Evaluation and Management (E/M) Training

Module 3



AMA Disclaimer

CPT° copyright 2011 American Medical Association. All rights reserved.

Fee schedules, relative value units, conversion factors and/or related components are not assigned by the AMA, are not part of CPT°, and the AMA is not recommending their use. The AMA does not directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained herein.

CPT° is a registered trademark of the American Medical Association.

© 2012 AAPC

2480 South 3850 West, Suite B, Salt Lake City, Utah 84120 800-626-CODE (2633), Fax 801-236-2258, www.aapc.com All rights reserved.

CPC * , CPC-H * , CPC-P * , CIRCC * , CPMA * , CPCO $^{™}$, and CPPM $^{™}$ are trademarks of AAPC.



Leveling Evaluation and Management Services: Exam

Determining the Level of Exam

An E/M service's exam component is, as the name implies, the physician's physical examination of the patient. This is the most significant difference between the 1995 and 1997 Documentation Guidelines for Evaluation and Management Services. The 1995 and 1997 Guidelines define differently the specific elements determining the exam level. The primary weakness of the 1995 guidelines is specific acknowledgment of the normal work and documentation of many specialists is not included. The primary weakness of the 1997 guidelines is it requires too many specific documentation elements. Consider your specialty's nature and the typical documentation the physician generates to determine which guidelines set to use. The guidelines most beneficial to the specific encounter should be used for that encounter.

Both 1995 and 1997 guidelines recognize the same body areas, including:

- Head, including the face
- Neck
- Chest, including the breast and axillae
- Abdomen
- Genitalia, groin, and buttocks
- Back, including spine
- Each extremity

Both guidelines recognize the same organ systems, including:

- Constitutional
- Eyes

- Ears, nose, mouth, and throat
- Cardiovascular
- Respiratory
- Gastrointestinal
- Genitourinary
- Musculoskeletal
- Skin
- Neurologic
- Psychiatric
- Hematologic, lymphatic, and immunologic

Both 1995 and 1997 guidelines require the provider to elaborate on abnormal findings and describe unexpected findings. Both guidelines also allow a brief note of "negative" or "normal" to document normal findings or unaffected areas or systems. Most carriers require you to work with either the body areas or organ systems, not both.

Each body area or organ system is inspected for specific findings. Here is a brief explanation of the examination components and some commonly used verbiage in medical record documentation. This list is not all inclusive, but will give you a good understanding of what you might see in a medical record.

Constitutional—Overall appearance of the patient, including development and attention to grooming. Vital signs, such as blood pressure, pulse rate and regularity, respiration, temperature, height, weight, etc., are included in constitutional.

Sample documentation:

- □ VS (vital signs) T (temperature) 100.1, BP (blood pressure) 122/78, RR (respiratory rate) 20, P (pulse) 88 & regular.
- □ BP 130/80, RR18, HR104, Ht 72, Wt 228.4, BMI 30.97
- ☐ In no acute distress, pleasant

Head, including the face—The head is checked for swelling and lumps. The face is checked for abnormalities such as coloring of the skin, asymmetry of the face, etc. Sample documentation:

- ☐ Head is NCAT (normocephalic and atraumatic).
- □ Normocephalic, atraumatic

Skin—Skin is checked for lesions, rashes, temperature, and moisture. Hair and nails are checked for abnormalities.

Sample documentation:

- □ Face is flushed, moist with hair damp.
- □ Skin is warm and dry without any rashes.
- □ Normal, no rash.

Eyes—Inspection of the conjunctivae and lids. An ophthalmoscope may be used to examine the optic discs and posterior segments of the eye. Sclera are checked for jaundice.

Sample documentation:

- □ PERRLA (Pupils Equal Round Reactive to Light and Accommodation). Sclera white, conjunctivae pink.
- ☐ EYES: PERRL, no conjunctival erythema.

Ears, nose, mouth, and throat (ENMT)—The nose and ears are checked for external appearance, scars, lesions, or masses. The nasal mucosa, septum, and turbinates are checked for swelling and redness. The mouth and pharynx are checked for abnormality.

Sample documentation:

- ☐ TMs (tympanic membranes) gray with normal light reflex, EAC (external auditory canal) clear. Nasal mucosa pink, septum midline, no sinus tenderness. Oral mucosa pink, dentition good, pharynx without exudate.
- □ Clear oropharynx, mucus membranes moist.
- □ EARS: tympanic membranes normal; NOSE: no sinus tenderness, turbinates normal; THROAT: pharynx and tonsils normal.

Neck—Neck is checked for lumps and swelling.

Sample documentation:

- □ Supple, no masses
- □ Neck is supple (bends easily), no carotid bruits; no thyromegaly (enlarged thyroid); JVD (jugular venous distention) normal

Chest/respiratory—Observation of rate, rhythm, depth and effort of breathing, observing the chest for asymmetry and tenderness. Listening (auscultation) to breath sounds.

Sample documentation:

- Lungs clear bilaterally
- □ Normal respiratory effort; lungs clear to auscultation
- ☐ Clear to auscultation bilaterally, no wheezes, rhonchi, rales

Breast and axilla—The breasts are checked for asymmetry, tenderness, lumps, and/or discharge. The axillae are palpated for masses.

Sample documentation:

Breasts symmetrical without masses.
 Nipples without discharge. No LAD (lymphadenopathy).

Cardiovascular—Palpation of heart, auscultation of the heart with notation of abnormal sounds and murmurs, examination of carotid arteries,

abdominal aorta, femoral arteries, pedal pulses, and extremities for edema and/or varicosities.

Sample documentation:

- □ NSR (normal sinus rhythm), murmur or gallop
- □ Normal S1, S2, no murmur or gallop; RRR (regular rate and rhythm)
- □ Normal SI, S2; no audible murmurs, rubs, or gallops
- □ Normal S1, S2, regular rate and rhythm, no murmurs.

Abdomen/GI—The abdomen is checked for tenderness and masses. Palpation is used to check the size of liver and spleen. Auscultation is used to listen to bowel sounds, bruits, or rubs.

Sample documentation:

- + BS (positive bowel sounds), decreased; no masses. Generalized tenderness in lower quad, R>L
- □ +BS, soft, no masses; bilateral tenderness in lower quadrants. Negative rebound, 1+/4 guarding.
- □ Soft, non-tender, non-distended, NABS (normal active bowel sounds); no hepatosplenomegaly.
- □ No HSM (hepatosplenomegaly), no masses palpated.

Genitalia, groin, and buttocks/GU—The male genitalia is checked for abnormalities, lesions, tenderness, lumps, etc. The prostate is checked for swelling or tenderness. The female genitalia is checked for abnormalities, lesions, tenderness, discharge, etc. The anus is checked for lesions or tenderness.

Sample documentation, female:

□ Foul discharge in os, yellow, copious. No masses; uterine motion tenderness 3+/4+. Adnexa—no masses, 3+/4+ tenderness.

Sample documentation, male:

- No penile discharge or lesions, no scrotal swelling, no inguinal or femoral hernia.
 Prostate smooth and nontender.
- □ Sphincter tone good, normal prostate, heme negative
- □ CVAT (costovertebral angle tenderness

Musculoskeletal/back, including spine/Each extremity—Extremities are checked for range of motion, strength, and tone. The spine is checked for deformities or abnormalities in curvature.

Sample documentation:

- ☐ Strength and tone are grossly normal to the upper and lower extremities. Good ROM (range of motion) in all joints. No evidence of swelling or deformity.
- □ She has full range of motion of the wrists to bilateral upper extremities. She is mildly tender along the left radius, into the radial head and ulna. However, she can supinate, pronate, flex and extend her arm with assistance. No pain into the left shoulder with full range of motion of that shoulder.

Neurologic—Sensation, Cranial Nerves, Deep Tendon Reflexes (DTRs) with notation of pathological reflexes are checked.

Sample documentation:

- □ No focal neurologic deficit, weakness, paresthesias, or incoordination.
- □ CN II-XII (cranial nerves 2–12) intact, no major motor or sensory deficits.

Psychiatric—The patient's mental status, level of consciousness, mood, and affect are checked along with remote and recent memory.

Sample documentation:

- □ Alert and oriented x 3. Thought processes are coherent, insight is good.
- □ Affect normal.

Note: Some templates and EMRs will label a body area but by what is documented in the exam it can be counted as an organ system. For example, if the provider documents that the "abdomen is soft and non tender, positive bowel sounds and no organomegaly" the documentation would support a GI system exam. You would not count it as both a system and a body area. You would count it as a body area or an organ system. This becomes important for comprehensive exams but would not matter for problem focused, expanded problem focused, or detailed.

The 1995 and 1997 guidelines define the four levels of exam (problem focused, expanded problem focused, detailed, and comprehensive) differently. 1995 is based on limited vs. extended exam of body areas and organ systems. 1997 has 11 different exams to choose from (one general multisystem and 10 single system specialty exams). Each exam has a set of bulleted items specific to that exam.

Exam	1995	1997 General Multi-system
Problem focused	Exam of affected body area	Limited exam (1-5 bulleted elements)
Expanded problem focused	Limited exam of 2-7 systems/ areas	Limited exam (6-11 bulleted elements)
Detailed	Extended exam of 2-7 systems/areas	Detailed exam (at least 12 bulleted elements)
Comprehensive	Complete exam of 8 or more organ systems OR complete single organ system (criteria not specified)	9 organ systems with at least 2 bulleted elements from each one (for a total of 18 elements).

"Gray Areas" in the 1995 Documentation Guidelines

The 1995 guidelines, although generally clear, contain two gray areas complicating your ability to determine the exam level:

- □ An expanded problem focused exam and a detailed exam both require examination of at least two body areas and/or organ systems; the expanded problem focused level requires that these exams are "limited," whereas the detailed level requires that these exams are "extended." The terms limited and extended are not defined specifically.
- ☐ The definition of a comprehensive single system exam is defined only as "complete." The term complete is not defined specifically.

The 1997 guidelines eliminate this subjectivity by exactly specifying—using bulleted items—the exam requirement for a particular body area or organ system. These requirements provide objective criteria against which to measure physician documentation.

General Multi-System Examination

System/Body Area	Elements of Examination
Constitutional	 Measurement of any three of the following seven vital signs: 1) sitting or standing blood pressure, 2) supine blood pressure, 3) pulse rate and regularity, 4) respiration, 5) temperature, 6) height, 7) weight (May be measured and recorded by ancillary staff) General appearance of patient (eg, development, nutrition, body habitus, deformities, attention to grooming)
Eyes	 Inspection of conjunctivae and lids Examination of pupils and irises (eg, reaction to light and accommodation, size and symmetry) Ophthalmoscopic examination of optic discs (eg, size, C/D ratio, appearance) and posterior segments (eg, vessel changes, exudates, hemorrhages)
Ears, Nose, Mouth and Throat	 External inspection of ears and nose (eg, overall appearance, scars, lesions, masses) Otoscopic examination of external auditory canals and tympanic membranes Assessment of hearing (eg, whispered voice, finger rub, tuning fork) Inspection of nasal mucosa, septum and turbinates Inspection of lips, teeth and gums Examination of oropharynx: oral mucosa, salivary glands, hard and soft palates, tongue, tonsils and posterior pharynx
Neck	 Examination of neck (eg, masses, overall appearance, symmetry, tracheal position, crepitus) Examination of thyroid (eg, enlargement, tenderness, mass)

System/Body Area	Elements of Examination					
Respiratory	Assessment of respiratory effort (eg, intercostal retractions, use of accessory muscles, diaphragmatic movement)					
	Percussion of chest (eg, dullness, flatness, hyperresonance)					
	Palpation of chest (eg, tactile fremitus)					
	Auscultation of lungs (eg, breath sounds, adventitious sounds, rubs)					
Cardiovascular	Palpation of heart (eg, location, size, thrills)					
	Auscultation of heart with notation of abnormal sounds and murmurs					
	Examination of:					
	carotid arteries (eg, pulse amplitude, bruits)					
	abdominal aorta (eg, size, bruits)					
	femoral arteries (eg, pulse amplitude, bruits)					
	pedal pulses (eg, pulse amplitude)					
	extremities for edema and/or varicosities					
Chest (Breasts)	Inspection of breasts (eg, symmetry, nipple discharge)					
	Palpation of breasts and axillae (eg, masses or lumps, tenderness)					
Gastrointestinal	Examination of abdomen with notation of presence of masses or tenderness					
(Abdomen)	Examination of liver and spleen					
	Examination for presence or absence of hernia					
	Examination (when indicated) of anus, perineum and rectum, including sphincter tone, presence of hemorrhoids, rectal masses					
	Obtain stool sample for occult blood test when indicated					

System/Body Area	Elements of Examination					
Genitourinary	MALE:					
	Examination of the scrotal contents (eg, hydrocele, spermatocele, tenderness of cord, testicular mass)					
	Examination of the penis					
	Digital rectal examination of prostate gland (eg, size, symmetry, nodularity, tenderness)					
	FEMALE:					
	Pelvic examination (with or without specimen collection for smears and cultures), including					
	• Examination of external genitalia (eg, general appearance, hair distribution, lesions) and vagina (eg, general appearance, estrogen effect, discharge, lesions, pelvic support, cystocele, rectocele)					
	Examination of urethra (eg, masses, tenderness, scarring)					
	• Examination of bladder (eg, fullness, masses, tenderness)					
	Cervix (eg, general appearance, lesions, discharge)					
	Uterus (eg, size, contour, position, mobility, tenderness, consistency, descent or support)					
	Adnexa/parametria (eg, masses, tenderness, organomegaly, nodularity)					
Lymphatic	Palpation of lymph nodes in two or more areas:					
	• Neck					
	• Axillae					
	• Groin					
	• Other					

System/Body Area	Elements of Examination
Musculoskeletal	Examination of gait and station
	Inspection and/or palpation of digits and nails (eg, clubbing, cyanosis, inflammatory conditions, petechiae, ischemia, infections, nodes)
	Examination of joints, bones and muscles of one or more of the following six areas: 1) head and neck; 2) spine, ribs and pelvis; 3) right upper extremity; 4) left upper extremity; 5) right lower extremity; and 6) left lower extremity. The examination of a given area includes:
	Inspection and/or palpation with notation of presence of any misalignment, asymmetry, crepitation, defects, tenderness, masses, effusions
	Assessment of range of motion with notation of any pain, crepitation or contracture
	Assessment of stability with notation of any dislocation (luxation), subluxation or laxity
	Assessment of muscle strength and tone (eg, flaccid, cog wheel, spastic) with notation of any atrophy or abnormal movements
Skin	Inspection of skin and subcutaneous tissue (eg, rashes, lesions, ulcers)
	Palpation of skin and subcutaneous tissue (eg, induration, subcutaneous nodules, tightening)
Neurologic	Test cranial nerves with notation of any deficits
	Examination of deep tendon reflexes with notation of pathological reflexes (eg, Babinski)
	Examination of sensation (eg, by touch, pin, vibration, proprioception)
Psychiatric	Description of patient's judgment and insight
	Brief assessment of mental status including:
	orientation to time, place and person
	recent and remote memory
	mood and affect (eg, depression, anxiety, agitation)

When using 1997 guidelines, the physician may select from the general multi-system exam or any one of the 10 single organ system exams. The coder must review each documented element to determine which single-organ system exam is the most appropriate 1997 E/M single-organ system exam to use.

Physicians should focus on the medical necessity of an exam, and should never document "just one more bullet" to achieve a higher service level. "The type (general multi-system or single organ system) and content of examination are selected by the examining physician and are based upon clinical judgment, the patient's history, and the nature of the presenting problem(s)," according to the 1997 guidelines. For instance, it might be considered necessary to perform a comprehensive exam when a new patient presents, but medically unnecessary to repeat a complete review on every follow up.

Documentation Dissection: Hospital Admit Exam

Physical examination:

Patient is a healthy white female in mild distress, crying quietly, sitting slumped over in bed. 1

VS- 19:00 – T: 102.1; BP : 118/70; p: 92; RR: 24

Skin: Face is flushed, 3 moist with hair damp.

HEENT: Nose 4 & throat clear 5

Neck: Supple, no masses 6

Lungs: Clear bilaterally 7

Cardiac: Normal S1, S2, 8 no murmur or gallop; RRR 9

- Constitutional: General appearance of patient.
- 2 Constitutional: Measurement of three vitals.
- 3 Skin: Inspection of skin and subcutaneous tissue.
- 4 ENMT: External inspection of ears and nose.
- **5** ENMT: Examination of oropharynx.
- 6 Neck: Examination of neck.
- **7** Respiratory: auscultation of lungs.
- 8 Cardiovascular: Palpation of heart.
- 9 Cardiovascular: Auscultation of heart.

Abdomen: +BS, soft, no masses; bilateral tenderness in lower quadrants. Negative rebound, 1+/4 guarding. 10 - CVAT 11

Pelvic: Foul discharge in os, yellow, copious discharge. 12 No masses; uterine motion tenderness 3+/4+. 13

Extremities: normal gait 14

- Gastrointestinal: Examination of abdomen.
- CVAT stands for constovertebral tenderness. This is examination of the kidneys. For 1995 guidelines, this would be counted for genitourinary. 1997 does not have a bulleted element to address examination of the kidneys.
- Genitourinary: Examination of external genitalia and vagina.
- 13 Genitourinary: Examination of uterus.
- 14 Musculoskeletal: Examination of gait and station.

Table B1: Exam 1995

1995 Examination					
Body Areas:	1 body area or	2–7 systems—	2–7 systems—	8 or more systems	
Neck	organ system	limited exam	extended exam		
Organ Systems:					
Constitutional, Skin,					
ENMT, Respiratory,					
Cardiovascular,					
Gastrointestinal,					
Genitourinary,					
Musculoskeletal					
Exam Level	Problem Focused	Expanded	Detailed	Comprehensive	
		Problem Focused			

There are eight organ systems examined in our example, which is considered a Comprehensive Exam.

Table B2: Exam 1997

1997 General Multi-System Examination					
Bulleted items	Limited exam (1–5 bulleted elements)	Limited exam (6–11 bulleted elements)	Detailed exam (at least 12 bulleted elements)	9 organ systems with at least 2 bulleted elements from each one (for a total of 18 elements)	
Exam Level	Problem Focused	Expanded Problem Focused	Detailed	Comprehensive	

There are 13 bulleted elements in our example; however, there are not 2 bulleted elements in 9 organ systems. This makes the 1997 exam level detailed.

Because it is more advantageous, this note will be leveled using the 1995 documentation guidelines.

Documentation Dissection: Consultation Exam

PHYSICAL EXAM:

VITAL SIGNS: PULSE: 40 Right Radial, Regular, BP: 150/90 Left Arm Sitting, HEIGHT: 6ft5in, VS-WE1GHT: 234lbs8oz, BMI: 27.8

General: Alert and oriented x3. No acute distress 2

HEENT: Normocephalic, 3 clear oropharynx, mucus membranes moist 4

Neck: Supple; 5 no carotid bruits; 6 no thyromegaly; 7 JVD normal 8

Chest: Normal respiratory effort; 9 lungs clear to auscultation 10

CV: Normal SI, S2; 11 no audible murmurs, rubs, or gallops 12

Abdomen: Soft, non-tender, non-distended, NABS; 13 no hepatosplenomegaly 14

EXT: Warm, well perfused, 15 no cyanosis, 16 no LE edema 17

Neuro: CN II-XII intact, no major motor or sensory deficits 18

- Constitutional: Measurement of three vital signs.
- 2 Psychiatric: Orient to time, place and person, mood and affect.
- 3 Head, including face (1995 only).
- 4 ENMT: Inspection of oropharynx.
- 5 Neck: Examination of neck.
- 6 Cardiovascular: Examination of carotid arteries.
- 7 Neck: Examination of thyroid.
- 8 Cardiovascular: Examination of carotid arteries.
- 9 Respiratory: Assessment of respiratory effort.
- 10 Respiratory: Auscultation of lungs.
- Cardiovascular: Palpation of heart.

- 12 Cardiovascular: Auscultation of heart.
- 13 Gastrointestinal: Examination of abdomen.
- Gastrointestinal: Examination of liver and spleen.
- 15 Skin: Palpation of skin and subcutaneous tissue
- Musculoskeletal: Inspection and/or palpation of digits and nails.
- 17 Cardiovascular: Extremities for edema.
- 18 Neurologic: Test Cranial Nerves.

Table B1: Exam 1995

1995 Examination				
Body Areas: Head, including face, Neck	1 body area or organ system	2–7 systems— limited exam	2–7 systems— extended exam	8 or more systems
Organ Systems: Constitutional, ENMT, Cardiovascular, Respiratory, Gastrointestinal, Skin, Musculoskeletal, Psychiatric, Neurologic				
Exam Level	Problem Focused	Expanded Problem Focused	Detailed	Comprehensive

There are 9 organ systems examined in our example, which is considered a Comprehensive Exam.

Table B2: Exam 1997

1997 General Multi-System Examination					
Bulleted items	Limited exam (1–5 bulleted elements)	Limited exam (6–11 bulleted elements)	Detailed exam (at least 12 bulleted elements)	9 organ systems with at least 2 bulleted elements from each one (for a total of 18 elements)	
Exam Level	Problem Focused	Expanded Problem Focused	Detailed	Comprehensive	

There are 17 bulleted elements in our example (not including head); however, there are not 2 bulleted elements in 9 organ systems (only 4 systems have two bullets). This makes the 1997 exam level detailed.

Because it is more advantageous, this note will be leveled using the 1995 documentation guidelines.

Documentation Dissection: Emergency Department Exam

PHYSICAL EXAMINATION

This is a 19-year-old female who appears in no acute distress. 1 Temperature 97.1, heart rate is 89, blood pressure 116/64, respirations are 20, she is 99% on room air. 2 She is awake, alert and oriented x3. 3 Her head is atraumatic, normocephalic. 4 Pupils are equally reactive to light. Extraocular motions are intact. 5 Her neck is supple. 6 Chest wall is nontender. 7 Heart is a regular rate and rhythm 8 Lungs: Clear to auscultation bilaterally. 9 Abdomen is soft, nondistended, nontender, no guarding, mass or rebound. 10

Skin is warm and dry, 11 without any rashes. 12 She has full range of motion of the wrists to bilateral upper extremities. She is mildly tender along the left radius, into the radial head and ulna. However, she can supinate, pronate, flex and extend her arm with assistance. No pain into the left shoulder with full range of motion of that shoulder. 13

- 1 Constitutional: General appearance of patient.
- 2 Constitutional: Measurement of three vitals.
- 3 Psychiatric: Brief assessment of mental status.
- 4 Head, including face (1995 only).
- 5 Eyes: Examination of pupils and irises.
- 6 Neck: Examination of neck.
- 7 Respiratory: Palpation of chest.

- 8 Cardiovascular: Auscultation of heart.
- 9 Respiratory: Auscultation of lungs.
- 1995—Body Area—Abdomen. 1997—Gastrointestinal: Examination of abdomen.
- Skin: Palpation of skin.
- Skin: Examination of skin.
- 13 Musculoskeletal: Left Upper Extremity.

Table B1: Exam 1995

1995 Examination				
Body Areas: Head, including face, Neck, Abdomen	1 body area or organ system	2–7 systems— limited exam	2–7 systems— extended exam	8 or more systems
Organ Systems: Constitutional, Psychiatric, Eyes, Respiratory, Cardiovascular, Skin, Musculoskeletal				
Exam Level	Problem Focused	Expanded Problem Focused	Detailed	Comprehensive

There are seven organ systems examined in our example making the determining factor the amount of detail. This is one of the grey areas of the 1995 documentation guidelines. An expanded problem focused exam would appear to be a cursory exam while a detailed exam should be expected to be more explanatory. A good rule of thumb is to make sure at least 2 body systems or body areas have at least 2 elements documented. Keep in mind, each carrier has their own interpretation of limited versus detailed. Some carriers require specifics, such as Novitas-Solutions, which follows a 4 x 4 rule (at least 4 elements in 4 body systems or 4 body areas must be documented).

Table B2: Exam 1997

1997 General Multi-System Examination					
Bulleted items	Limited exam (1-5 bulleted elements)	Limited exam (6-11 bulleted elements)	Detailed exam (at least 12 bulleted elements)	9 organ systems with at least 2 bulleted elements from each one (for a total of 18 elements)	
Exam Level	Problem Focused	Expanded Problem Focused	Detailed	Comprehensive	

There are 13 bulleted elements in our example; however, there are not two bulleted elements in nine organ systems. This makes the 1997 exam level detailed.

The level of the exam is the same using either the 1995 or 1997 guidelines.