

Oral and Maxillofacial Surgery Rotation

Focused History and Physical Exam

Date / Time / Patient Category (walk in, postop, follow up etc)

Chief Complaint (in patient's words)

History of Present Illness

Past Medical History

Past Surgical History (include anesthesia related problems)

Meds

Allergies (include the nature of the reaction e.g. rash, anaphylaxis)

Social History (include smoking, recreational drug use and alcohol consumption)

Exam

- General
- Regional (Head and Neck)
- Intraoral

Radiographic findings

Assessment (medical and dental including ASA category)

Plan

Signature / printed last name