



DIM	ENSION	Yes	No
1.	Does the patient have a new psychiatric condition?		
2.	Any history of active medical illness needing evaluation?		
3.	Any abnormal vital signs?		
	Temperature greater than 38 degrees C		
	Pulse outside of 50 to 120 beats/minute		
	Blood pressure less than 90 systolic or greater than 200; greater than 120 diastolic		
	Respiratory rate greater than 24 breaths/minute		
4.	Focused physical exam directed by history and presentation: Any abnormal physical exam?		
	TO INCLUDE IF APPROPRIATE:  • Acute and chronic trauma (including signs of victimization/abuse)		
	Breath Sounds		
	Cardiac dysrhythmia, murmurs		
	Skin and vascular signs: Diaphoresis, pallor, cyanosis, edema		
	Abdominal distention, bowel sounds		
	Neurological with particular focus on:		
	• Gait		
	Pupil symmetry size		
	Nystagmus		
	Paralysis		
	Meningeal signs		
5.	Any abnormal mental status indicating medical illness such as lethargic, stuporous, comatose, spontaneously fluctuating mental status? (Mental Status Exam)		
6.	Selective diagnostic testing should be guided by the history and physical exam.  CBC, urea, creatinine, E7 and extended electrolytes (calcium, magnesium, and phosphate).  TSH if more than six months since previous test  Alcohol level (if there is a history of liver disease and/or signs of intoxication are present)  acetaminophen (in cases of self harm or if patient is taking Tylenol 3)  Urine Drug Screen (if history is suggestive of substance abuse)  Beta HCG if a urine test cannot be obtained.		
7.	Diagnosis:		
	Psychiatric -		
	Medical -		
	Substance Abuse -		
8.	Medical follow-up or treatment required on Psychiatry Unit:		
9.	I have had adequate time to evaluate the patient and the patient's medical condition is sufficiently stable for psychiatric evaluation and does not pose a significant risk of deterioration.		

