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PATIENT INFORMATION

1 PATIENT DETAILS

NAME

DOB

AGE / SEX

MRN / PATIENT ID

DATE OF SERVICE

PROVIDER

CREDENTIALS

PRIMARY CARE PROVIDER

VISIT TYPE: CONSULTATION / FOLLOW-UP / LAB REVIEW / LIFESTYLE MEDICINE VISIT / TELEHEALTH

CARE SETTING: OUTPATIENT / FUNCTIONAL MEDICINE CLINIC / INTEGRATIVE CLINIC / TELEHEALTH

REFERRAL SOURCE, IF APPLICABLE

INTERPRETER USED, IF APPLICABLE

CC

CHIEF COMPLAINT

2 PRIMARY REASON FOR VISIT

Primary functional medicine-related reason for the visit in the patient's own words — fatigue, digestive symptoms, hormonal concerns, weight concerns, inflammation, autoimmune symptoms, metabolic concerns, sleep disturbance, stress-related symptoms, chronic pain, brain fog, food sensitivity concerns, or comprehensive root-cause evaluation...

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SUBJECTIVE

3 SYMPTOMS, GOALS, TIMELINE & EXPOSURES

3a GOALS & SYMPTOM TIMELINE

Reason for functional medicine evaluation (initial evaluation / follow-up / chronic symptom review / lab interpretation / nutrition planning / lifestyle intervention / supplement review / hormonal, gut, metabolic or autoimmune concern / care coordination):

Patient health goals (symptom reduction, improved energy, better sleep, weight management, improved digestion,

hormone balance, reduced inflammation, mental clarity, improved fitness, appropriate medication reduction, chronic disease prevention):

Symptom timeline (onset, progression, major life events, infections, injuries, surgeries, pregnancies, medication changes, environmental exposures, stressors, dietary changes, travel):

Current symptom burden (fatigue, brain fog, pain, digestive symptoms, sleep disturbance, mood symptoms, weight change, skin symptoms, headaches, food reactions, hormonal symptoms, exercise intolerance):

3b SYSTEM & LIFESTYLE DOMAINS

Digestive / gut health symptoms (bloating, gas, abdominal pain, reflux, nausea, vomiting, diarrhea, constipation, stool frequency and consistency, food triggers, blood or mucus, malabsorption concerns, prior GI testing, response to dietary change):

Nutrition and dietary pattern (typical meals, meal timing, protein, fiber, fruit and vegetable intake, processed foods, sugar, sugary beverages, caffeine, hydration, alcohol, elimination diets, restrictions, sensitivities, supplements, barriers):

Metabolic / weight concerns (weight history, gain or loss pattern, appetite, cravings, blood sugar symptoms, insulin resistance risk, diabetes or prediabetes history, lipid and blood pressure history, waist circumference, prior attempts):

Hormonal / endocrine symptoms (thyroid symptoms, heat or cold intolerance, hair changes, menstrual pattern, PMS, perimenopause or menopause symptoms, libido, fertility, acne, hirsutism, adrenal or stress-related symptoms, hormone therapy history):

Sleep and circadian rhythm (schedule, duration, quality, insomnia, night waking, snoring, witnessed apnea, daytime sleepiness, shift work, evening screen exposure, caffeine timing, sleep hygiene):

Stress / mental-emotional health (stress level, stressors, trauma history, coping strategies, anxiety, depression, irritability, burnout, resilience factors, social connection, therapy history, mind-body practices):

Physical activity and movement (exercise type, frequency, duration, intensity, resistance training, mobility work, sedentary time, activity limitations, pain with activity, recovery, fitness goals):

Immune / inflammatory history (recurrent infections, allergies, asthma, eczema, autoimmune disease, inflammatory symptoms, joint pain, rashes, flares, triggers, family history of autoimmunity, prior inflammatory markers):

Pain / musculoskeletal symptoms (joint pain, muscle pain, back pain, headaches, stiffness, swelling, hypermobility, injury history, activity limitations, response to therapies):

3c EXPOSURES, TREATMENT & BACKGROUND

Environmental / exposure history (occupational exposures, mold concern, air quality, chemical or heavy metal exposure, pesticides, water source, home environment, pets, travel, toxin concerns, mitigation efforts):

Medication and supplement history (prescription and OTC medications, supplements, herbs, probiotics, nutraceuticals, adherence, response, side effects, drug-supplement interactions, cost and access barriers, patient-initiated therapies):

Prior testing and treatment (conventional labs, imaging, specialty evaluations, GI testing, allergy testing, hormone testing, sleep study, autoimmune testing, nutrition labs, prior functional testing, medications, supplements, dietary trials, lifestyle interventions):

Family history (autoimmune disease, diabetes, cardiovascular disease, cancer, thyroid disease, obesity, mental health conditions, GI disorders, allergies, neurologic disease, genetic or metabolic conditions):

Social history / social determinants (living situation, work schedule, stressors, support system, food access, transportation, financial barriers, health literacy, cultural dietary practices, ability to implement recommendations):

Pertinent negatives (unintentional weight loss, GI bleeding, persistent fever, night sweats, severe abdominal pain, progressive neurologic deficit, chest pain, severe dyspnea, suicidal ideation, rapidly worsening symptoms):

ROS FUNCTIONAL MEDICINE REVIEW OF SYSTEMS

4 PERTINENT POSITIVES & NEGATIVES

Fatigue, low energy, fever, night sweats, appetite change or weight change

Brain fog, headache, dizziness, memory concerns, numbness, tingling or neurologic symptoms

Bloating, reflux, nausea, abdominal pain, diarrhea, constipation, food reactions or stool changes

Joint pain, muscle pain, stiffness, swelling, chronic pain or exercise intolerance

Rash, itching, acne, hair changes, nail changes, flushing or skin sensitivity

Heat or cold intolerance, menstrual changes, menopausal symptoms, libido changes or thyroid symptoms

Sleep disturbance, snoring, daytime sleepiness, insomnia or circadian disruption

Anxiety, depression, stress, irritability, burnout or mood changes

Allergies, recurrent infections, autoimmune symptoms, asthma or inflammatory flares

Medication or supplement side effects, intolerance or adherence barriers

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OBJECTIVE

5 OBSERVED FINDINGS

V VITALS

TEMPERATURE

BLOOD PRESSURE

HEART RATE

RESPIRATORY RATE

OXYGEN SATURATION

HEIGHT

WEIGHT

BMI

WAIST CIRCUMFERENCE, IF OBTAINED

PAIN SCORE, IF APPLICABLE

General appearance (alertness, distress level, body habitus, nutritional appearance, energy level, hygiene, mobility, overall condition):

Head / eyes / ears / nose / throat (conjunctiva, sclera, oral mucosa, dentition, tongue findings, nasal findings, pharynx, hydration status, signs of nutrient deficiency):

Neck (thyroid enlargement or nodules, lymphadenopathy, tenderness, range of motion):

Cardiovascular (rate, rhythm, murmurs, pulses, edema, perfusion, cardiometabolic risk findings):

Pulmonary (respiratory effort, breath sounds, wheezing, crackles, cough, oxygen requirement):

Abdomen (bowel sounds, distension, tenderness, guarding, masses, hepatosplenomegaly, bloating, scars, digestive findings):

Musculoskeletal (joint tenderness, swelling, range of motion, hypermobility, muscle tenderness, strength, gait, posture, mobility limitations):

Skin (rashes, eczema, acne, urticaria, flushing, dryness, bruising, wounds, pigmentation changes, hair thinning, nail changes, signs of inflammation):

Neurologic (mental status, strength, sensation, reflexes, coordination, gait, tremor, neuropathy findings, cognitive screening):

Psychiatric (mood, affect, behavior, speech, thought process, insight, judgment, safety concerns):

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FUNCTIONAL MEDICINE TIMELINE / MATRIX ASSESSMENT

6 ROOT-CAUSE DOMAINS

Antecedents (genetics, family history, early-life factors, prior illnesses, baseline risk factors):

Triggers (infection, stress, trauma, medication change, dietary change, environmental exposure, surgery, pregnancy, major life event):

Mediators (inflammation, sleep disruption, stress physiology, dysglycemia, dysbiosis, nutrient insufficiency, pain, inactivity, toxin exposure, ongoing psychosocial stress):

Lifestyle domains (nutrition, movement, sleep, stress, relationships, meaning and purpose, environmental exposures):

Patient strengths, readiness for change, barriers and support systems:

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NUTRITION / LIFESTYLE ASSESSMENT

7 MODIFIABLE BEHAVIORS & IMPLEMENTATION BARRIERS

DIETARY PATTERN AND MEAL TIMING

PROTEIN, FIBER, FRUIT/VEGETABLE & HYDRATION INTAKE

PROCESSED FOOD, SUGAR, SATURATED FAT & SODIUM INTAKE

ALCOHOL, CAFFEINE & SUGARY BEVERAGE INTAKE

FOOD ACCESS, COOKING ABILITY, CULTURAL PREFERENCES & BUDGET

PHYSICAL ACTIVITY, RESISTANCE TRAINING & MOBILITY

SEDENTARY TIME

SLEEP SCHEDULE, HYGIENE & CIRCADIAN RHYTHM

STRESS MANAGEMENT PRACTICES & SOCIAL SUPPORT

TOBACCO, NICOTINE, CANNABIS, ALCOHOL OR OTHER SUBSTANCE USE

READINESS FOR CHANGE AND CONFIDENCE LEVEL

PATIENT-SELECTED GOALS AND ACTION STEPS

ST

SCREENING / ASSESSMENT TOOLS

8 SCORES, INTERPRETATION & COMPARISON

PHQ-9

GAD-7

PERCEIVED STRESS SCALE

PROMIS MEASURES

SLEEP QUESTIONNAIRE / STOP-BANG

FOOD AND SYMPTOM DIARY

BRISTOL STOOL SCALE

PAIN SCALE

FATIGUE SEVERITY SCALE

MENOPAUSE OR HORMONE SYMPTOM INVENTORY

ASCVD RISK ESTIMATE

READINESS-TO-CHANGE ASSESSMENT

SOCIAL DETERMINANTS OF HEALTH SCREENING

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LABORATORY AND DIAGNOSTIC RESULTS

9 REVIEWED OR ORDERED

Routine / conventional labs (CBC, CMP, lipid panel, HbA1c, fasting glucose, fasting insulin if used, TSH, free T4, urinalysis, urine microalbumin, vitamin D, B12, folate, ferritin, iron studies, magnesium):

Cardiometabolic markers (lipid trends, ApoB, Lp(a), hs-CRP, insulin resistance markers, liver enzymes, renal function, blood pressure trends, waist circumference, ASCVD risk):

Inflammatory / autoimmune testing (ESR, CRP, ANA, rheumatoid markers, celiac serologies, thyroid antibodies, other autoimmune testing when clinically appropriate):

Hormonal testing (thyroid labs, reproductive hormones, cortisol testing if used, menopause-related labs, other endocrine testing):

GI / nutrition testing (stool testing, celiac testing, H. pylori testing, breath testing, food allergy testing when clinically indicated, nutrient levels, malabsorption evaluation):

Sleep / diagnostic testing (sleep study, home sleep apnea testing, imaging, EKG, pulmonary testing, other conventional diagnostic studies):

Prior records reviewed (primary care notes, specialist notes, hospital records, lab trends, imaging reports, nutrition records, medication history, prior functional testing, patient-provided symptom logs):

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ASSESSMENT

10 FUNCTIONAL MEDICINE CLINICAL INTERPRETATION

Primary diagnosis, symptom cluster or working problem list. Differential diagnoses considered for persistent or multisystem symptoms. Root-cause contributors considered, including nutrition, sleep, stress, metabolic health, inflammation, gut health, hormone status, environmental exposure, medication effects and psychosocial factors. Severity, chronicity and functional impact of symptoms. Conventional medical risk factors and red flags assessed. Lab and diagnostic findings, including limitations of testing. Medication and supplement response, side effects, interactions and safety concerns. Lifestyle barriers, readiness for change and patient priorities. Need for further evaluation, lifestyle intervention, medication adjustment, supplement review, referrals, care coordination or a higher level of care...

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PLAN

11 MANAGEMENT BY PROBLEM & LIFESTYLE DOMAIN

Nutrition plan (dietary pattern, protein and fiber goals, hydration, reduced processed foods and sugary beverages, food trigger tracking, elimination or reintroduction plan, dietitian referral). Movement plan (aerobic activity, resistance training, mobility work, gradual progression, recovery days, activity precautions). Sleep plan (schedule, hygiene, circadian support, caffeine and screen timing, sleep apnea evaluation, insomnia management). Stress and mind-body plan (breathing practices, mindfulness, counseling, therapy referral, social support, burnout reduction). Gut health plan (bowel regimen, reflux management, fiber strategy, probiotic or prebiotic discussion, food and symptom diary, GI testing, gastroenterology referral). Metabolic health plan. Hormonal / endocrine plan. Inflammation and immune plan. Environmental exposure plan. Medication and supplement plan (continuation, initiation, discontinuation, safety and interaction review, quality concerns, dosing, monitoring, education). Diagnostic plan. Referral and care coordination. Patient education on expected timeline, stepwise changes, symptom tracking, evidence limitations, red flags and when to seek urgent or emergency care...

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FOLLOW-UP

12 REASSESSMENT PLAN

Follow-up timeframe and purpose (symptom reassessment, lifestyle goal progress, food and symptom diary review, medication or supplement response, lab review, nutrition plan adjustment, sleep and stress progress, referral follow-through, chronic disease monitoring):

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TIME DOCUMENTATION & BILLING

TOTAL TIME SPENT

LIFESTYLE COUNSELING TIME

NUTRITION COUNSELING TIME

SUPPLEMENT / MEDICATION REVIEW TIME

CARE COORDINATION TIME

RECORDS REVIEW TIME

LAB REVIEW TIME

E/M LEVEL: 99202 / 99203 / 99204 / 99205 / 99212 / 99213 / 99214 / 99215

PREVENTIVE COUNSELING CODE(S), IF APPLICABLE

CHRONIC CARE MANAGEMENT CODE(S), IF APPLICABLE

NUTRITION / LIFESTYLE COUNSELING CODE(S), IF APPLICABLE

BASIS FOR BILLING: TIME-BASED / MEDICAL DECISION MAKING / COUNSELING / PREVENTIVE CARE / CARE COORDINATION

PRIMARY DIAGNOSIS / SYMPTOM ICD-10 CODE

SECONDARY DIAGNOSIS / RISK FACTOR ICD-10 CODE(S)

SO

PROVIDER SIGN-OFF

PROVIDER NAME

CREDENTIALS

SPECIALTY: FUNCTIONAL
MEDICINE

DATE

TIME