

## Sample Clinical Documentation Query Templates

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These sample physician query documents are offered solely as examples of standardized physician queries to clarify clinical documentation within the medical record. These query documents were created based on our interpretation of guidelines and may be used by healthcare facilities at their own discretion.

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**Recommendations for use:** These query templates are designed for use as Word documents or e-messages and the content is to be edited and customized for the specific findings in each record. Suggested indicators not present in a particular case and/or multiple choice response options not supported by indicators (e.g., acute heart failure with only chronic indicators) should be deleted prior to submission to the provider. Content within brackets should be completed and deleted. Titles of each template are for reference only and should not appear on queries submitted to providers.

## Acute Kidney Injury

Documentation in the medical record indicates that this patient has been admitted with or diagnosed as having \_\_\_\_\_ .

The following lab is also documented in the medical record: [include criteria that apply]

- Creatinine on admission =
- Baseline Creatinine (if known):
- Correction of serum creatinine from \_\_\_\_\_ to \_\_\_\_\_ following rehydration
- Urine output :

Based on your medical judgment, can you please clarify in the progress notes the **diagnosis associated with these findings** such as:

- Acute Kidney Injury
- Acute on Chronic Renal Failure
- Chronic Kidney Disease (Stage, if known)
- Other (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Acute Tubular Necrosis (ATN)**

Documentation in the medical record indicates that this patient has been admitted with or diagnosed as having **ACUTE KIDNEY INJURY**. The following is also documented in the medical record:

- Creatinine levels [list all and dates]
- FENa =
- Urine sodium concentration =
- Urine output of \_\_\_\_\_ over \_\_\_\_ hours
- IV contrast
- Medication [if potentially neurotoxic]:
- Other:

Based on your medical judgment, can you further clarify in the progress notes **confirmed or suspected underlying cause** for this patient's condition such as:

- Acute Tubular Necrosis
- Acute Cortical Necrosis
- Acute Glomerulonephritis
- Pre-Renal Acute Kidney Injury
- Other condition: (please specify)
- None of the above /Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Acute Blood Loss Anemia**

Documentation in the medical record indicates the following:

- Diagnosis of Anemia [include type]
- Drop in Hct/Hgb from      to
- Blood transfusion of xxx units
- GI Bleeding [or other hemorrhage]
- Other:

Based on your medical judgment, can you further clarify in the progress notes the diagnosis associated with these findings such as:

- Acute blood loss anemia
- Acute hemorrhagic anemia
- Chronic blood loss anemia
- Acute on chronic blood loss anemia
- Iron deficiency anemia
- Other anemia: (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

**BMI < 19**

Documentation in the medical record indicates that this patient has a:

**BMI =**

The following is also documented in the medical record [if pertinent to below diagnoses]:

Based on your medical judgment, can you further clarify in the progress notes the diagnosis associated with these findings such as:

- Underweight
- Cachexia
- Emaciation
- Malnutrition
- Undernutrition
- Anorexia
- Other condition (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

**BMI > 40**

Documentation in the medical record indicates that this patient has:

**BMI =**

The following is also documented in the medical record [if pertinent to below diagnoses]:

Based on your medical judgment, can you further clarify in the progress notes the diagnosis associated with these findings in the progress notes such as:

- Overweight
- Obesity
- Morbid obesity
- Other condition (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Chest Pain**

Based on the documentation in the medical record, this patient was admitted with **CHEST PAIN**.

Other information in the medical records includes:

Based on your medical judgment, can you further clarify in the progress notes the **most likely or suspected underlying cause** for this condition such as [include only those that may apply]:

- Coronary artery disease
- GERD/reflux
- Esophagitis or esophageal spasm
- Pleurisy
- Costochondritis
- Chest wall / musculoskeletal pain
- Gastritis
- Hiatal hernia
- Anxiety
- Hyperventilation syndrome
- Biliary colic
- Peptic Ulcer
- Other cause (please specify)
- None of the above / not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **CKD Stage**

Based on the clinical information documented in the medical record, this patient has been diagnosed with **Chronic Kidney Disease / CKD**.

Documentation in the medical record also indicates:

- GFR =

Based on your medical judgment, can you further clarify in the progress notes the appropriate **stage of CKD**?

National Kidney Foundation stages of Chronic Kidney Disease (CKD):

Stage 1: GFR > 90

Stage 2: GFR 60-89

Stage 3: GFR 30-59

Stage 4: GFR 15-29

Stage 5: GFR < 15

ESRD: Need for dialysis

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Debridement – Excisional**

Based on the documentation in the medical record, this patient has undergone **WOUND CARE** and/or **WOUND DEBRIDEMENT**.

Based on your medical judgment, can you further clarify in the progress notes the **type of wound debridement**:

- **Excisional** debridement (use of a scalpel/blade to cut away tissue)
- **Non-excisional** debridement (chemical, scrubbing, trimming with scissors)
- Other debridement (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Demand Ischemia with Elevated Troponins (Type 2 MI)**

Documentation in the medical record indicates that this patient has been admitted with or diagnosed as having \_\_\_\_\_.

The following is also documented in the medical record [**include only those that apply**]:

- Serial troponin levels [list all] =
- Associated conditions: [include potential causes, e.g., severe anemia, sepsis, hypotension or shock, rapid tachycardia, hypertensive crisis]
- Treatment: [any treatment or management of associated conditions]
- EKG showing:
- History of CAD or MI

Based on your medical judgment, can you further clarify **in the progress notes** which, if any, of the following this condition is intended to indicate:

- Type 2 MI
- Type 1 MI (NSTEMI)
- Demand ischemia only
- Unstable angina
- Other, please specify:
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## Depression

Documentation in the medical record indicates that this patient has been admitted with or diagnosed as having DEPRESSION.

The following is also documented in the medical record:

- Psychiatric consult
- Medication change from \_\_\_\_\_ to \_\_\_\_\_
- Symptoms:
- Behavior:
- Other:

Based on your medical judgment, can you further clarify in the progress notes the status of this patient's DEPRESSION:

Type and Severity:

- Major (MDD)
- Simple
- Situational
- Endogenous
- Bipolar
  
- Mild
- Moderate
- Severe
  
- Other (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Encephalopathy – Altered Mental Status**

Documentation in the medical record indicates that this patient has been diagnosed as having the symptom of **ALTERED MENTAL STATUS**. Additional findings also documented in the medical record: [include all that apply]

- Fever of \_\_\_\_\_
- Infection: [type]
- Dehydration
- Electrolyte Imbalance:
- Sepsis
- Hypoxemia
- Renal / Hepatic Failure
- Drug toxicity or adverse effect:
- Abnormal lab tests:
- Other findings:

Based on your medical judgment, can you further clarify in the progress notes if these findings associated with altered mental status are due to a definite or suspected **underlying neurologic cause** such as:

- Metabolic Encephalopathy
- Toxic Encephalopathy
- Altered mental status without encephalopathy
- Other condition (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## Encephalopathy vs. Delirium

Documentation in the medical record indicates that this patient has been diagnosed as having the symptom of **DELIRIUM**. Additional findings also documented in the medical record: [include all that apply]

- Fever of \_\_\_\_\_
- Infection: [type]
- Dehydration
- Electrolyte Imbalance:
- Sepsis
- Hypoxemia
- Renal / Hepatic Failure
- Drug toxicity or adverse effect:
- Abnormal lab tests:
- Other findings:

Based on your medical judgment, can you further clarify in the progress notes if any of the follow are a definite or suspected **cause of delirium**:

- Metabolic Encephalopathy
- Toxic Encephalopathy
- An underlying psychiatric disorder (please specify)
- Another condition (please specify)
- Delirium without an underlying cause
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## Functional Quadriplegia

Documentation in the medical record indicates that this patient has been admitted with with or diagnosed as having \_\_\_\_\_

Additional findings also documented in the medical record [include all that apply]:

- Severe dementia
- Total care
- Feeding tube
- Activity Level: Bedfast
- Extreme/severe neurologic deficits
- Urinary/bowel incontinence
- Flexion contractures
- Mobility Level: Completely immobile, or very limited
- Other severe disability condition:

Based on your medical judgment, can you please provide in the progress notes **one or more diagnoses (if any)** associated with the above findings:

- Functional Quadriplegia
- Coma
- Quadriparesis
- Dementia only
- Severe debility only
- Paralysis
- Other condition (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## GI Bleeding

Documentation in the medical record indicates that this patient has been identified to have and/or is being treated for **GI BLEEDING**.

Other information in the medical record includes:

- EGD report:
- Colonoscopy report:
- Other:

Based on your medical judgment, can you please document in the progress notes the **confirmed or suspected underlying cause** of these findings such as

[include only those that may apply]:

- Esophageal varices
- Esophageal ulcer or tear
- Esophagitis
- Gastritis
- Gastric ulcer or erosion
- Peptic ulcer disease
- Inflammatory bowel disease  
(ulcerative colitis or Crohn's)
- Polyps (gastric, colon, duodenal, etc.)
- Diverticulosis w or w/o diverticulitis
- Hemorrhoids
- Arteriovenous malformations (AVM)
- Other condition (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Heart Failure – Specify Type**

Documentation in the medical record indicates that this patient is being treated for **HEART FAILURE**.

- Echocardiogram reports EF =
- Other documentation and findings include:

Based on your medical judgment, can you further clarify in the progress notes the **Type** of the patient's heart failure/dysfunction for this admission such as:

- Systolic
- Diastolic
- Combined systolic/diastolic
- Other (please specify)
- None of the above / Not Applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Heart Failure – Specify Type & Acuity**

Documentation in the medical record indicates that this patient is being treated for **HEART FAILURE**.

- Echocardiogram reports EF =
- IV medications:
- CXR findings:
- BNP:
- Other documentation and findings include:

Based on your medical judgment, can you further clarify in the progress notes **both** of the following:

**Type** of heart failure:

- Systolic
- Diastolic
- Combined systolic/diastolic
- Other (please specify)
- None of the above / Not applicable

**- AND -**

**Severity** of heart failure

- Acute, exacerbation, or decompensation
- Chronic
- Acute on chronic
- Other (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

## **HIV / AIDS**

Documentation in the medical record indicates the patient has **HIV or HIV+**

The CDC case definition of **AIDS (HIV disease)** is an HIV positive patient with any one of the following:

- Current or prior diagnosis of an AIDS-defining condition, or
- Current or prior CD4+ lymphocyte count < 200 cells.cm<sup>3</sup>

Documentation in the medical record includes the following:

Prior [or current] diagnosis of [any AIDS-defining conditions]. Dates and location:

Prior [or current] CD4+ lymphocyte count = \_\_\_\_ Date and location [where <200]:

Based on your medical judgment, can you further clarify in the progress notes whether this patient has:

- HIV positive status only / HIV infection without AIDS, or
- HIV disease (AIDS)
- Another condition (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Hypertensive Urgency / Emergency**

Documentation in the medical record indicates that this patient has been admitted with or diagnosed as having:

The following is also documented in the medical record:

- SBP > 180 [indicate actual SBPs]
- DBP > 120 [indicate actual DBPs]
- End organ involvement: [indicate any associated cardiac, neurologic, renal involvement]
- Treatment:

Based on your medical judgment, can you further clarify in the progress notes the **diagnosis related to these findings** such as:

- Hypertensive urgency
- Hypertensive emergency
- Hypertensive crisis
- Hypertension only
- Other (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

**Malnutrition**

The following information is documented in the medical record regarding this patient's nutritional status [include only those that apply]:

- BMI < 19 (include actual BMI)
- Albumin and/or Prealbumin (if low and not explained by other circumstances)
- Risk Factors: [examples: cancer, chemotherapy, alcoholism, GI disorders, etc.]
- Weight < 90% of ideal body weight [indicate actual]
- Weight < 95% of usual body weight [indicate actual]
- Unintended weight loss of:
- “Recent weight loss of \_\_\_\_\_ pounds over \_\_\_\_\_ months”
- Nutrition Consult:
- Nutritional Supplementation:

Based on your medical judgment, can you further clarify in the progress notes which, if any, of the following conditions may be causing these findings:

- Malnutrition (please specify severity, if known: mild, moderate, severe)
- Weight loss only
- Underweight only
- Nutritional deficiency (please specify)
- Another cause (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Malnutrition – Severe**

The medical record indicates that this patient has been diagnosed as having **MALNUTRITION** with the following findings documented [include only those that apply]:

- BMI < 16 [include actual BMI]
- Risk factors:
- Weight < 70% of ideal body weight [include actual]
- Weight < 75% of usual body weight [include actual]
- Unintended weight loss of:
- Albumin and/or Prealbumin [if significantly low and not explained by other circumstances]
- Muscle wasting/atrophy
- Nutrition Consult:
- Nutritional Supplementation

Based on your medical judgment, can you further clarify in the progress notes the **SEVERITY OF MALNUTRITION**:

- Mild
- Moderate
- Severe
- Other (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Pancytopenia**

Documentation in the medical record indicates that this patient has been diagnosed as having [examples: anemia, leukopenia, thrombocytopenia]

Based on your medical judgment, can you please provide in the progress notes a more specific diagnosis for the clinical findings below:

- ANC = [or WBC = \_\_\_\_\_ with neutrophils + bands = \_\_\_\_ %]
- Platelets =
- Hgb =
- Treatment: (examples: transfusion, lab testing, monitoring etc.) transfusion

Based on your medical judgment, can you further clarify in the progress notes the **diagnosis related to these finding** such as:

- Pancytopenia due to chemotherapy
- Pancytopenia due to another medication (please specify)
- Pancytopenia due to another disease process (please specify)
- Pancytopenia due to unknown cause
- Other (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Pneumonia Specificity – HCAP**

Based on the documentation in the medical record, this patient has been diagnosed with **HCAP (Healthcare Associated Pneumonia)**.

Associated conditions include: [ESRD, chemotherapy, steroids, immune suppression, ventilator status, cancer, COPD]

IV antibiotics:

Based on your medical judgment, can you further clarify in the progress notes **the most likely or suspected underlying cause** of the pneumonia:

- Gram negative
- Staph
- Pseudomonas
- Pneumococcus
- Aspiration
- Other organism (please specify)
- Other cause (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Pneumonia - Aspiration**

Based on the documentation in the medical record, this patient has been diagnosed with **PNEUMONIA / HCAP / CAP** [include only one]

Additional documentation in the medical record includes: [include only those that apply]

- RLL infiltrate
- Risk factors: NH patient, vomiting, debilitated, bed confined, difficulty swallowing, impaired gag reflex, abnormal swallowing study, GERD/Esophageal disorder, history of stroke
- Comorbid conditions:
- Antibiotics:

Based on your medical judgment, can you further clarify in the progress notes whether the pneumonia is **most likely or suspected** to be related to any of the following:

- Aspiration
- Pseudomonas
- MRSA
- Pneumococcus
- Viral
- Gram negative
- Other specific organism
- Other cause (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Pressure Ulcer**

Documentation in the medical record indicates that this patient has been identified as having and/or is being treated for **PRESSURE ULCER(s)** of the following sites:

Based on your medical judgment, can you please confirm the **location/sites and the present on admission status of the ulcer(s)** in the progress notes.

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## Respiratory Failure – Acute

Documentation in the medical record indicates that this patient has been admitted with or diagnosed as having:

The following is also documented in the medical record:

- Symptoms:
- Respiratory Rate:
- ABG:  $pO_2 < 60$  [indicate actual] on room air; or  $pO_2$  \_\_\_ on \_\_\_ liters oxygen
- $pO_2$ : if  $< 91\%$  [indicate actual -- on room air]
- $pCO_2$ : if  $> 50$  /  $pH < 7.35$  [indicate actual:  $pCO_2 =$  \_\_\_\_\_ /  $pH =$  \_\_\_\_\_]
- P/F Ratio =
- Treatment with:

Based on your medical judgment, can you further clarify the **diagnosis related to these findings** in the progress notes such as:

- Acute Respiratory Failure
- Acute on Chronic Respiratory Failure
- Chronic Respiratory Failure without acute exacerbation
- Other cause (please specify)
- None of the above / Not applicable

If any of the above diagnoses have resolved, you may specify as such.

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## Respiratory Failure – Chronic

Documentation in the medical record indicates that this patient has been admitted with or diagnosed as having \_\_\_\_\_.

The following is also documented in the medical record:

- Severe COPD
- Home oxygen therapy at \_\_\_\_\_ L/min
- ABG: pO<sub>2</sub> = \_\_\_\_\_ mmHg on oxygen at \_\_\_\_\_ % or \_\_\_\_\_ L/min
- SpO<sub>2</sub> = \_\_\_\_\_ % on oxygen at \_\_\_\_\_ % or \_\_\_\_\_ L/min
- Elevated pCO<sub>2</sub> (actual = \_\_\_\_\_)
- Elevated bicarbonate [ reported as CO<sub>2</sub> on BNP] (actual = \_\_\_\_\_)
- Other:

Based on your medical judgment, can you further clarify the **diagnosis related to these findings** in the progress notes such as:

- Chronic Respiratory Failure
- Hypoxia, hypercapnea and/or hyperbicarbonatemia only
- Another condition (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## Schizophrenia

Documentation in the medical record indicates that this patient has been admitted with or diagnosed as having **SCHIZOPHRENIA**.

The following is also documented in the medical record:

Based on your medical judgment, can you further clarify in the progress notes the **type and/or acuity of schizophrenia** such as (one or more):

- Acute
- Chronic undifferentiated
- Paranoid
- Residual
- Remission status (in remission or not in remission)
- Other: please specify
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## Sepsis-2

Based on documentation in the medical record, this patient is being treated for:

The following are also documented in the medical record [include the sepsis criteria that apply]:

- Temperature =
- WBC =
- Pulse =
- Respirations =
- Lactate =
- BP =
- Mental status alteration
- AKI
- Acute respiratory distress/failure
- Other:

Based on your medical judgment, can you further clarify in the progress notes the **cause of these systemic findings** in the progress notes such as:

- Sepsis
- Sepsis with organ dysfunction (specify)
- A localized infection only
- Non-infectious SIRS
- Another condition (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

### Sepsis-3

Based on documentation in the medical record, this patient is being treated for:

The following are also documented in the medical record [include the sepsis criteria that apply]:

- P/F ratio =
- Platelets =
- Bilirubin =
- Creatinine =
- Glasgow Coma Scale score =
- BP / MAP =
- Lactate =
- Vasopressor [if any and infusion rate]:
- Mental status alteration [if present]
- Respiratory rate [if > 22]
- Other:

Based on your medical judgment, can you further clarify in the progress notes the **cause of these findings** such as:

- Sepsis
- Severe sepsis
- Septic shock
- A localized infection only
- Another condition (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

## Shock

Documentation in the medical record indicates that this patient has been admitted with or diagnosed as having: **HYPOTENSION**.

The following findings are also documented in the medical record [included only those that apply]:

- Systolic blood pressure range [if persistently < 90mmHg]:
- Mean arterial pressure range [if < 70mmHg]:
- Decrease in systolic blood pressure from \_\_\_\_\_ mmHg to \_\_\_\_\_ mmHg [if >40mmHg]
- Lactate [if > 4.0]: \_\_\_\_\_ mmol/L
- Vasopressor support: [drug and infusion rate]
- Other clinical findings:

Based on your medical judgment, can you further clarify in the progress notes the **diagnosis related to these findings** such as:

- Shock (please specify type)
- Hypotension without shock (please specify cause)
- Another condition (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## Shock – Hemorrhagic

Documentation in the medical record indicates that this patient has been admitted with or diagnosed as having **SHOCK** and [any diagnoses consistent with hemorrhage]

The following findings are also documented in the medical record:

- Hemoglobin decrease from \_\_\_\_\_ gm/dl
- Transfusion: \_\_\_\_\_ units of \_\_\_\_\_.
- Other treatment:
- Other clinical findings:

Based on your medical judgment, can you further clarify in the progress notes the **specific type of shock** in this case

- Hemorrhagic shock
- Hypovolemic shock
- Post-procedural shock
- Other type of shock (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## Syncope

Documentation in the medical record indicates that this patient was admitted for or with **SYNCOPE**. Other documentation in the medical record includes:

Based on your medical judgment, can you further clarify in the progress notes the **most likely or suspected** underlying cause, if any, of this **symptom** such as:

[include all possible options]

- Cardiac arrhythmia
- Anemia / GI bleeding
- AV block
- Dehydration
- Hypoglycemia
- Cerebrovascular occlusion or embolism
- Seizure disorder
- Other cause (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## TIA Cause

Documentation in the medical record indicates that this patient has been admitted or diagnosed with the symptoms of **TIA (TRANSIENT ISCHEMIC ATTACK)**.

The following information is also documented in the medical record: [include all that apply]

- Atrial fibrillation / Abnormal Heart Valve(s) / Recent MI
- Carotid Doppler / Echocardiogram / or MRA showing:
- Treatment with: (ASA, Aggrenox, Persantin, Plavix, Coumadin)
- Duration of Symptoms:
- Other:

Based on your medical judgment, can you further clarify in the progress notes the **most likely or suspected** underlying **cause** of the TIA symptoms such as:

- CVA / Stroke
- Transient cerebral thrombosis or embolism
- Occlusion or stenosis of a precerebral/cerebral artery (partial or complete)
- Other cause (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## **Urosepsis**

Based on the documentation in the medical record, this patient is being treated for or diagnosed with **UROSEPSIS**.

Based on your medical judgment, can you further clarify **in the progress notes** whether this term is intended to indicate:

- UTI ONLY
- SEPSIS DUE TO UTI
- Other (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

**Cause and effect – UTI and catheter**

This patient was admitted with a UTI and also has a urinary catheter.

Based on your medical judgment, can you please clarify in the medical record whether or not the UTI is related to or caused by the urinary catheter.

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

**Cause and effect – Two diagnoses**

Based on the documentation in the medical record, this patient has been diagnosed with the following two conditions:

- \_\_\_\_\_, and
  
- \_\_\_\_\_

Based on your medical judgment, can you please clarify in the progress notes whether or not these two conditions are related to each other.

Your response can include none or not applicable.

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

### **Clarification of conflicting diagnoses**

Your assistance is needed to clarify apparent conflicting diagnoses in the medical record.

For compliant coding and billing, we are required to obtain clarification of conflicting information directly from the attending physician.

The diagnosis of \_\_\_\_\_ was documented on [Date] by [Provider]:

The diagnosis of \_\_\_\_\_ was documented on [Date] by [Provider]:

The following information is also documented in the medical record: [include all information supporting and not supporting both conditions]

Based on your medical judgment, can you further clarify in the progress notes which (in your professional opinion) of these two conditions is the most correct. Your response can include none or not applicable.

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

### **Clinical findings without a diagnosis**

Documentation in the record includes the following:

Based on your medical judgment, can you please provide in the progress notes a **diagnosis**, if any, associated with the above findings.

Please note that your response may include none or not applicable.

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

### Clinical Validation Query

Your assistance with confirmation of a documented diagnosis is requested.

Diagnosis: \_\_\_\_\_

Documentation in the medical record also includes:

[add information indicating support and lack of support]:

Based on your medical judgment, can you please clarify in the medical record whether:

1. This diagnosis is **not confirmed** and/or it has been **ruled out**.
2. This diagnosis is **confirmed** (if confirmed, please add additional supporting information to the medical record)

Thank you!

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### Clinical Validation Query Example for Sepsis

Your assistance with confirmation/validation of a documented diagnosis is requested.

Diagnosis: **Sepsis**

Documentation in the medical record also includes:

- WBC 15.2
- Temp = 99.8
- RR = 18
- Pulse = 75-89

Based on your medical judgment, can you please clarify in the medical record whether:

1. This diagnosis is **not confirmed** and/or it has been ruled out.
2. This diagnosis is **confirmed** (if confirmed, please add additional supporting information to the medical record)

## **Confirmation of a diagnosis from an interpreted report**

We are not permitted to code a condition documented only in an interpreted medical report without provider confirmation of that condition.

For compliant coding and billing, your assistance is needed with **confirmation of a condition(s)** identified in the following report (s): [include report with date & findings ]:

The following information is also documented in the medical record: [include all information supporting and not supporting the condition(s)]

Based on your medical judgment, can you please indicate in the progress notes whether or not you agree with this diagnosis(es).

Your response can include none or not applicable.

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

**Probable/suspected cause of symptom**

Based on the documentation in the medical record, this patient is being treated for or diagnosed with the symptom of \_\_\_\_\_.

Other documentation in the medical record indicates the following:

- 

Based on your medical judgment, can you further clarify in the progress notes the **likely, probable or suspected diagnosis which is the underlying cause of these findings** in the progress notes. Your response can include none or not applicable.

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!

## General Query Template

Documentation in the medical record indicates this patient has been admitted with or diagnosed as having \_\_\_\_\_.

The following is also documented in the medical record:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Based on your medical judgment, can you please clarify/provide in the progress notes \_\_\_\_\_ such as:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- Other (please specify)
- None of the above / Not applicable

In responding to this request, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular diagnosis is desired or expected.

Thank you!