1 PATIENT INFORMATION

1 PATIENT DETAILS

NAME _____ DOB _____

AGE / SEX _____ MRN / PATIENT ID _____

DATE OF SERVICE _____ PROVIDER _____

CREDENTIALS _____ PRIMARY CARE PROVIDER _____

VISIT TYPE: SINUS & ALLERGY CONSULTATION / FOLLOW-UP / PROCEDURE FOLLOW-UP / IMMUNOTHERAPY FOLLOW-UP / TELEHEALTH _____

CARE SETTING: OUTPATIENT / ENT CLINIC / ALLERGY CLINIC / SINUS CLINIC / PRIMARY CARE / TELEHEALTH _____

REFERRING PROVIDER, IF APPLICABLE _____ INTERPRETER USED, IF APPLICABLE _____

CC CHIEF COMPLAINT

2 PRIMARY SINUS / ALLERGY CONCERN

Primary sinus or allergy-related reason for the visit in the patient's own words when possible — nasal congestion, sinus pressure, facial pain, postnasal drip, runny nose, sneezing, itchy eyes, recurrent sinus infections, chronic sinusitis, allergic rhinitis, nasal polyps, loss of smell, cough, allergy testing, immunotherapy follow-up, or medication management...

S SUBJECTIVE

3 PATIENT-REPORTED SINONASAL & ALLERGY HISTORY

3a REASON FOR EVALUATION & SYMPTOM PROFILE

Reason for Sinus & Allergy Evaluation (initial evaluation / chronic nasal symptoms / allergic rhinitis / recurrent sinus infections / chronic rhinosinusitis / nasal obstruction / nasal polyps / anosmia or hyposmia / medication management / allergy testing / immunotherapy evaluation or follow-up / post-procedure follow-up):

Nasal Symptoms (congestion, obstruction, rhinorrhea, postnasal drip, sneezing, nasal itching, dryness, crusting, epistaxis, mouth breathing, snoring, sleep disturbance):

Sinus Symptoms (facial pain, facial pressure, headache, dental pain, sinus tenderness, purulent drainage, smell loss, fever, fatigue, recurrent infections, symptom duration, seasonal pattern, antibiotic-treated episodes):

Allergy Symptoms (itchy, watery, or red eyes; sneezing; nasal, throat, or ear itching; cough; wheezing; hives; eczema flares; food-related symptoms; environmental symptoms; seasonality):

Symptom Onset and Course (onset, duration, progression, frequency, severity, seasonal versus perennial pattern, intermittent versus persistent, flare triggers, recent worsening, response to prior treatment):

3b TRIGGERS, INFECTIONS & LOWER AIRWAY

Triggers and Exposures (pollen, dust, mold, pets, smoke, fragrances, chemicals, weather and temperature changes, workplace exposures, home environment, carpeting, bedding, humidifier or air purifier use, travel, sick contacts):

Recurrent Infection History (infections per year, antibiotic courses, steroid courses, episode duration, culture results, imaging history, complications, immune deficiency concerns, treatment response):

Asthma / Lower Airway Symptoms (cough, wheeze, shortness of breath, chest tightness, exercise and nighttime symptoms, inhaler use, asthma diagnosis, exacerbations, relationship to sinonasal symptoms):

Sense of Smell / Taste (smell loss, taste changes, duration, severity, fluctuation, relationship to congestion, polyps, infection, trauma, COVID-19 history, quality-of-life impact):

3c TREATMENT, TESTING & RELEVANT HISTORY

Medication History and Response (antihistamines, intranasal corticosteroids, intranasal antihistamines, saline rinses, decongestants, leukotriene modifiers, eye drops, antibiotics, oral steroids, biologics, immunotherapy — adherence, technique, side effects, access):

Allergy Testing / Immunotherapy History (skin testing, serum IgE, patch testing, food testing, subcutaneous or sublingual immunotherapy, build-up or maintenance status, systemic and local reactions, missed doses, perceived benefit):

ENT / Sinus Procedure History (nasal surgery, sinus surgery, septoplasty, turbinate reduction, polypectomy, balloon sinuplasty, nasal trauma or fracture, prior endoscopy findings):

Relevant Medical History (asthma, eczema, chronic urticaria, aspirin-exacerbated respiratory disease, immune deficiency, cystic fibrosis, primary ciliary dyskinesia, GERD, sleep apnea, migraine, autoimmune disease, pregnancy status, medication contraindications):

Family History (allergic rhinitis, asthma, eczema, chronic sinusitis, nasal polyps, immune deficiency, other atopic disease):

Social / Environmental History (home setting, pets, smoke exposure, occupational exposures, hobbies, school or work environment, cleaning products, mold or water damage, ability to implement environmental controls):

Pertinent Negatives (denies severe unilateral facial pain, orbital swelling, vision changes, severe headache, neurologic deficit, high fever, neck stiffness, recurrent severe infections, unilateral bloody drainage, rapidly worsening symptoms):

ROS SINUS & ALLERGY REVIEW OF SYSTEMS

4 PERTINENT POSITIVES & NEGATIVES

Nasal congestion, obstruction, rhinorrhea, postnasal drip, sneezing, itching, or epistaxis	
Facial pain, sinus pressure, headache, dental pain, purulent drainage, fever, or fatigue	
Smell loss, taste change, nasal polyps, snoring, mouth breathing, or sleep disruption	
Itchy or watery eyes, red eyes, throat itching, ear itching, cough, or allergic symptoms	
Wheezing, dyspnea, chest tightness, asthma symptoms, or exercise limitation	
Rash, hives, eczema, swelling, food reactions, or medication allergy concerns	
Medication side effects, nasal spray irritation, immunotherapy reactions, or adherence barriers	

O OBJECTIVE

5 OBSERVED FINDINGS

V VITALS

TEMPERATURE

BLOOD PRESSURE

HEART RATE

RESPIRATORY RATE

OXYGEN SATURATION

HEIGHT

WEIGHT

BMI

PAIN SCORE, IF APPLICABLE

5a FOCUSED EXAMINATION

General Appearance (alertness, distress level, nasal voice, mouth breathing, allergic facies, work of breathing, overall clinical condition):

Eyes (conjunctival injection, tearing, allergic shiners, eyelid edema, discharge, periorbital swelling, extraocular movements):

Ears (external ears, canals, tympanic membranes, middle ear effusion, retraction, pressure-related findings, hearing concerns):

Nose / Anterior Rhinoscopy (external nasal appearance, septal deviation, turbinate hypertrophy, mucosal edema, erythema or pallor, rhinorrhea, purulence, crusting, bleeding, polyps, nasal valve collapse, airflow):

Sinuses / Face (facial tenderness, swelling, asymmetry, maxillary or frontal sinus tenderness, dental tenderness, orbital findings):

Mouth / Throat (oral mucosa, tonsils, pharyngeal erythema, cobblestoning, postnasal drip, uvula, palate, dentition, signs of mouth breathing):

Neck (lymphadenopathy, tenderness, masses, thyroid findings, range of motion):

Pulmonary (respiratory effort, breath sounds, wheezing, cough, prolonged expiratory phase, oxygen requirement, signs of lower airway involvement):

Skin (eczema, urticaria, dermatographism, rash, swelling, injection-site reactions, allergic skin findings):

NE NASAL ENDOSCOPY, IF PERFORMED

6 PROCEDURAL FINDINGS

Indication for nasal endoscopy; consent and tolerance; topical anesthesia or decongestant used:

Septum findings:

Inferior and middle turbinate findings:

Middle meatus findings:

Sphenoethmoid recess findings:

Nasal polyps, edema, purulence, crusting, scarring, synechiae, or mass lesions:

Culture obtained, post-surgical anatomy, and complications if any:

AT ALLERGY TESTING / IMMUNOTHERAPY ASSESSMENT

7 ALLERGY EVALUATION OR IMMUNOTHERAPY STATUS, IF APPLICABLE

Type of testing: skin prick / intradermal / serum IgE / patch testing / other

Allergens tested and positive results

Clinical relevance of sensitizations

Food allergy versus intolerance distinction, when relevant

Immunotherapy type: subcutaneous or sublingual

Build-up or maintenance status

Dose, vial, schedule, and missed dose history

Local or systemic reactions

Epinephrine autoinjector status, when applicable

Symptom response and medication reduction

Environmental control counseling

ST SINUS / ALLERGY ASSESSMENT TOOLS

8 VALIDATED TOOLS & INTERPRETATION

SNOT-22

Total nasal symptom score

Rhinitis control assessment test

Asthma control test, when relevant

Peak flow or spirometry measures, when relevant

Smell identification testing, when relevant

Medication adherence or nasal spray technique assessment

Quality-of-life measures

Score, result, interpretation, comparison to prior results, and limitations:

L LABORATORY AND DIAGNOSTIC RESULTS

9 RESULTS REVIEWED OR ORDERED

Allergy Testing (skin testing, serum specific IgE, total IgE, patch testing, food allergy testing, immunotherapy formulation details):

Sinus Imaging (CT sinus, MRI, nasal endoscopy images, X-ray, prior sinus imaging):

Microbiology (nasal culture, sinus culture, fungal culture, antibiotic sensitivities, prior resistant organisms):

Pulmonary Testing (spirometry, FeNO, peak flow, chest imaging, asthma-related testing):

Immune / Inflammatory Testing (CBC with differential, eosinophil count, immunoglobulin levels, vaccine titers, ANCA, inflammatory markers):

Prior Records Reviewed (ENT notes, allergy/immunology notes, primary care notes, urgent care records, antibiotic and steroid history, operative reports, imaging reports, allergy testing records, medication history):

A ASSESSMENT

10 SINUS & ALLERGY CLINICAL INTERPRETATION

Primary sinus or allergy diagnosis or working diagnosis. Differential diagnoses considered. Symptom severity, frequency, duration, and control status. Allergic, nonallergic, infectious, anatomic, inflammatory, medication-related, occupational, or environmental contributors. Presence or absence of chronic rhinosinusitis, recurrent acute sinusitis, nasal polyps, allergic rhinitis, nonallergic rhinitis, asthma overlap, or immunotherapy-related issues. Imaging, endoscopy, allergy testing, or culture correlation with symptoms. Medication response, adherence, technique, side effects, and barriers. Environmental trigger burden and feasibility of avoidance. Need for medication adjustment, allergy testing, immunotherapy, imaging, nasal endoscopy, culture, ENT or allergy referral, biologic therapy, surgery consideration, or urgent escalation...

P PLAN

11 MANAGEMENT BY PROBLEM

Nasal medication plan (intranasal corticosteroid, intranasal antihistamine, saline irrigation, antihistamine, decongestant

guidance, leukotriene modifier, eye drops). Sinusitis plan (symptomatic care, antibiotics if indicated, oral steroid consideration, culture, imaging, endoscopy, follow-up, red-flag precautions). Allergic rhinitis plan (allergen avoidance, environmental control, medication optimization, allergy testing, immunotherapy discussion, response monitoring). Nasal polyps / chronic rhinosinusitis plan (topical therapy, steroid irrigations, biologic consideration, imaging review, ENT follow-up, surgery discussion, smell monitoring). Asthma / lower airway plan. Immunotherapy plan (schedule, dose adjustment for missed doses or reactions, reaction monitoring, epinephrine guidance, maintenance). Environmental control plan (dust mite measures, pet allergen reduction, pollen avoidance, mold remediation, smoke and fragrance avoidance, air filtration, humidity control, workplace mitigation). Diagnostic plan. Referral and care coordination. Patient education on medication technique, saline rinse safety, trigger avoidance, expected timeline, immunotherapy risks and benefits, red flags, and when to seek urgent or emergency care…

F FOLLOW-UP

12 REASSESSMENT PLAN

Follow-up timeframe and purpose (symptom reassessment, medication response, nasal spray technique review, allergy testing review, CT or endoscopy review, culture result review, immunotherapy monitoring, asthma control reassessment, surgical or biologic therapy planning):

TB TIME DOCUMENTATION & BILLING

TOTAL TIME SPENT

COUNSELING / EDUCATION TIME

ENVIRONMENTAL CONTROL COUNSELING TIME, IF APPLICABLE

IMMUNOTHERAPY COUNSELING TIME, IF APPLICABLE

PROCEDURE TIME, IF APPLICABLE

CARE COORDINATION TIME

RECORDS REVIEW TIME, IF APPLICABLE

E/M LEVEL: 99202–99205 / 99212–99215

NASAL ENDOSCOPY CODE, IF APPLICABLE

ALLERGY TESTING CODE(S), IF APPLICABLE

IMMUNOTHERAPY CODE(S), IF APPLICABLE

SPIROMETRY / PULMONARY TESTING CODE(S), IF APPLICABLE

BASIS FOR BILLING: TIME-BASED / MDM / PROCEDURE-BASED / ALLERGY TESTING / IMMUNOTHERAPY / TEST INTERPRETATION

PRIMARY SINUS / ALLERGY DIAGNOSIS CODE

SECONDARY DIAGNOSIS CODE(S), IF APPLICABLE

SO PROVIDER SIGN-OFF

PROVIDER NAME

CREDENTIALS

SPECIALTY: SINUS & ALLERGY / OTOLARYNGOLOGY / ALLERGY & IMMUNOLOGY

DATE

TIME