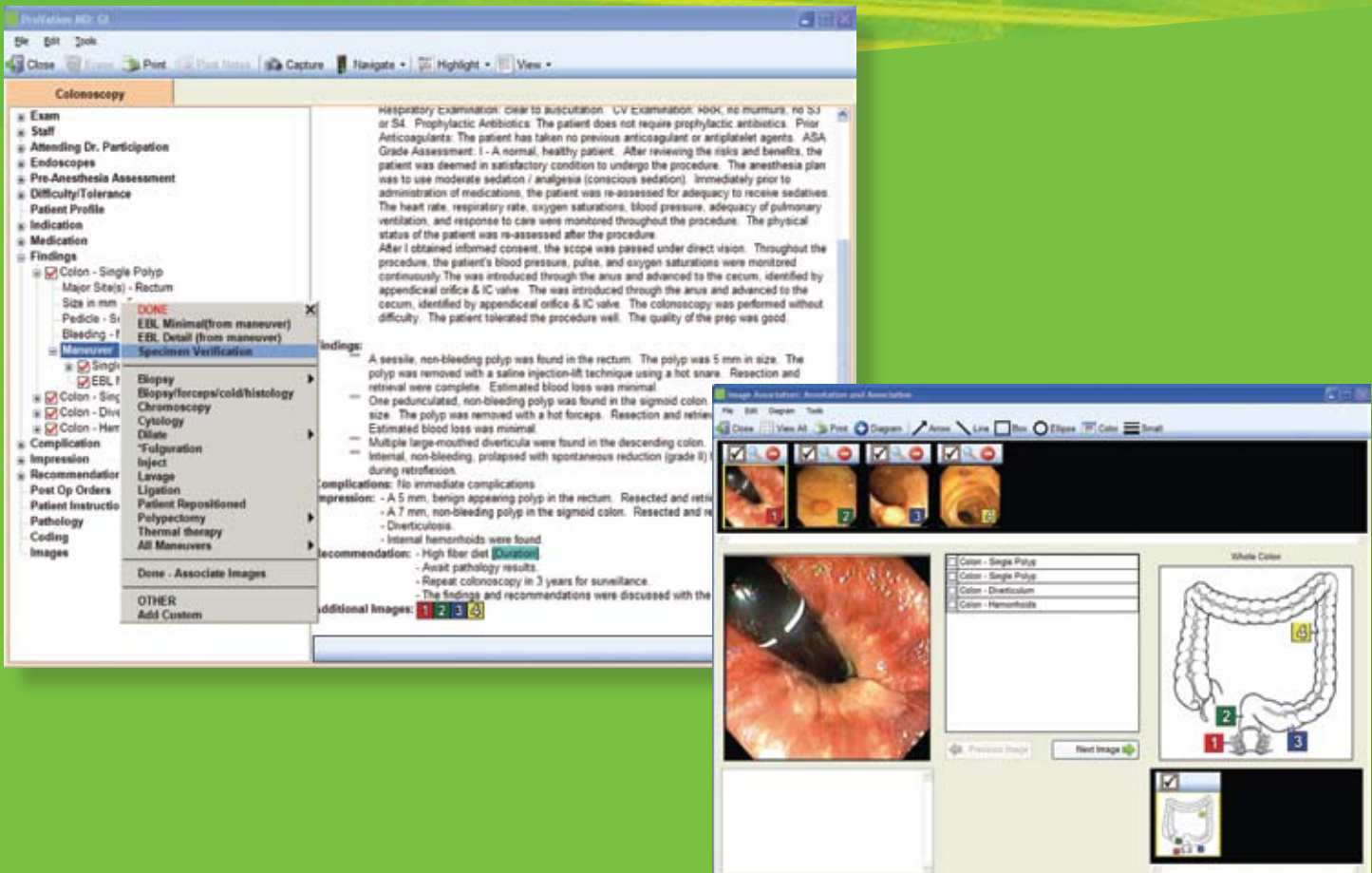
E-signed by Kevin P. Taylor, MD
Kevin P. Taylor, MD
Signed Date: 01/02/2008 11:35:05

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Printed March 2007
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RICH MEDICAL CONTENT INCLUDES:

- Colonoscopy
- Gastroscopy
- Flexible Sigmoidoscopy
- Dilation
- Liver Biopsy
- Enteroscopy (SBE)
- Lower EUS
- ERCP
- Non-endoscopic G-tube placement
- Oesophageal Manometry
- Video Capsule Endoscopy
- Oesophageal pH Probe
- Upper EUS
- Anorectal Manometry
- Double Balloon Enteroscopy
- Bravo[™]
- Helicobacter Pylori Breath Test
- Ileoscopy (via Stoma)
- Paracentesis

Gastroenterology



- Instantly and automatically prepares Patient Letters, Referring MD Letters, CC: Letters, Patient Recall Letters, Post-Op Orders, Patient Instructions, Pathology Requests, Pathology Results Reports and Pathology Follow-up Letters
- Interfaces with endoscopes and other image capture equipment for instant inclusion of images in the procedure note
- Allows for capture and submission of GI Quality Indicators
- Drives structured and compliant data capture, then pairs it with robust reporting and analysis
- Creates a single, complete and easily retrieved electronic note for each procedure
- Comprehensive medical content built by ProVation's in-house physician team