Chapter 6
Content of the Patient Record: Inpatient, Outpatient, and Physician Office

EXERCISE 6-1 General Documentation Issues
1. T
2. T
3. T
4. F

EXERCISE 6-2 Hospital Inpatient Record—Administrative Data
Matching
1. C
2. I
3. F
4. I
5. C
6. I

True/False
7. T
8. F
9. F
10. F
11. T

EXERCISE 6-3 Hospital Inpatient Record—Clinical Data
1. clinical resume, course of treatment
2. history, history of the present illness
3. 30 days, interval history
4. physicians orders, doctors’ orders
5. standing, routine
6. ambulance report
7. examining the patient, advice
8. integrated progress notes, same section
9. progress notes, PACU (or recovery room)
10. operative report
11. tissue or pathology report
12. ancillary reports
13. nursing care plan
14. postpartum record
15. macroscopic, autopsy

EXERCISE 6-4 Hospital Outpatient Records
True/False
1. F
2. F
3. T
4. T
5. T

Fill-In-The-Blank
6. Uniform Ambulatory Care Data Set
7. encounter
8. first-listed diagnosis
9. outpatient visits
10. ancillary service visit or occasion of service

EXERCISE 6-5 Physician Office Record
1. D
2. C
3. A
4. E
5. B

EXERCISE 6-6 Forms Control and Design
1. T
2. F
3. T
4. F
5. T