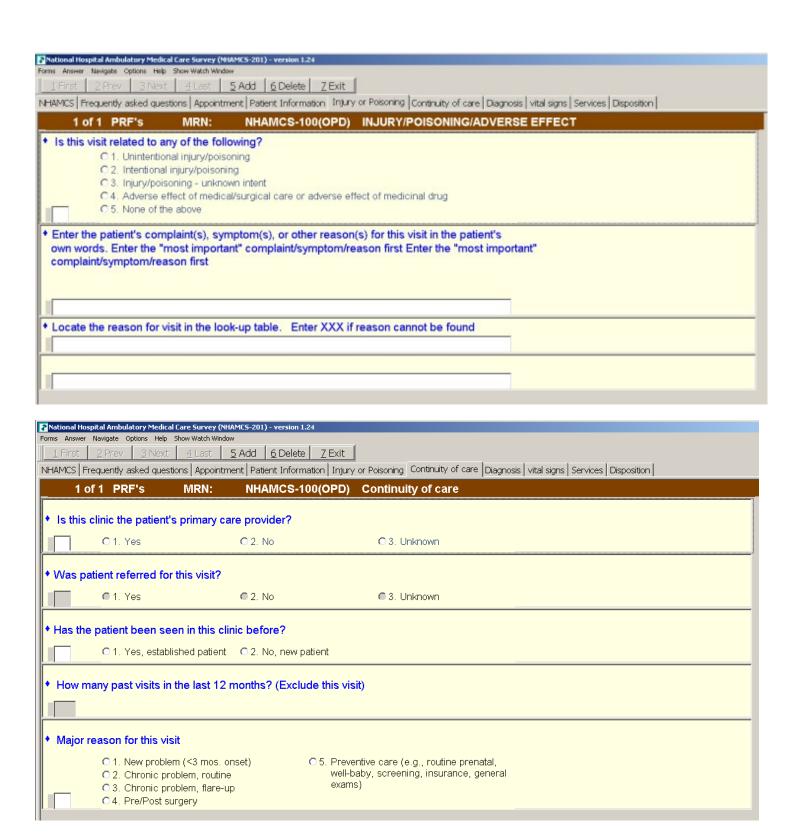
## **NHAMCS OPD Screen Shots**

OMB No (	0920-0278:	Fxn	Date:

Assurance of confidentiality – All information which would permit identification of an individual, a practice, or an establishment will be held confidential, will be used for statistical purposes only by NCHS staff, contractors, and agents only when required and with necessary controls, and will not be disclosed or released to other persons without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m) and the Confidential Information Protection and Statistical Efficiency Act (PL-107-347).

**Notice** – Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing burden to: CDC/ATSDR Information Collection Review Office, 1600 Clifton Road, MS D-74, Atlanta, GA 30333, ATTN: PRA (0920-0278).

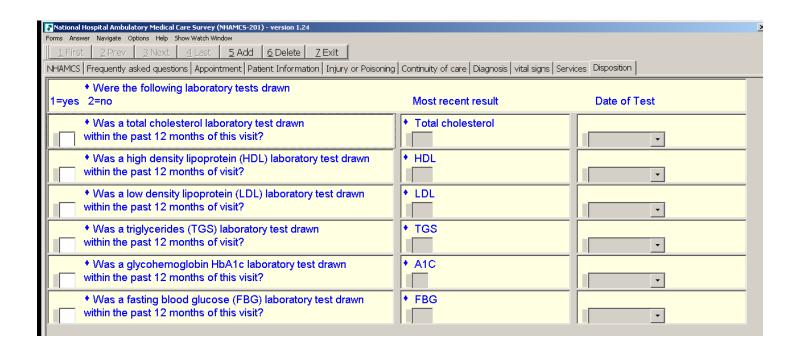
Abtional Hospital Ambulatory Medical Care Survey (NHAMCS-201) - version 1.24  Forms Answer Navigate Options Help Show Watch Window  1 First 2 Prev 3 Next 4 Last 5 Add 6 Delete 7 Exit  NHAMCS Frequently asked questions Appointment Patient Information Injury or Poisoning Continuity of care Diagnosis vital signs Services Disposition					
I of 1 PRF's MRN: NHA      Enter patient's first name     Enter patient's middle name     Enter patient's last name      Enter the patient's medical record number      Date of visit (arrival) (Format MM/DD/YYYY)     Patient's 5 digit zip code.     (Enter "1" if homeless)     Date of birth	* Age     * Enter time period	Expected source(s) of payment for THIS VISIT.     (Enter all that apply, separate with commas)      1. Private Insurance     2. Medicare     3. Medicaid or CHIP     4. Worker's compensation     5. Self-pay     6. No charge /Charity     7. Other     8. Unknown      • Tobacco Use     0.1. Not current     0.2. Current     0.3. Unknown			



National Hospital Ambulatory Medical Care Survey (NHAMCS-201) - version 1.24
Forms Answer Navigate Options Help Show Watch Window
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit
NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition
1 of 1 PRF's MRN: NHAMCS-100(OPD) Providers diagnosis for this visit
As specifically as possible, list diagnoses related to this surgery or procedure
List PRIMARY diagnoses first
List FRIWART diagnoses list
Locate the diagnosis in the look-up table. Enter "XXX" if diagnosis cannot be found
Locate the diagnosis in the look-up table. Enter "XXX" if diagnosis cannot be found
Locate the diagnosis in the look-up table. Enter AAA in diagnosis cannot be found
Regardless of the diagnoses previously entered, does the patient now have -
Enter all that apply, separate with commas
□1. Arthritis □4. Cerebrovascular □5. Chronic renal failure □9. Diabetes □13. Obesity
□ 2. Asthma disease/History of stroke □ 6. Congestive heart failure □ 10. Hyperlipidemia □ 14. Osteoporosis □ 3. Cancer □ 11. Hypertension □ 15. None of the above
□ 3. Cancer or transient ischemic □ 7. COPD □ 11. Hypertension □ 15. None of the above attack (TIA) □ 8. Depression □ 12. Ischemic heart disease
0. Depression 12. Isonemic fledit disease
National Hospital Ambulatory Medical Care Survey (NHAMC5-201) - version 1.24
Forms Answer Navigate Options Help Hide Watch Window
1 First 2 Prev 3 Next 4 Last 5 Add 6 Delete 7 Exit
NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Meds   Disposition
1 of 1 PRF's MRN: NHAMCS-100(OPD) Providers diagnosis for this visit
Asthma severity     Specify Asthma severity
C 1. Intermittent C 4. Severe persistent
C 2. Mild persistent C 5. Other
O 3. Moderate C 6. None recorded
persistent
Asthma control     Specify Asthma control
C 1. Well controlled C 3. Very poorly C 2. Not well controlled
C 2. Not well controlled controlled controlled C 4. Other
C 5. None recorded
? [F1]
Select cancer type
C 0. In situ C 2. Stage II C 4. Stage IV
C1. Stage I C3. Stage III C5. Unknown stage

National Hospital Ambulatory Medical Care Survey	y (NHAMCS-201) - version 1.24		
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1 First 2 Prev 3 Next 4 Last	<del></del>	· fa · · · · · · fa · · · · · · · · · ·	( <del></del>
	intment   Patient Information   Injury or Poison		Services   Disposition
1 of 1 PRF's MRN:	NHAMCS-100(OPD) Vital s	igns	
Height (feet)		Height (inches)	
Height (centimeters)			
Weight (pounds)		Weight (ounces)	
Weight (kilograms)		• Weight (gm)	
Temperature		◆ Temperature type	
		© 2. Fahreni	heit
Blood Pressure - SYSTOLIC		Blood pressure - DIASTOLIC Enter 998 for P, PAL, DOPP, or DOPPLER	
_			
forms Answer Navigate Options Help Show Watch W			
1 First 2 Prev 3 Next 4 Last	<u>  5 Add   6 Delete   7 Exit  </u> ntment   Patient Information   Injury or Poisor	sing Continuity of care Diagnosis Luitel signs	Services Disposition
			Services   Disposition
1 of 1 PRF's MRN:	NHAMCS-100(OPD) Servi	ces	
? [F1]			
Services     Enter all examinations, blood test	e imaging other tests non-medica	tion treatment and health education	OPDERED or PROVIDED
Enter all examinations, blood test	s, imaging, other tests, non-medica	mon treatment and nealth education	ORDERED OF PROVIDED.
☐1. NO SERVICES	□ 16. <u>Imaging</u>	□32. Fetal monitoring	□48. Psychotherapy
<u>Examinations</u>	Bone mineral density	33. HIV test	49. Radiation therapy
<ul><li>□ 2. Breast</li><li>□ 3. Depressing screening</li></ul>	☐ 17. CT scan ☐ 18. Echocardiogram	34. HPV DNA test	50. Wound care
4. Foot	19. Other ultrasound	35. PAP test	Health education /counseling
5. General physical exam	20. Mammography	☐ 36. Peak flow ☐ 37. Pregnancy/HCG test	52. Diet/Nutrition
6. Neurologic	21. MRI	_	53. Exercise
7. Pelvic	□ 22. X-ray	☐ 38. Sigmoidoscopy ☐ 39. Spirometry	54. Family planning/Contraception
☐8. Rectal	Other tests and procedures	40. Tonometry	55. Growth/Development
□9. Retinal	☐ 23. Audiometry	41. Urinalysis	☐ 56. Injury prevention
☐ 10. Skin	☐24. Biopsy	Non-medication treatment	□ 57. Stress management
Blood tests	25. Cardiac stress test	☐ 42. Cast/splint/wrap	□ 58. Tobacco use/Exposure
11. CBC	26. Colonoscopy	☐ 43. Complementary and alternative	☐ 59. Weight reduction
12. Glucose	27. Chlamydia test	medicine (CAM)	Other services not listed
13. HgbA1c (Glycohemoglobin)	28. EKG/ECG	44. Durable medical equipment	60. Other service
☐ 14. Lipid profile ☐ 15. PSA (prostate specific antigen)	29. Electroencephalogram (EEG)	☐ 45. Home health care ☐ 46. Mental health counseling	
Env. 1 or (prostate specific dialgett)	☐ 31. Excision of tissue	☐ 47. Physical therapy	

Chartier III resided a shadebarra M. direl Core Commo (MIANEC 201), consists 4 2/
Thational Hospital Ambulatory Medical Care Survey (NHAMCS-201) - version 1.24  Torms Answer Navigate Options Help Hide Watch Window
1 First 2 Prev 3 Next 4 Last 5 Add 6 Delete 7 Exit
NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Meds   Disposition
1 of 1 PRF's MRN: NHAMCS-100(OPD) Services
Biopsy provided?
C1. Yes
C 2. No
Colonoscopy provided?
C 1. Yes C 2. No
Excision of tissue provided?  Output  Output  Description:
C 1. Yes C 2. No
Sigmoidoscopy provided?
C 1. Yes
C 2. No
Asthma action plan given to patient?
C 1. Yes
C 2. No
National Hospital Ambulatory Medical Care Survey (NHAMCS-201) - version 1.24
Forms Answer Navigate Options Help Show Watch Window
Forms Answer Navigate Options Help Show Watch Window  1 First 2 Prev 3 Next 4 Last 5 Add 6 Delete 7 Exit
1 First 2 Prev 3 Next 4 Last 5 Add 6 Delete 7 Exit
1 First 2 Prev 3 Next 4 Last 5 Add 6 Delete 7 Exit NHAMCS Frequently asked questions Appointment Patient Information Injury or Poisoning Continuity of care Diagnosis vital signs Services Disposition
1 First 2 Prev 3 Next 4 Last 5 Add 6 Delete 7 Exit  NHAMCS Frequently asked questions Appointment Patient Information Injury or Poisoning Continuity of care Diagnosis vital signs Services Disposition  1 of 1 PRF's MRN: NHAMCS-100(OPD) Providers
1 First 2 Prev 3 Next 4 Last 5 Add 6 Delete 7 Exit NHAMCS Frequently asked questions Appointment Patient Information Injury or Poisoning Continuity of care Diagnosis vital signs Services Disposition
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers   Enter all providers seen at this visit, separate with commas
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers   The provider   Pr
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers   Enter all providers seen at this visit, separate with commas     1. Physician   5. Mental health provider     2. Physician assistant   6. Other
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers   The provider   Pr
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers   Enter all providers seen at this visit, separate with commas     1. Physician   5. Mental health provider     2. Physician assistant   6. Other     3. Nurse practitioner/Midwife   7. None
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers   Enter all providers seen at this visit, separate with commas     1. Physician   5. Mental health provider     2. Physician assistant   6. Other     3. Nurse practitioner/Midwife   7. None
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers     Enter all providers seen at this visit, separate with commas     1. Physician   5. Mental health provider     2. Physician assistant   6. Other     3. Nurse practitioner/Midwife   7. None     4. RN/LPN     • Enter time spent, in minutes, with provider
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers     • Enter all providers seen at this visit, separate with commas     1. Physician   5. Mental health provider     2. Physician assistant   6. Other     3. Nurse practitioner/Midwife   7. None     4. RN/LPN
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers     Enter all providers seen at this visit, separate with commas     1. Physician   5. Mental health provider     2. Physician assistant   6. Other     3. Nurse practitioner/Midwife   7. None     4. RN/LPN     • Enter time spent, in minutes, with provider
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers     Enter all providers seen at this visit, separate with commas     1. Physician   5. Mental health provider     2. Physician assistant   6. Other     3. Nurse practitioner/Midwife   7. None     4. RN/LPN     • Enter time spent, in minutes, with provider
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers     Enter all providers seen at this visit, separate with commas     1. Physician   5. Mental health provider     2. Physician assistant   6. Other     3. Nurse practitioner/Midwife   7. None     4. RN/LPN     • Enter time spent, in minutes, with provider
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers     Enter all providers seen at this visit, separate with commas     1. Physician   5. Mental health provider     2. Physician assistant   6. Other     3. Nurse practitioner/Midwife   7. None     4. RN/LPN     • Enter time spent, in minutes, with provider     Enter 0 if no provider seen
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers     Enter all providers seen at this visit, separate with commas     1. Physician   5. Mental health provider     2. Physician assistant   6. Other     3. Nurse practitioner/Midwife   7. None     4. RN/LPN     • Enter time spent, in minutes, with provider
1 First   2 Prev   3 Next   4 Last   5 Add   6 Delete   2 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers     Enter all providers seen at this visit, separate with commas     1. Physician     5. Mental health provider     2. Physician assistant   6. Other   3. Nurse practitioner/Midwife   7. None     4. RNVLPN     Enter time spent, in minutes, with provider     Enter 0 if no provider seen     Visit Disposition (Enter all that apply, separate with commas)
I First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers     6 Enter all providers seen at this visit, separate with commas     1
Price   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit
I First   2 Prev   3 Next   4 Last   5 Add   6 Delete   7 Exit     NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition     1 of 1 PRF's   MRN:   NHAMCS-100(OPD)   Providers     6 Enter all providers seen at this visit, separate with commas     1



## OPD Lookback

National Hospital Ambulatory Medical Care Su		
Forms Answer Navigate Options Help Hide Wat  1 First 2 Prev 3 Next 4 L		
	ppointment Patient Information   Injury or Poisoning   Continuity	of and Diamonic literature Comittee Diamonities Lookhook
INHAMICS   Frequently asked questions   A	ppointment   Patient Information   Injury or Poisoning   Continuity	or care   Diagnosis   vital signs   Services   Disposition   Lookback
Collect the following data for	or each prior visit in the previous 12 months.	
Collect up to 10 prior visits, st	tarting with the oldest. (Exclude telephone calls, en	nails, and faxes).
Reference Time: 5/4/2010	) - 5/4/2011	
1. Enter 1 to Continue		
Intro 1		
National Hospital Ambulatory Medical Care S Forms Answer Navigate Options Help Hide Wo		
	Last 5 Add 6 Delete Z Exit	
	Appointment   Patient Information   Injury or Poisoning   Continuity	of care   Diagnosis   vital signs   Services   Disposition   Lookback
The same of the question of the same of th	appointment   Table   Thomas   Thomas	01 date   Diagnoste   100 1000   Disposition
	Reference Time: 5/4/2010 - 5/4/2011	
Date of visit (Format MM/E	)DAYYYY	
Date of visit (Format MIM/L	(אווטל	
Enter 999 for no other visits		
Visit Date	Weight - Lbs	Allergic
Pregnant	Weight - Oz	Meds Allergic 1
Smoke	Weight - Kg	Meds Allergic 2
Diagnosis	Weight - Gm	Meds Allergic 3
	BP - Systolic	Meds Allergic 4
Family History	BP - Diastolic	Meds Allergic 5
- Male	Services	
II :		Meds Allergic 6
- Female	Health Ed	Meds Allergic 7
	Plan	Meds Allergic 8
Height - Feet	Plan - BP	
Height - Inches	Plan - Chol	
Height -	Plan - BG	
	Plan - Referral	

Forms Answer Navigate		- version 1.27		×		
4 Et 4 D. D	Forms Answer Navigate Options Help Hide Watch Window					
1 First 2 Prev 3 Next 4 Last 5 Add 6 Delete 7 Exit						
NHAMCS Frequently	asked questions Appointment Patie	nt Information   Injury or	Poisoning Continuity of care Diagnosi:	s vital signs Services Disposition Lookback		
◆ Smoke cigal	rettes					
C 1. Not current			O 3. Unknown			
C 2. Current						
Visit Date	1/1/2011	Majaht Iba		Allereie		
	17172011	Weight - Lbs		Allergic		
Pregnant		Weight - Oz		Meds Allergic 1		
Smoke		Weight - Kg		Meds Allergic 2		
Diagnosis		Weight - Gm		Meds Allergic 3		
	_	BP - Systolic		Meds Allergic 4		
Family History		BP - Diastolic		Meds Allergic 5		
- Male		Services		Meds Allergic 6		
- Female		Health Ed		Meds Allergic 7		
		Plan		Meds Allergic 8		
Height - Feet		Plan - BP				
Height - Inches		Plan - Chol				
Height -		Plan - BG				
		Plan - Referral				
	llatory Medical Care Survey (NHAMCS-201)	version 1.27		×		
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THIST 7 PIEA	JINEKL BLOSL JACO	O Delete   / LXIL				
NHAMCS Frequently			Poisoning Continuity of care Diagnosis	Vital signs   Services   Disposition   Lookhack		
NHAMCS Frequently			Poisoning   Continuity of care   Diagnosis	s vital signs Services Disposition Lookback		
NHAMCS Frequently  Does the pat	asked questions   Appointment   Patier		Poisoning   Continuity of care   Diagnosis	s vital signs Services Disposition Lookback		
Does the pat	asked questions   Appointment   Patier		Poisoning   Continuity of care   Diagnosis	s vital signs   Services   Disposition   Lookback		
Does the pat     Enter all that applications	asked questions   Appointment   Patier					
◆ Does the pat Enter all that ap  □ 1. NONE	asked questions   Appointment   Patier	nt Information   Injury or	□ 7. Ischemic heart disc			
Does the pat     Enter all that ap     1. NONE     2. Cerebrovascul     3. Congestive hea	asked questions   Appointment   Patier tient now have pply, separate with commas lar disease/history of stroke or trai	nt Information   Injury or	□ 7. Ischemic heart disc			
Does the pat     Enter all that ap     1. NONE     2. Cerebrovascul     3. Congestive head     4. Diabetes	asked questions   Appointment   Patier tient now have pply, separate with commas lar disease/history of stroke or trai	nt Information   Injury or	□ 7. Ischemic heart disc			
Does the pat     Enter all that ap     1. NONE     2. Cerebrovascul     3. Congestive hea	asked questions   Appointment   Patier tient now have pply, separate with commas  lar disease/history of stroke or trai art failure (CHF)	nt Information   Injury or	□ 7. Ischemic heart disc			
Does the pat     Enter all that ap     1. NONE     2. Cerebrovascul     3. Congestive head     4. Diabetes     5. Hypertension	asked questions   Appointment   Patier tient now have pply, separate with commas  lar disease/history of stroke or trai art failure (CHF)	nt Information   Injury or	□ 7. Ischemic heart disc			
Does the pate    Enter all that ap	asked questions   Appointment   Patier tient now have pply, separate with commas lar disease/history of stroke or trai art failure (CHF)	nt Information   Injury or	□ 7. Ischemic heart disc	ease		
Does the pate Enter all that as 1. NONE     2. Cerebrovascul     3. Congestive here     4. Diabetes     5. Hypertension     6. Hyperlipidemia	asked questions   Appointment   Patier tient now have pply, separate with commas lar disease/history of stroke or trai art failure (CHF)	nt Information   Injury or I	□ 7. Ischemic heart disc	ease		
Does the pat     Enter all that ap     1. NONE     2. Cerebrovascul     3. Congestive her     4. Diabetes     5. Hypertension     6. Hyperlipidemia  Visit Date  Pregnant	asked questions   Appointment   Patier tient now have pply, separate with commas  ar disease/history of stroke or tra art failure (CHF)	nt Information   Injury or   Information   Injury or   Injury or	□ 7. Ischemic heart disc	Allergic Meds Allergic 1		
Does the pate Enter all that ap     1. NONE     2. Cerebrovascul     3. Congestive heat     4. Diabetes     5. Hypertension     6. Hyperlipidemia     Visit Date     Pregnant     Smoke	asked questions   Appointment   Patier tient now have pply, separate with commas  ar disease/history of stroke or tra art failure (CHF)	weight - Lbs Weight - Cz Weight - Kg Weight - Gm	□ 7. Ischemic heart disc	Allergic Meds Allergic 1 Meds Allergic 2		
Does the pate Enter all that ap     1. NONE     2. Cerebrovascul     3. Congestive heat     4. Diabetes     5. Hypertension     6. Hyperlipidemia     Visit Date     Pregnant     Smoke	asked questions   Appointment   Patier tient now have pply, separate with commas  ar disease/history of stroke or tra art failure (CHF)	nt Information   Injury or   Insient ischemic attack ( Weight - Lbs Weight - Oz Weight - Kg	□ 7. Ischemic heart disc	Allergic Meds Allergic 1 Meds Allergic 2 Meds Allergic 3 Meds Allergic 4		
Does the pate Enter all that appears to the pate Enter all that appears the pate Enter all that appears to the pate Enter all the pate Enter al	asked questions   Appointment   Patier tient now have pply, separate with commas  ar disease/history of stroke or tra art failure (CHF)	weight - Lbs Weight - Cz Weight - Kg Weight - Gm BP - Systolic	□ 7. Ischemic heart disc	Allergic Meds Allergic 1 Meds Allergic 2 Meds Allergic 3 Meds Allergic 4 Meds Allergic 5		
Does the pate Enter all that appears to the pate of the pate	asked questions   Appointment   Patier tient now have pply, separate with commas  ar disease/history of stroke or tra art failure (CHF)	weight - Lbs Weight - Oz Weight - Kg Weight - Gm BP - Systolic BP - Diastolic	□ 7. Ischemic heart disc	Allergic Meds Allergic 1 Meds Allergic 2 Meds Allergic 3 Meds Allergic 4 Meds Allergic 5 Meds Allergic 6		
◆ Does the pate Enter all that appears to the pate of	asked questions   Appointment   Patier tient now have pply, separate with commas  ar disease/history of stroke or tra art failure (CHF)	weight - Lbs Weight - Cz Weight - Kg Weight - Gm BP - Systolic BP - Diastolic Services Health Ed	□ 7. Ischemic heart disc	Allergic Meds Allergic 1 Meds Allergic 2 Meds Allergic 3 Meds Allergic 4 Meds Allergic 5 Meds Allergic 5 Meds Allergic 6 Meds Allergic 7		
◆ Does the pate Enter all that appear to the pate Enter all the pa	asked questions   Appointment   Patier tient now have pply, separate with commas  ar disease/history of stroke or tra art failure (CHF)	weight - Lbs Weight - Oz Weight - Kg Weight - Gm BP - Systolic BP - Diastolic Services Health Ed Plan	□ 7. Ischemic heart disc	Allergic Meds Allergic 1 Meds Allergic 2 Meds Allergic 3 Meds Allergic 4 Meds Allergic 5 Meds Allergic 6		
Does the pate Enter all that appears the pate Enter all that appears to the pate of t	asked questions   Appointment   Patier tient now have pply, separate with commas  ar disease/history of stroke or tra art failure (CHF)	weight - Lbs Weight - Cz Weight - Cz Weight - Gm BP - Systolic BP - Diastolic Services Health Ed Plan Plan - BP	□ 7. Ischemic heart disc	Allergic Meds Allergic 1 Meds Allergic 2 Meds Allergic 3 Meds Allergic 4 Meds Allergic 5 Meds Allergic 5 Meds Allergic 6 Meds Allergic 7		
◆ Does the pate Enter all that as Enter all tha	asked questions   Appointment   Patier tient now have pply, separate with commas  ar disease/history of stroke or tra art failure (CHF)	weight - Lbs Weight - Coz Weight - Kg Weight - Gm BP - Systolic BP - Diastolic Services Health Ed Plan Plan - BP Plan - Chol	□ 7. Ischemic heart disc	Allergic Meds Allergic 1 Meds Allergic 2 Meds Allergic 3 Meds Allergic 4 Meds Allergic 5 Meds Allergic 5 Meds Allergic 6 Meds Allergic 7		
Does the pate Enter all that appears the pate Enter all that appears to the pate of t	asked questions   Appointment   Patier tient now have pply, separate with commas  ar disease/history of stroke or tra art failure (CHF)	weight - Lbs Weight - Cz Weight - Cz Weight - Gm BP - Systolic BP - Diastolic Services Health Ed Plan Plan - BP	□ 7. Ischemic heart disc	Allergic Meds Allergic 1 Meds Allergic 2 Meds Allergic 3 Meds Allergic 4 Meds Allergic 5 Meds Allergic 5 Meds Allergic 6 Meds Allergic 7		

National Hospital Ambu	ulatory Medical Care Survey (NHAMCS-201) -	version 1.27	<u>x</u>		
Forms Answer Navigate Options Help Hide Watch Window					
1 First 2 Prev 3 Next 4 Last 5 Add 6 Delete 7 Exit					
NHAMCS Frequently asked questions Appointment Patient Information Injury or Poisoning Continuity of care Diagnosis vital signs Services Disposition Lookback					
Taliance   Trequently	asked questions   Appointment   Faderi	ic milormation   mary or	Posoning Continuity of care   Diagnosis   Vital signs   Del Vites   Disposition   20060000		
Does the patient have a family history of premature coronary heart disease (CHD), coronary artery disease (CAD), or ischemic heart disease					
(IHD)					
in a father, son, or brother less than age 55					
III a fauler, soil, of brother less than age 55					
C 1. Yes			C 3. Unknown		
◯ 2. No					
J					
Visit Date	1/1/2011	Weight - Lbs	Allergic		
Pregnant		Weight - Oz	Meds Allergic 1		
Smoke	3	Weight - Kg	Meds Allergic 2		
Diagnosis	1	Weight - Gm	Meds Allergic 3		
		BP - Systolic	Meds Allergic 4		
Family History		BP - Diastolic	Meds Allergic 5		
- Male		Services	Meds Allergic 6		
- Female		Health Ed	Meds Allergic 7		
- Ferriale					
	_	Plan	Meds Allergic 8		
Height - Feet	_	Plan - BP			
Height - Inches	<u> </u>	Plan - Chol			
Height -		Plan - BG			
		Plan - Referral			
	latory Medical Care Survey (NHAMCS-201) -	version 1.27	×		
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NHAMCS Frequently a	asked questions   Appointment   Patient	: Information Injury or I	Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition   Lookback
		, , ,	
Blood press	ure - DIASTOLIC		
Enter 998	for P, PAL, DOPP, or DOPPI	LER	
Visit Date	1/1/2011	Weight - Lbs	Allergic
Pregnant		Weight - Oz	Meds Allergic 1
_		_	
Smoke	3	Weight - Kg	Meds Allergic 2
Diagnosis	1	Weight - Gm	Meds Allergic 3
		BP - Systolic	Meds Allergic 4
Family History		BP - Diastolic	Meds Allergic 5
- Male	3	Services	Meds Allergic 6
- Female	3	Health Ed	
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Forms Answer Navigate  1 First 2 Prev NHAMCS Frequently  Services  Enter all that ap  1. NONE 2. Lipids/choles 3. HgbA1c (Gly	options Help Hide Watch Window  3 Next 4 Last 5 Add 6 asked questions Appointment Patient  oply, separate with commas  terol cohemoglobin A1c)	Delete Z Exit	Poisoning Continuity of care Diagnosis vital signs Services Disposition Lookback
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Forms Answer Navigate  1 First 2 Prev NHAMCS Frequently  Services  Enter all that ap  1. NONE 2. Lipids/choles 3. HgbA1c (Glythan Street Companies) 4. Fasting blood 5. Creatinine 6. Potassium  Visit Date  Pregnant  Smoke	options Help Hide Watch Window  3 Next 4 Last 5 Add 6 asked questions Appointment Patient  oply, separate with commas  terol cohemoglobin A1c) I glucose (FBG)	Weight - Lbs Weight - Cz Weight - Kg Weight - Gm	Poisoning Continuity of care Diagnosis vital signs Services Disposition Lookback  7. Sodium 8. AST/ALT 9. Basic metabolic panel 10. Comprehensive metabolic panel (CMP)  Allergic Meds Allergic 1 Meds Allergic 2 Meds Allergic 3
Forms Answer Navigate  1 First 2 Prev NHAMCS Frequently  Services  Enter all that ap  1. NONE 2. Lipids/choles 3. HgbA1c (Glythan Greath Companies) 4. Fasting blood 5. Creatinine 6. Potassium  Visit Date Pregnant  Smoke  Diagnosis  Family History	options Help Hide Watch Window  3 Next 4 Last 5 Add 6 asked questions Appointment Patient  oply, separate with commas  terol cohemoglobin A1c) I glucose (FBG)	Delete Z Exit  Information Injury or  Weight - Lbs Weight - Oz Weight - Kg Weight - Gm BP - Systolic	Poisoning Continuity of care Diagnosis vital signs Services Disposition Lookback  7. Sodium 8. AST/ALT 9. Basic metabolic panel 10. Comprehensive metabolic panel (CMP)  Allergic Meds Allergic 1 Meds Allergic 2 Meds Allergic 3 Meds Allergic 4 Meds Allergic 5
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Forms Answer Navigate  1 First 2 Prev NHAMCS Frequently  Services  Enter all that ap  1. NONE 2. Lipids/choles 3. HgbA1c (Glyc 4. Fasting blood 5. Creatinine 6. Potassium  Visit Date  Pregnant  Smoke  Diagnosis  Family History - Male - Female	options Help Hide Watch Window  3 Next 4 Last 5 Add 6 asked questions Appointment Patient  oply, separate with commas  terol cohemoglobin A1c) glucose (FBG)  1/1/2011  3 1	Weight - Lbs Weight - Cz Weight - Cz Weight - Cg Weight - Gm BP - Systolic BP - Diastolic Services Health Ed Plan	Poisoning Continuity of care Diagnosis vital signs Services Disposition Lookback  7. Sodium 8. AST/ALT 9. Basic metabolic panel 10. Comprehensive metabolic panel (CMP)  Allergic Meds Allergic 1 Meds Allergic 2 Meds Allergic 3 Meds Allergic 4 Meds Allergic 5 Meds Allergic 6
Forms Answer Navigate  1 First 2 Prev NHAMCS Frequently  Services  Enter all that ap  1. NONE 2. Lipids/choles 3. HgbA1c (Glyc) 4. Fasting blood 5. Creatinine 6. Potassium  Visit Date  Pregnant  Smoke  Diagnosis  Family History - Male - Female  Height - Feet	options Help Hide Watch Window  3 Next 4 Last 5 Add 6 asked questions Appointment Patient  oply, separate with commas  terol cohemoglobin A1c) glucose (FBG)  1/1/2011  3 1	Weight - Lbs Weight - Cz Weight - Cz Weight - Cz Weight - Cm BP - Systolic BP - Diastolic Services Health Ed	Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition   Lookback      7. Sodium
Forms Answer Navigate  1 First 2 Prev NHAMCS Frequently  Services  Enter all that ap  1. NONE 2. Lipids/choles 3. HgbA1c (Glyc 4. Fasting blood 5. Creatinine 6. Potassium  Visit Date  Pregnant  Smoke  Diagnosis  Family History - Male - Female	options Help Hide Watch Window  3 Next 4 Last 5 Add 6 asked questions Appointment Patient  oply, separate with commas  terol cohemoglobin A1c) glucose (FBG)  1/1/2011  3 1	Weight - Lbs Weight - Cz Weight - Cz Weight - Cg Weight - Gm BP - Systolic BP - Diastolic Services Health Ed Plan	Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition   Lookback      7. Sodium
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1 First 2 Prev 3 Next 4 Last 5 Add 6 Delete 7 Exit					
NHAMCS   Frequently asked questions   Appointment   Patient Information   Injury or Poisoning   Continuity of care   Diagnosis   vital signs   Services   Disposition   Lookback					
Health education	ation/counseling				
Enter all that ap	oply, separate with commas				
1. NONE					
	Reduce fat/Cholesterol				
3. Diet/Nutrition-R					
☐ 4. Weight or calor ☐ 5. Exercise	ric reduction				
6. Smoking cessa	ation				
Visit Date	1/1/2011	Weight - Lbs	Allergic		
	17772011	Weight - Oz	_		
Pregnant			Meds Allergic 1		
Smoke	3	Weight - Kg	Meds Allergic 2		
Diagnosis	1	Weight - Gm	Meds Allergic 3		
	_	BP - Systolic	Meds Allergic 4		
Family History		BP - Diastolic	Meds Allergic 5		
- Male	3	Services 1	Meds Allergic 6		
- Female	3	Health Ed	Meds Allergic 7		
	_	Plan	Meds Allergic 8		
Height - Feet		Plan - BP			
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Visit Date	1/1/2011	Weight - Lbs	Allergic	
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<ul><li>2. Nutritionist</li><li>3. Smoking-cess</li></ul>	ation program			
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Visit Date	1/1/2011	Weight - Lbs	Allergic	
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Smoke	3	Weight - Kg	Meds Allergic 2	
Diagnosis	1	Weight - Gm	Meds Allergic 3	
		BP - Systolic	Meds Allergic 4	
Family History		BP - Diastolic	Meds Allergic 5	
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, , , , , , , , , , , , , , , , , , ,						
C 1. Yes			○3. Unknown			
C 2. No						
Visit Date	1/1/2011	Weight - Lbs		Allergic		
Pregnant		Weight - Oz		Meds Allergic 1		
Smoke	3	Weight - Kg		Meds Allergic 2		
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