

Reason for Visit: (age) _____ Date: _____

Referred for Colonoscopy Bleeding Anal Pain Itching

Modifying factors:

Timing:

Location:

Duration:

Severity:

ANAL: Pain / Itch: _____

NONE Monthly Weekly Daily

Streak/ Tsp/ Tbsp / Cup

BLEEDING: NO YES: Separate/ On Stool/ In Stool
Bright Red/ Burgundy

Asymptomatic

Nausea Vomit Heartburn Abd. Pain Const Diarrhea Melena Wt. Loss Fever Chills Sweats

Y N Y N Y N Y N Y N Y N Y N Y N Y N Y N Y N

Stool / Day: _____ : Hard Soft Medium Loose Varies
Change in Caliber? Y N
Sit? Strain? Read? Y N
Problem with Control of B.M.? Y N
Taking anything to help B.M.? Y N _____

Prior Exams:

Sigmoid: Y N

BE: Y N

Colon: Y N

Social Hx:

Family History:

None

Mother Father

Brother Sister

Grandmother Grandfather

Aunt Uncle

Age Onset: _____

Exam:

BP _____ HR _____ RR _____ WT _____ T: _____

NAD: Y N Alert: Y N Oriented x 4: Y N WNW: Y N V

Abdomen: Soft Non-Tender No Masses No Hepato/Splenomegaly No Hernia No Nodes

Rectal: Deferred: Guarded/Painful

Digital: Nontender: Tender _____

Tone: Good Fair Poor

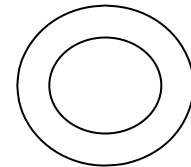
Squeeze: Appropriate Other:

Masses: No PPM Prostate WNL Other:

Anoscopy: Anoderm: WNL
Hemorrhoids: Gr I: Gr II: Gr III: Gr IV:

Comfort: Tol Well: NAD Abd. Soft
Assisted by: J V L R M

| Inspection |
|------------------------------|
| - WNL |
| - Non Inflamm. Int/Ext Hem |
| - Inflamm. Int/Ext Hem |
| - Fissure: Acute Chronic |
| - Fistula-in-ano |
| - Excoriation: 1 2 3 Candida |



Flexible Sigm: Extent: _____ cm. Exam to tolerance

No polypoid, mucosal abnormality

No evidence of bleeding or mucous

Other : _____

Impression : _____

Recommendation: _____

Educational Material Given / Program Initiated :

Fiber Therapy: Meta Citrucel

Fissure: Lido NTG

Hem: RBL Cream Supp

Hem:Non Op Cream Compress

Hem: Surgery Cream Supp Compress

Pruritus Ani Tucks Moisture=Itch Lotrisone

Abscess/Fistula Educational Consent Process

Pilonidal Cyst Education Consent Process

Discussed Surgery: Post op instructions

Colonoscopy Educational Form Discussed:

Major Bowel Surgery: Educational Consent Process

- CXR

- C.T. Scan , PET, Rectal U/S

- CEA, CBC, SMA12, PT, PTT

- Refer Cardiology Clearance:

RTC _____ Weeks---Re-eval & Flex Sigmoid

RTC PRN Symptoms Persist

Obtain Old Record

Review Labs, X-rays

ACBE: Virtual Colon

Stool Cards and Instructions Given: