Documentation for Medicolegal Purposes

Elizabeth Barrall Werley, MD

Program Director, Assistant Professor of Emergency Medicine

Penn State Health

CORD Education Committee

Documentation Question	Yes	No	Commentary
1. Is demographic information correct, i.e., name, DOB, MRN, etc.?			
2. Are patient details correct and consistent throughout the chart, i.e., patient gender, laterality of symptoms, etc.?			
3. Are there contradictions or differing data in other portions of the chart (i.e., triage note, EMS note, nursing notes, tech notes?)			
4. Does HPI demonstrate a memorable picture: is it appropriately detailed to make the encounter stand out? Template clicks vs. free text?			
5. Is ROS realistic given the complaint noted?			
6. Is PMHx appropriately detailed and accurate?			
7. Is DDx appropriate for history and exam as documented?			
8. Is the provider's thought process evident in the medical decision making? Is testing/ treatment explained according to DDX? Use of clinical decision tools?			

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9. Are reassessments appropriately documented? Change in condition; response to treatment; PO tolerance; ambulation; time stamps			
10. Are abnormal vital signs addressed? Do they normalize or improve? Are they explained?			
11. Is disposition planning appropriately documented? If plan for discharge, are follow-up plans and return precautions appropriate?			
12. Is ECG documented appropriately?			
13. Are lab results incorporated into chart and interpreted appropriately?			
14. Are imaging results incorporated into chart and interpreted appropriately, including source of interpretation?			
15. Is there appropriate documentation of transition of care?			
16. Is there appropriate documentation of interaction with consultants? Name, service, time, details of conversation.			

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17. Is the chart complete based on the complexity of the case?			
18. Are there minor typographical and grammatical errors? Are there major typographical and grammatical errors?			
19. Is the documentation concordant with other data? Ex: objective data correlates with exam? Exam comments on other abnormal results?			
20. Is there any visible discord in the chart? "chart wars"			
21. Was the chart completed and available for others to access contemporaneous to patient care?			
22. Special circumstances, i.e., AMA, change in information later in clinical course, etc.			