

Oral & Maxillofacial Surgery Clinic – Pre-Surgical Evaluation

CC: Chief complaint – Usually one or two sentences in the patient’s own words.
(“ I have a tooth ache”, jaw fracture, TMJ pain, wisdom teeth, jaw swelling, etc.)

HPI: Pt’s age and chronological summary of patient’s presenting illness. Details of the summary should include pertinent data such as location, quality, duration, severity, alleviating factors, aggravating factors, associated manifestations, treatment thus far including medications and any pertinent past medical history related to presenting illness.

(45 YOWM with severe tooth pain [10 out of 10] in the left mandible for the last 2 days. Tooth #19 broke off while eating and since then has worsening pain. Pt has been unable to sleep due to pain. No significant swelling, no limited opening, worsens with eating and chewing, can not hardly eat. No fevers or chills, no nausea, vomiting, or diarrhea. Pt has taken Tylenol for the last 2 days without relief. Pt desires extraction over restoration.)

PMH: Past medical history – a list of diagnosed medical disease processes usually listed from systemic to localized. Also list any hospitalizations if disease process severe enough to warrant admission, traumas, or transfusions.

(Diabetes, Asthma, Hypertension, Coronary Artery Disease, Hyperthyroidism, Murmur, Myocardial Infarction, Coagulopathy, Foreign Bodies, Pregnancy)

PSH: Past surgical history – a chronological list of previous surgical procedures.

(3 vessel CABG, Knee arthroscopy, hysterectomy, bilateral tubal ligation, c-section)

Medications: All inclusive list of medications listing dosage and frequency. List all other herbals/supplements.

(Norvasc 5mg qD, Synthroid 0.125 mcg qD, multivitamins qD)

Allergies: List medication and its allergic response, if any. Nausea, vomiting and GI upset are not true allergies, but are frequently listed here.

(NKDA, Pencillin → Hives, Codiene → N/V, GI upset)

SH: Social history – list tobacco in pack years or ppd X years, EtOH, or recreational drug use here. List occupation, level of education, marital status, current place of residence, and lifestyle risk factors.

(+ tobacco 2 ppd X 20 years [40 pack years], denies EtOH, and denies recreational drug use. Pt is a unemployed construction worker with a HS education. Currently divorced and lives in Nicholasville.)

FH: Family history –This section indicates the family members of the immediate household. The health status and medical illnesses/conditions of each family member should be noted. A history of inherited medical conditions can be included here.

(Diabetes mellitus [high sugars], Hypertension [high blood pressure], Coronary artery disease [chest pain, heart attack], Cancer, Peptic ulcer disease [bleeding ulcer], Liver disease [cirrhosis], Asthma.)

ROS: List pertinent positives and negatives for each given organ system. Inquire of common medical illnesses. (Generalized malaise, fever, cardiovascular, pulmonary, gastrointestinal, hematologic, endocrine, neurologic, musculoskeletal, genito-urinary, psychiatric)

Physical Exam: List vital signs (temp, HR, BP, RR, SpO2).

HEENT:

Head – signs of trauma, note generalized shape.

Eyes – Note papillary size and reactivity, EOMs, color.

Ears – Patency and generalized hearing.

Nose – Patency, intact septum, presence of polyps.

Throat – Soft palate movement, uvula, size of tonsils. Presence of trismus.

Intraoral – Note lesions if any of the buccal mucosa, lateral border tongue, floor of mouth or retromolar pad. Presence or absence of teeth and obvious lesions, mandibular or palatal tori, buccal exostoses, hypertrophic tuberosities.

Neck – Presence of palpable lymph nodes or masses.

Radiographs: Mostly periapicals or panorex exam. List type and findings, and interpretation of the radiographs.

(PA #19 shows gross occlusal, mesial decay underneath existing MO amalgam, extending into root structure.)

Impression: Differential diagnosis, starting with most likely. List all teeth #'s.

(Recurrent decay of tooth #19, non-restorable, irreversible pulpitis, necrotic pulp, acute apical periodontitis)

Plan: Treatment plan outlined with proper consultations if any. List all teeth #'s.

(Extraction of tooth #19 under local anesthesia. Informed consent obtained.)