



Screenshots for Documentation of Esophagogastroduodenoscopy (EGD) Procedures in CORI3

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Above each screenshot or set of screenshots is the name of the table in the CORI3 National Endoscopic Database where the data collected on that screen is found. Some screenshots show the content of menus or subscreens that are also documented in the same table. In addition, screenshots of the menus are shown (circled). Grid data (grids are in red squares) are found in tables named below the screenshot.

EGD_History

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

B. History

Current Medications

ASA/NSAID COX-2 Insulin

Anticoagulant (AC) AC Plan:

Antibiotic Prophylaxis

Allergies

No known allergies

Allergic to:

D. Proc. Info.

Type	Med	Dose	sig	Start	End

E. *Indications

E: Liver Disease

G: Exam Info

H: Findings/Therapy

Past Medical / Surgical History

History must be within 30 days or updated today

No Co-Morbidities

System	Disease / Disorder	Comments

I: Intervent/Events

J: Assess/Diag

K: Treatment Plan

L: Scheduling

Patient Habits

Patient Smokes? Y N

Cigarettes

Cigars

Pipe

/ Day:

Drinking Status:

Drinks / Day:

Comments:

History Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

Current medications grid data found in EGD_System_138

Past Medical/Surgical history grid data found in EGD_Type_2861

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

B: History

Current Medications

ASA/NSAID COX-2 Insulin

Anticoagulant (AC) AC Plan:

Antibiotic Prophylaxis

Type	Med	Dose
	Continue Coumadin	
	Heparin	
	LMWH	
	Stop Coumadin, measure PT	
	Stop Coumadin, no blood work	

Allergies

No known allergies

Allergic to:

Patient Habits

Patient Smokes? Y N

Cigarettes

Cigars

Pipe

/ Day:

Drinking Status:

Drinks / Day:

Comments:

History Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

B: History

Current Medications

ASA/NSAID COX-2 Insulin

Anticoagulant (AC) AC Plan:

Antibiotic Prophylaxis

Type	Med	Dose	sig	Start	End

Allergies

No known allergies

Allergic to:

Patient Habits

Patient Smokes? Y N

Cigarettes

Cigars

Pipe

/ Day:

Drinking Status:

Drinks / Day:

Comments:

binge drinker
currently drinking
not currently drinking
occasional
social
unknown

History Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD_PELabs

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

	Results of Prior Studies					Pre-Exam Physical	
	Type of Study	Exam	Date	Results	Description	Date of Exam	
B: History						/ /	
C: PE / Labs						Ht (In): 12	Wt (lbs):
D: Proc. Info.						Pulse: 12	BP:
E: *Indications						<input type="checkbox"/> Entire PE WNL	
E: Liver Disease							WNL Abn
G: Exam Info						Cardio-Pulm Exam	<input type="checkbox"/> <input type="checkbox"/>
H: Findings/Therapy						HEENT Exam	<input type="checkbox"/> <input type="checkbox"/>
I: Intervent/Events						Abdominal Exam	<input type="checkbox"/> <input type="checkbox"/>
J: Assess/Diag						Extremity Exam	<input type="checkbox"/> <input type="checkbox"/>
K: Treatment Plan						Neuro Exam	<input type="checkbox"/> <input type="checkbox"/>
L: Scheduling						Abn Findings:	

PE / Labs Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

Results of prior study grid data found in EGD_TypeOfStudy_380

EGD_ProcInfo

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Procedures Performed	Exam Personnel			Patient Consent	
<input type="checkbox"/> Panendoscopy (EGD)	<input type="checkbox"/> Attending Present			Consent Obtained Y <input type="checkbox"/> N <input type="checkbox"/>	
<input type="checkbox"/> Esophagoscopy (Limited to)	Title	Name	LoS	Obtained from: <input type="text"/>	
<input type="checkbox"/> PEG Placement				Obtained By: <input type="text"/>	
<input type="checkbox"/> PEG Replacement				Consent to be Contacted Obtained? Not Asked <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>	
<input type="checkbox"/> PEJ Placement					
<input type="checkbox"/> Small Bowel Enteroscopy					
<input type="checkbox"/> Fluoroscopy					
<input type="checkbox"/> Other					

Exam Location

Location:

InPT/OutPT?:

InPT Room#:

Procedure Information Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

Exam Personnel grid data found in EGD_Title_145

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Procedures Performed

- Panendoscopy (EGD)
- Esophagoscopy (Limited to)
- PEG Placement
- PEG Replacement
- PEJ Placement
- Small Bowel Enteroscopy
- Fluoroscopy
- Other

Exam Personnel

Title	Name	LoS

Patient Consent

Consent Obtained Y N

Obtained from:

Obtained By:

Consent to be Contacted Obtained? Not Asked Y N

Panendoscopy (EGD) Detail

- with Biopsy(s) / Brushing(s)
- with Multiple Biopsies (>10)
- with Hot Biopsy(s)
- with Variceal Sclerosis or Banding
- with Electrocoag/Laser: Tumor Ablation
- with Balloon Dilation
- with Esophageal Dilation
- with Electrocoag or Injection: Bleeding
- with Foreign Body Removal
- with Stent Placement
- with Stent Replacement
- with Stent Removal
- with Polypectomy
- with Other

Procedure Information Complete Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Procedures Performed

- Panendoscopy (EGD)
- Esophagoscopy (Limited to)
- PEG Placement
- PEG Replacement
- PEJ Placement
- Small Bowel Enteroscopy
- Fluoroscopy
- Other

Exam Personnel

Title	Name	LoS

Patient Consent

Consent Obtained Y N

Obtained from:

Obtained By:

Consent to be Contacted Obtained? Not Asked Y N

Esophagoscopy (Limited to) Detail

- with Biopsy(s) / Brushing(s)
- with Multiple Biopsies (>10)
- with Hot Biopsy(s)
- with Electrocoag/Laser: Tumor Ablation
- with Electrocoag or Injection: Bleeding
- with Esophageal Dilation
- with Variceal Sclerosis or Banding
- with Foreign Body Removal
- with Stent Placement
- with Stent Replacement
- with Other

Procedure Information Complete Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Procedures Performed

- Panendoscopy (EGD)
- Esophagoscopy (Limited to)
- PEG Placement
- PEG Replacement
- PEJ Placement
- Small Bowel Enteroscopy
- Fluoroscopy
- Other

Exam Personnel

Title	Name	LoS

Patient Consent

Consent Obtained Y N

Obtained from:

Obtained By:

Consent to be Contacted Obtained? Not Asked Y N

Small Bowel Enteroscopy Detail

- with Biopsy(s)
- with Multiple Biopsies (>10)
- with Hot Biopsy(s)
- with Electrocoag or Inject
- with Other

Close

Procedure Information Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Procedures Performed

- Panendoscopy (EGD)
- Esophagoscopy (Limited to)
- PEG Placement
- PEG Replacement
- PEJ Placement
- Small Bowel Enteroscopy
- Fluoroscopy
- Other

Exam Personnel

Title	Name	LoS

Exam Location

Location:

- Emergency Department
- Endoscopy Suite
- Hospital Ward
- Intensive Care Unit
- NICU
- Operating Room
- Outpatient Clinic
- PICU
- Radiology
- Short Stay Unit

Procedure Information Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Procedures Performed

- Panendoscopy (EGD)
- Esophagoscopy (Limited to)
- PEG Placement
- PEG Replacement
- PEJ Placement
- Small Bowel Enteroscopy
- Fluoroscopy
- Other

Exam Personnel

Title	Name	LoS

Patient Consent

Consent Obtained Y N

Obtained from:

Obtained By:

Consent to be Contacted Obtained? Not Asked Y N

Exam Location

Location:

InPT/OutPT?:

- Inpatient-ICU
- Inpatient-ward
- Outpatient

Procedure Information Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Procedures Performed

- Panendoscopy (EGD)
- Esophagoscopy (Limited to)
- PEG Placement
- PEG Replacement
- PEJ Placement
- Small Bowel Enteroscopy
- Fluoroscopy
- Other

Exam Personnel

Title	Name	LoS

Patient Consent

Consent Obtained Y N

Obtained from:

Obtained By:

Consent to be Contacted Obtained? Not Asked

Exam Location

Location:

InPT/OutPT?:

InPT Room#:

Procedure Information Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

<p>A: Home</p> <p>B: History</p> <p>C: PE / Labs</p> <p>D: Proc. Info.</p> <p>E: *Indications</p> <p>F: Liver Disease</p> <p>G: Exam Info</p> <p>H: Findings/Therapy</p> <p>I: Intervent/Events</p> <p>J: Assess/Diag</p> <p>K: Treatment Plan</p> <p>L: Scheduling</p>	<p>Procedures Performed</p> <p><input type="checkbox"/> Panendoscopy (EGD)</p> <p><input type="checkbox"/> Esophagoscopy (Limited to)</p> <p><input type="checkbox"/> PEG Placement</p> <p><input type="checkbox"/> PEG Replacement</p> <p><input type="checkbox"/> PEJ Placement</p> <p><input type="checkbox"/> Small Bowel Enteroscopy</p> <p><input type="checkbox"/> Fluoroscopy</p> <p><input checked="" type="checkbox"/> Other</p>	<p>Exam Personnel</p> <p><input type="checkbox"/> Attending Present</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Title</th> <th>Name</th> <th>LoS</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> <p>Exam Location</p> <p>Location: <input type="text"/></p> <p>InPT/OutPT?: <input type="text"/></p> <p>InPT Room#: <input type="text"/></p>	Title	Name	LoS																															<p>Patient Consent</p> <p>Consent Obtained <input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>Obtained from: <input type="text"/></p> <p>Obtained By: <input type="text"/></p> <p>Consent to be Cont: GIA Not A PA physician RN</p>
Title	Name	LoS																																		
<p>Procedure Information Comments: <input type="text"/></p> <p style="text-align: right;"><input type="button" value="Expand"/></p>																																				

? F1 Help	📅 F2 Schedule	💡 F3 New	🔍 F4 Study	📄 F5 Exam	📁 F6 Reports	🔒 F7 Lock	👤 F8 Patient	🚑 F9 Staff	🛠 F10 Utilities	📄 F11 Path Rpt	📌 F12 Pathways
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EGD_Inds

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of

Anemia Pos. FOBT
 Iron Deficiency without Anemia
 Graft v Host Feeding Ref
 Crohn's Other

Symptoms

Wt Loss Dysphagia
 Chest Pain Early Satiety
 Nausea Vomiting
 Anorexia Diarrhea
 Odynophagia
 Pulmonary Symptoms
 Dyspepsia
 Abd Pain
 Reflux Symptoms
 Hematemesis
 Melena
 Hematochezia
 GI Sx in Immune-Comp Host
 Other

Surveillance of

Barrett's Gast. Ulcer
 Gast. Polyp(s) H. pylori
 Varices Duo. Ulcer
 Other
 Prior UGI Cancer:
 Last Surveillance Exam:
 Mo: Yr:

Evaluation of Suspected

Varices Barrett's
 UGI Bleed IBD
 Malabsorption Other

Abnormal Exams, Studies, Xrays

Study	Exam	Results

Therapeutic Interventions

... as indication for this exam

Screening for

Varices Barrett's
 Familial Polyposis
 Other
 Personal Hx of:

Research Study

Study: Visit:

Indications Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

Abnormal exam, studies and Xrays grid data found in EGD_AsIndicationForThisE

Therapeutic interventions grid data found in EGD_Study_373

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of

- Anemia Pos. FOBT
- Iron Deficiency without Anemia
- Graft v Host Feeding Ref
- Crohn's Other

Symptoms

- Wt Loss Dysphagia
- Chest Pain Early Satiety
- Nausea Vomiting
- Anorexia Diarrhea
- Odynophagia
- Pulmonary Symptoms
- Dyspepsia
- Abd Pain
- Reflux Symptoms
- Hematemesis

Surveillance of

- Barrett's Gast. Ulcer
- Gast. Polyp(s) H. pylori
- Varices Duo. Ulcer
- Other

Prior UGI Cancer:

Last Surveillance Exam: Mo: Yr:

Evaluation of Suspected

- Varices Barrett's
- UGI Bleed IBD
- Malabsorption Other

Abnormal Exams, Studies

Study	Exam	Re

Therapeutic Interventions

... as indication for this exam

Anemia Detail

- Low Ferritin
- Low FE Saturation
- Pernicious

RBC Size:

- Macrocytic
- Microcytic
- Normocytic

Close

Indications Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of

- Anemia Pos. FOBT
- Iron Deficiency without Anemia
- Graft v Host Feeding Ref
- Crohn's Other

Symptoms

- Wt Loss Dysphagia
- Chest Pain Early Satiety
- Nausea Vomiting
- Anorexia Diarrhea
- Odynophagia
- Pulmonary Symptoms
- Dyspepsia
- Abd Pain
- Reflux Symptoms
- Hematemesis
- Melena

Surveillance of

- Barrett's Gast. Ulcer
- Gast. Polyp(s) H. pylori
- Varices Duo. Ulcer
- Other

Prior UGI Cancer:

Last Surveillance Exam: Mo: Yr:

Evaluation of Suspected

- Varices Barrett's
- UGI Bleed IBD
- Malabsorption Other

Abnormal Exams, Studies

Study	Exam	Re

Therapeutic Interventions

... as indication for this exam

Pos. FOBT Detail

- Home Screening
- Digital Rectal Exam

Close

Indications Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of

- Anemia
- Iron Deficiency without Anemia
- Graft v Host
- Crohn's
- Pos. FOBT
- Feeding Ref
- Other

Symptoms

- Wt Loss
- Chest Pain
- Nausea
- Anorexia
- Odynophagia
- Pulmonary Symptoms
- Dyspepsia
- Abd Pain
- Reflux Symptoms
- Hematemesis
- Dysphagia
- Early Satiety
- Vomiting
- Diarrhea

Surveillance of

- Barrett's
- Gast. Polyp(s)
- Varices
- Other
- Gast. Ulcer
- H. pylori
- Duo. Ulcer

Prior UGI Cancer:

Last Surveillance Exam: Mo: Yr:

Abnormal Exams, Studies

Study	Exam	Re

Evaluation of Suspected

- Varices
- UGI Bleed
- Malabsorption
- Barrett's
- IBD
- Other

UGI Bleed Detail

Date of Original Bleed:

Time of Original Bleed:

Location at time of Bleed:

- Inpatient-ICU
- Inpatient-ward
- Outpatient

Screening for

- Barrett's
- Gast. Polyp(s)
- Hx of:

Research Study

Study: Visit:

Indications Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of

- Anemia
- Iron Deficiency without Anemia
- Graft v Host
- Crohn's
- Pos. FOBT
- Feeding Ref
- Other

Symptoms

- Pulmonary Symptoms
- Wt Loss
- Chest Pain
- Nausea
- Anorexia
- Odynophagia
- Dyspepsia
- Abd Pain
- Reflux Symptoms
- Hematemesis
- Melena
- Dysphagia
- Early Satiety
- Vomiting
- Diarrhea

Surveillance of

- Barrett's
- Gast. Polyp(s)
- Varices
- Other
- Gast. Ulcer
- H. pylori
- Duo. Ulcer

Prior UGI Cancer:

Last Surveillance Exam: Mo: Yr:

Abnormal Exams, Studies

Study	Exam	Re

Evaluation of Suspected

- Varices
- UGI Bleed
- Malabsorption
- Barrett's
- IBD
- Other

Pulmonary Symptoms Detail

- Cough
- Hoarseness
- Asthma

Screening for

- Barrett's
- Gast. Polyp(s)
- Hx of:

Research Study

Study: Visit:

Indications Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of	Symptoms	Surveillance of
<input type="checkbox"/> Anemia <input type="checkbox"/> Iron Deficiency without Anemia <input type="checkbox"/> Graft v Host <input type="checkbox"/> Crohn's	<input type="checkbox"/> Wt Loss <input type="checkbox"/> Chest Pain <input type="checkbox"/> Nausea <input type="checkbox"/> Anorexia <input type="checkbox"/> Odynophagia <input type="checkbox"/> Pulmonary Symptoms	<input type="checkbox"/> Barrett's <input type="checkbox"/> Gast. Polyp(s) <input type="checkbox"/> Varices <input type="checkbox"/> Other
<input type="checkbox"/> Pos. FOBT <input type="checkbox"/> Feeding Ref <input type="checkbox"/> Other	<input type="checkbox"/> Dysphagia <input type="checkbox"/> Early Satiety <input type="checkbox"/> Vomiting <input type="checkbox"/> Diarrhea	<input type="checkbox"/> Gast. Ulcer <input type="checkbox"/> H. pylori <input type="checkbox"/> Duo. Ulcer

Evaluation of Suspected

Dyspepsia

Varices
 Barrett's
 UGI Bleed
 IBD
 Malabsorption
 Other

Abnormal Exams, Studies

Study	Exam	Re

Therapeutic Interventions

... as indication for this exam

Indications Comments: Expand

Dyspepsia Detail

Location: [Dropdown]

- LLQ
- LUQ
- RLQ
- RUQ
- diffuse
- epigastric

Close

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of	Symptoms	Surveillance of
<input type="checkbox"/> Anemia <input type="checkbox"/> Iron Deficiency without Anemia <input type="checkbox"/> Graft v Host <input type="checkbox"/> Crohn's	<input type="checkbox"/> Wt Loss <input type="checkbox"/> Chest Pain <input type="checkbox"/> Nausea <input type="checkbox"/> Anorexia <input type="checkbox"/> Odynophagia <input type="checkbox"/> Pulmonary Symptoms	<input type="checkbox"/> Barrett's <input type="checkbox"/> Gast. Polyp(s) <input type="checkbox"/> Varices <input type="checkbox"/> Other
<input type="checkbox"/> Pos. FOBT <input type="checkbox"/> Feeding Ref <input type="checkbox"/> Other	<input type="checkbox"/> Dysphagia <input type="checkbox"/> Early Satiety <input type="checkbox"/> Vomiting <input type="checkbox"/> Diarrhea	<input type="checkbox"/> Gast. Ulcer <input type="checkbox"/> H. pylori <input type="checkbox"/> Duo. Ulcer

Evaluation of Suspected

Abd Pain

Varices
 Barrett's
 UGI Bleed
 IBD
 Malabsorption
 Other

Abnormal Exams, Studies

Study	Exam	Re

Therapeutic Interventions

... as indication for this exam

Indications Comments: Expand

Abd Pain Detail

Location: [Dropdown]

- LLQ
- LUQ
- RLQ
- RUQ
- diffuse
- epigastric

Close

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of

- Anemia
- Pos. FOBT
- Iron Deficiency without Anemia
- Graft v Host
- Feeding Ref
- Crohn's
- Other

Symptoms

- Wt Loss
- Chest Pain
- Nausea
- Anorexia
- Odynophagia
- Pulmonary Symptoms
- Dyspepsia
- Abd Pain
- Reflux Symptoms
- Hematemesis
- Melena

Surveillance of

- Barrett's
- Gast. Polyp(s)
- Varices
- Other
- Gast. Ulcer
- H. pylori
- Duo. Ulcer

Evaluation of Suspected

- Varices
- Barrett's
- UGI Bleed
- IBD
- Malabsorption
- Other

Abnormal Exams, Studies

Study	Exam	Re

Therapeutic Interventions

... as indication for this e...

Reflux Symptoms Detail

Duration: [dropdown]

Frequency: [dropdown]

- unknown duration
- <1 yr
- 1-5 yrs
- 6-10 yrs
- >10 yrs

Close

Indications Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of

- Anemia
- Pos. FOBT
- Iron Deficiency without Anemia
- Graft v Host
- Feeding Ref
- Crohn's
- Other

Symptoms

- Wt Loss
- Chest Pain
- Nausea
- Anorexia
- Odynophagia
- Pulmonary Symptoms
- Dyspepsia
- Abd Pain
- Reflux Symptoms
- Hematemesis
- Melena

Surveillance of

- Barrett's
- Gast. Polyp(s)
- Varices
- Other
- Gast. Ulcer
- H. pylori
- Duo. Ulcer

Evaluation of Suspected

- Varices
- Barrett's
- UGI Bleed
- IBD
- Malabsorption
- Other

Abnormal Exams, Studies

Study	Exam	Re

Therapeutic Interventions

... as indication for this e...

Hematemesis Detail

Last Bleed: [dropdown]

Documentation: [dropdown]

- 25-48 hours ago
- 6-24 hours ago
- <6 hours ago
- >48 hours ago
- currently bleeding
- unknown

Close

Indications Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of

- Anemia Pos. FOBT
- Iron Deficiency without Anemia
- Graft v Host Feeding Ref
- Crohn's Other

Symptoms

- Wt Loss Dysphagia
- Chest Pain Early Satiety
- Nausea Vomiting
- Anorexia Diarrhea
- Odynophagia
- Pulmonary Symptoms
- Dyspepsia
- Abd Pain
- Reflux Symptoms
- Hematemesis
- Melena

Surveillance of

- Barrett's Gast. Ulcer
- Gast. Polyp(s) H. pylori
- Varices Duo. Ulcer
- Other

Prior UGI Cancer:

Last Surveillance Exam: Mo: Yr:

Evaluation of Suspected

- Varices Barrett's
- UGI Bleed IBD
- Malabsorption Other

Abnormal Exams, Studies

Study	Exam	Re

Therapeutic Interventions

as indication for this exam

Screening for

- Barrett's
- Col. Polyps

Col. Hx of:

Research Study

Study: Visit:

Indications Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

Melena Detail

Last Bleed:

Documentation: 25-48 hours ago
6-24 hours ago
<6 hours ago
>48 hours ago
currently bleeding
unknown

Close

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of

- Anemia Pos. FOBT
- Iron Deficiency without Anemia
- Graft v Host Feeding Ref
- Crohn's Other

Symptoms

- Wt Loss Dysphagia
- Chest Pain Early Satiety
- Nausea Vomiting
- Anorexia Diarrhea
- Odynophagia
- Pulmonary Symptoms
- Dyspepsia
- Abd Pain
- Reflux Symptoms
- Hematemesis
- Melena

Surveillance of

- Barrett's Gast. Ulcer
- Gast. Polyp(s) H. pylori
- Varices Duo. Ulcer
- Other

Prior UGI Cancer:

Last Surveillance Exam: Mo: Yr:

Evaluation of Suspected

- Varices Barrett's
- UGI Bleed IBD
- Malabsorption Other

Abnormal Exams, Studies

Study	Exam	Re

Therapeutic Interventions

as indication for this exam

Screening for

- Barrett's
- Col. Polyps

Col. Hx of:

Research Study

Study: Visit:

Indications Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

Hematochezia Detail

Last Bleed:

Documentation: 25-48 hours ago
6-24 hours ago
<6 hours ago
>48 hours ago
currently bleeding
unknown

Close

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of

- Anemia Pos. FOBT
- Iron Deficiency without Anemia
- Graft v Host Feeding Ref
- Crohn's Other

Symptoms

- Wt Loss Dysphagia
- Chest Pain Early Satiety
- Nausea Vomiting
- Anorexia Diarrhea
- Odynophagia
- Pulmonary Symptoms
- Dyspepsia
- Abd Pain
- Reflux Symptoms
- Hematemesis
- Melena
- Hematochezia
- GI Sx in Immune-Comp Host
- Other

Surveillance of

- Barrett's Gast. Ulcer
- Gast.Polyp(s) H. pylori
- Varices Duo. Ulcer
- Other

Prior UGI Cancer: [Dropdown]

Last Surveillance Exam: [Dropdown] Duodenum
Esophagus
Jejunum
Stomach

Mo: [Dropdown]

Screening for

- Varices Barrett's
- Familial Polyposis
- Other

Personal Hx of: [Dropdown]

Research Study

Study: [Dropdown] Visit: [Dropdown]

Indications Comments: [Text Area] Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: *Indications

Evaluation of

- Anemia Pos. FOBT
- Iron Deficiency without Anemia
- Graft v Host Feeding Ref
- Crohn's Other

Symptoms

- Wt Loss Dysphagia
- Chest Pain Early Satiety
- Nausea Vomiting
- Anorexia Diarrhea
- Odynophagia
- Pulmonary Symptoms
- Dyspepsia
- Abd Pain
- Reflux Symptoms
- Hematemesis
- Melena
- Hematochezia
- GI Sx in Immune-Comp Host
- Other

Surveillance of

- Barrett's Gast. Ulcer
- Gast.Polyp(s) H. pylori
- Varices Duo. Ulcer
- Other

Prior UGI Cancer: [Dropdown]

Last Surveillance Exam: [Dropdown] Yr: [Dropdown]

Mo: [Dropdown]

Screening for

- Varices Barrett's
- Familial Polyposis
- Other

Personal Hx of: [Dropdown] breast cancer
cervical cancer
liver cancer
ovarian cancer
prostate cancer
vaginal cancer

Research Study

Study: [Dropdown]

Indications Comments: [Text Area] Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

<p>A: Home</p> <p>B: History</p> <p>C: PE / Labs</p> <p>D: Proc. Info.</p> <p>E: *Indications</p> <p>F: Liver Disease</p> <p>G: Exam Info</p> <p>H: Findings/Therapy</p> <p>I: Intervent/Events</p> <p>J: Assess/Diag</p> <p>K: Treatment Plan</p> <p>L: Scheduling</p>	<p>Evaluation of</p> <p><input type="checkbox"/> Anemia <input type="checkbox"/> Pos. FOBT</p> <p><input type="checkbox"/> Iron Deficiency without Anemia</p> <p><input type="checkbox"/> Graft v Host <input type="checkbox"/> Feeding Ref</p> <p><input type="checkbox"/> Crohn's <input type="checkbox"/> Other</p> <hr/> <p>Evaluation of Suspected</p> <p><input type="checkbox"/> Varices <input type="checkbox"/> Barrett's</p> <p><input type="checkbox"/> UGI Bleed <input type="checkbox"/> IBD</p> <p><input type="checkbox"/> Malabsorption <input type="checkbox"/> Other</p> <hr/> <p>Abnormal Exams, Studies, Xrays</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Study</th> <th>Exam</th> <th>Results</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> <hr/> <p>Therapeutic Interventions</p> <p>... as indication for this exam</p>	Study	Exam	Results										<p>Symptoms</p> <p><input type="checkbox"/> Wt Loss <input type="checkbox"/> Dysphagia</p> <p><input type="checkbox"/> Chest Pain <input type="checkbox"/> Early Satiety</p> <p><input type="checkbox"/> Nausea <input type="checkbox"/> Vomiting</p> <p><input type="checkbox"/> Anorexia <input type="checkbox"/> Diarrhea</p> <p><input type="checkbox"/> Odynophagia</p> <p><input type="checkbox"/> Pulmonary Symptoms</p> <p><input type="checkbox"/> Dyspepsia</p> <p><input type="checkbox"/> Abd Pain</p> <p><input type="checkbox"/> Reflux Symptoms</p> <p><input type="checkbox"/> Hematemesis</p> <p><input type="checkbox"/> Melena</p> <p><input type="checkbox"/> Hematochezia</p> <p><input type="checkbox"/> GI Sx in Immune-Comp Host</p> <p><input type="checkbox"/> Other</p>	<p>Surveillance of</p> <p><input type="checkbox"/> Barrett's <input type="checkbox"/> Gast. Ulcer</p> <p><input type="checkbox"/> Gast.Polyp(s) <input type="checkbox"/> H. pylori</p> <p><input type="checkbox"/> Varices <input type="checkbox"/> Duo. Ulcer</p> <p><input type="checkbox"/> Other</p> <p>Prior UGI Cancer: <input type="text"/></p> <p>Last Surveillance Exam:</p> <p>Mo: <input type="text"/> Yr: <input type="text"/></p> <hr/> <p>Screening for</p> <p><input type="checkbox"/> Varices <input type="checkbox"/> Barrett's</p> <p><input type="checkbox"/> Familial Polyposis</p> <p><input type="checkbox"/> Other</p> <p>Personal Hx of: <input type="text"/></p> <hr/> <p>Research Study</p> <p>Study: <input type="text"/> Visit: <input type="text"/></p> <ul style="list-style-type: none"> <input type="checkbox"/> final <input type="checkbox"/> follow-up <input type="checkbox"/> initial <input type="checkbox"/> screening
Study	Exam	Results													

Indications Comments:

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD_Liver

EGD		Current User: CORI Tech Support		Demonstration Only	
A: Home	Patient: Patient, Fake	Prior exams	New	Date: 01/01/2000	Time: 03:07 PM
B: History	History of Known Varices <input type="checkbox"/> Gastric <input type="checkbox"/> Esophageal <input type="checkbox"/> Other Prior Bleed: <input type="text"/> Prior Eradication: <input type="text"/> Last Surveillance Exam: Mo: <input type="text"/> Yr: <input type="text"/>		Etiology <input type="checkbox"/> Hepatitis B <input type="checkbox"/> Hepatitis C <input type="checkbox"/> Alcohol <input type="checkbox"/> PBC/PSC <input type="checkbox"/> NASH <input type="checkbox"/> Autoimmune Hepatitis <input type="checkbox"/> Cryptogenic <input type="checkbox"/> Cystic Fibrosis <input type="checkbox"/> Biliary Atresia <input type="checkbox"/> Other		Severity/Childs-Pugh Click Here to Calculate Childs-Pugh Class: <input type="text"/>
C: PE / Labs					Evidence of Liver Disease <input type="checkbox"/> Histologic Cirrhosis <input type="checkbox"/> Evidence of Portal HTN <input type="checkbox"/> Portal Vein Thrombosis <input type="checkbox"/> Abnormal Labs <input type="checkbox"/> Other
D: Proc. Info.	Liver Disease Comments: Expand				
E: *Indications					
E: Liver Disease					
G: Exam Info					
H: Findings/Therapy					
I: Intervent/Events					
J: Assess/Diag					
K: Treatment Plan					
L: Scheduling					
F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways					

EGD		Current User: CORI Tech Support		Demonstration Only	
A: Home	Patient: Patient, Fake	Prior exams	New	Date: 01/01/2000	Time: 03:07 PM
B: History	History of Known Varices <input type="checkbox"/> Gastric <input type="checkbox"/> Esophageal <input type="checkbox"/> Other Prior Bleed: <input type="text"/> History of prior bleed No history of prior bleed Unknown history of prior bleed Mo: <input type="text"/> Yr: <input type="text"/>		Etiology <input type="checkbox"/> Hepatitis B <input type="checkbox"/> Hepatitis C <input type="checkbox"/> Alcohol <input type="checkbox"/> PBC/PSC <input type="checkbox"/> NASH <input type="checkbox"/> Autoimmune Hepatitis <input type="checkbox"/> Cryptogenic <input type="checkbox"/> Cystic Fibrosis <input type="checkbox"/> Biliary Atresia <input type="checkbox"/> Other		Severity/Childs-Pugh Click Here to Calculate Childs-Pugh Class: <input type="text"/>
C: PE / Labs					Evidence of Liver Disease <input type="checkbox"/> Histologic Cirrhosis <input type="checkbox"/> Evidence of Portal HTN <input type="checkbox"/> Portal Vein Thrombosis <input type="checkbox"/> Abnormal Labs <input type="checkbox"/> Other
D: Proc. Info.	Liver Disease Comments: Expand				
E: *Indications					
E: Liver Disease					
G: Exam Info					
H: Findings/Therapy					
I: Intervent/Events					
J: Assess/Diag					
K: Treatment Plan					
L: Scheduling					
F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways					

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: Liver Disease

History of Known Varices	Etiology	Severity/Childs-Pugh
<input type="checkbox"/> Gastric <input type="checkbox"/> Esophageal <input type="checkbox"/> Other Prior Bleed: <input type="text"/> Prior Eradication: <input type="text"/> Last Surveillance Exam: <input type="text"/> Mo: <input type="text"/>	<input type="checkbox"/> Hepatitis B <input type="checkbox"/> Hepatitis C <input type="checkbox"/> Alcohol <input type="checkbox"/> PBC/PSC <input type="checkbox"/> NASH <input type="checkbox"/> Autoimmune Hepatitis <input type="checkbox"/> Cryptogenic <input type="checkbox"/> Cystic Fibrosis <input type="checkbox"/> Biliary Atresia <input type="checkbox"/> Other	<input type="button" value="Click Here to Calculate"/> Childs-Pugh Class: <input type="text"/>
Liver Disease Comments: <input type="button" value="Expand"/>		Evidence of Liver Disease <input type="checkbox"/> Histologic Cirrhosis <input type="checkbox"/> Evidence of Portal HTN <input type="checkbox"/> Portal Vein Thrombosis <input type="checkbox"/> Abnormal Labs <input type="checkbox"/> Other

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

E: Liver Disease

History of Known Varices	Etiology	Severity/Childs-Pugh
<input type="checkbox"/> Gastric <input type="checkbox"/> Esophageal <input type="checkbox"/> Other Prior Bleed: <input type="text"/> Prior Eradication: <input type="text"/> Last Surveillance Exam: <input type="text"/> Mo: <input type="text"/> Yr: <input type="text"/>	<input type="checkbox"/> Hepatitis B <input type="checkbox"/> Hepatitis C <input checked="" type="checkbox"/> Alcohol Drinking Status: <input type="checkbox"/> binge drinker <input type="checkbox"/> currently drinking <input type="checkbox"/> not currently drinking <input type="checkbox"/> occasional <input type="checkbox"/> social <input type="checkbox"/> unknown <input type="checkbox"/> Biliary Atresia <input type="checkbox"/> Other	<input type="button" value="Click Here to Calculate"/> Childs-Pugh Class: <input type="text"/>
Liver Disease Comments: <input type="button" value="Expand"/>		Evidence of Liver Disease <input type="checkbox"/> Histologic Cirrhosis <input type="checkbox"/> Evidence of Portal HTN <input type="checkbox"/> Portal Vein Thrombosis <input type="checkbox"/> Abnormal Labs <input type="checkbox"/> Other

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

History of Known Varices
 Gastric Esophageal
 Other
 Prior Bleed:
 Prior Eradication:
 Last Surveillance Exam:
 Mo:

Etiology
 Hepatitis B
 Hepatitis C
 Alcohol
 PBC/PSC
 NASH
 Autoimmune Hepatitis

Severity/Childs-Pugh
 Click Here to Calculate
 Childs-Pugh Class:

Calculate Child's-Pugh Score

Factor	1	2	3
encephalopathy:	none <input type="checkbox"/>	mild <input type="checkbox"/>	severe <input type="checkbox"/>
ascites:	none <input type="checkbox"/>	non-tense <input type="checkbox"/>	tense <input type="checkbox"/>
bilirubin:	< 2 <input type="checkbox"/>	2 - 3 <input type="checkbox"/>	> 3 <input type="checkbox"/>
albumin:	> 3.5 <input type="checkbox"/>	2.8 - 3.5 <input type="checkbox"/>	< 2.8 <input type="checkbox"/>
INR or PT (secs > 13):	INR < 1.7 <input type="checkbox"/> PT < 4	INR 1.7 - 2.3 <input type="checkbox"/> PT 5 - 6	INR > 2.3 <input type="checkbox"/> PT > 6

OK Cancel

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

History of Known Varices
 Gastric Esophageal
 Other
 Prior Bleed:
 Prior Eradication:
 Last Surveillance Exam:
 Mo: Yr:

Etiology
 Hepatitis B
 Hepatitis C
 Alcohol
 PBC/PSC
 NASH
 Autoimmune Hepatitis
 Cryptogenic
 Cystic Fibrosis
 Biliary Atresia
 Other

Severity/Childs-Pugh
 Click Here to Calculate
 Childs-Pugh Class:
 A
 B
 C
 Not Known

Evidence of Liver Disease
 Histologic Cirrhosis
 Evidence of Portal HTN
 Portal Vein Thrombosis
 Abnormal Labs
 Other

Liver Disease Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD		Current User: CORI Tech Support		Demonstration Only													
A: Home	Patient: Patient, Fake	Prior exams	New	Date: 01/01/2000	Time: 03:07 PM												
B: History	History of Known Varices <input type="checkbox"/> Gastric <input type="checkbox"/> Esophageal <input type="checkbox"/> Other Prior Bleed: <input type="text"/> Prior Eradication: <input type="text"/> Last Surveillance Exam: Mo: <input type="text"/> Yr: <input type="text"/>	Etiology <input type="checkbox"/> Hepatitis B <input type="checkbox"/> Hepatitis C <input type="checkbox"/> Alcohol <input type="checkbox"/> PBC/PSC <input type="checkbox"/> NASH <input type="checkbox"/> Autoimmune Hepatitis <input type="checkbox"/> Cryptogenic <input type="checkbox"/> Cystic Fibrosis <input type="checkbox"/> Biliary Atresia <input type="checkbox"/> Other	Severity/Childs-Pugh Click Here to Calculate Childs-Pugh Class: <input type="text"/>														
C: PE / Labs			Evidence of Liver Disease <input type="checkbox"/> Histologic Cirrhosis <input type="checkbox"/> Evidence of Portal HTN <input type="checkbox"/> Portal Vein Thrombosis <input checked="" type="checkbox"/> Abnormal Labs <input type="checkbox"/> Protime <input type="checkbox"/> Platelets <input type="checkbox"/> Albumin <input type="checkbox"/> Other <input type="checkbox"/> Other														
D: Proc. Info.																	
E: *Indications																	
E: Liver Disease																	
G: Exam Info																	
H: Findings/Therapy																	
J: Intervent/Events																	
J: Assess/Diag																	
K: Treatment Plan																	
L: Scheduling																	
Liver Disease Comments:			Expand														
<table border="1"> <tr> <td>F1 Help</td> <td>F2 Schedule</td> <td>F3 New</td> <td>F4 Study</td> <td>F5 Exam</td> <td>F6 Reports</td> <td>F7 Lock</td> <td>F8 Patient</td> <td>F9 Staff</td> <td>F10 Utilities</td> <td>F11 Path Rpt</td> <td>F12 Pathways</td> </tr> </table>						F1 Help	F2 Schedule	F3 New	F4 Study	F5 Exam	F6 Reports	F7 Lock	F8 Patient	F9 Staff	F10 Utilities	F11 Path Rpt	F12 Pathways
F1 Help	F2 Schedule	F3 New	F4 Study	F5 Exam	F6 Reports	F7 Lock	F8 Patient	F9 Staff	F10 Utilities	F11 Path Rpt	F12 Pathways						

EGD_ExamInfo

EGD **Current User: CORI Tech Support** **Demonstration Only**

Patient: Prior exams New Date: Time:

A: Home	Exam Information	Sedation Medications Used	Monitoring																																	
B: History	Depth Reached: <input type="text"/>	Appropriate for: <input type="text"/>	BP/Pulse Monitoring Y <input type="checkbox"/> N <input type="checkbox"/>																																	
C: PE / Labs	Depth Intended: <input type="text"/>	Managed By: <input type="text"/>	Oximetry Y <input type="checkbox"/> N <input type="checkbox"/>																																	
D: Proc. Info.	Incomplete Due to: <input type="text"/>	<input type="checkbox"/> General Anesthesia	<input type="checkbox"/> Supplemental O2																																	
E: *Indications	Other Reason Incomplete: <input type="text"/>	<input type="checkbox"/> Residual sedation present																																		
F: Liver Disease	PT Position: <input type="text"/>	<input type="checkbox"/> No sedation given																																		
G: Exam Info	Duration (mins): <input type="text"/>	Patient Intubated? Y <input type="checkbox"/> N <input type="checkbox"/>	Fluoroscopy																																	
H: Findings/Therapy	Vocal Cords Viewed Y <input type="checkbox"/> N <input type="checkbox"/>		Fluoroscopy Used? Y <input type="checkbox"/> N <input type="checkbox"/>																																	
I: Intervent/Events	Gastric Retroflexion Y <input type="checkbox"/> N <input type="checkbox"/>	<table border="1"> <thead> <tr> <th>Medication</th> <th>Dosage</th> <th>Route</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Medication	Dosage	Route																															Fluoro Time/Min: <input type="text"/>
Medication	Dosage	Route																																		
J: Assess/Diag	Image Taken Y <input type="checkbox"/> N <input type="checkbox"/>		Fluoro Notes: <input type="text"/>																																	
K: Treatment Plan	ASA Class: <input type="text"/>																																			
L: Scheduling	Patient Tolerance: <input type="text"/>																																			

Instrument(s) Used	
Instrument	Serial#

Exam Information Comments:

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

Sedation medications grid data found in EGD_Medication_250

Instruments used grid data found in EGD_Instrument_188

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Exam Information	Sedation Medications Used	Monitoring
Depth Reached: <input type="text"/>	Appropriate for: <input type="text"/>	BP/Pulse Monitoring <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>
Depth Intended: <input type="text"/>	Managed By: <input type="text"/>	Oximetry <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>
Incomplete Due to: <input type="text"/>	<input type="checkbox"/> General Anesthesia	<input type="checkbox"/> Supplemental O2
Other Reason: <input type="text"/>	<input type="checkbox"/> Residual sedation present	
Anastomosis Site: <input type="text"/>	<input type="checkbox"/> No sedation given	
<input type="text"/> Duodenum <input type="text"/> Esophagus <input type="text"/> Jejunum <input type="text"/> Stomach	Patient Intubated? <input type="checkbox"/> Y <input type="checkbox"/> N	
PT Position: <input type="text"/>		
Duration (mins): <input type="text"/>	Medication	Dosage
Vocal Cords Viewed <input type="checkbox"/> Y <input type="checkbox"/> N		Route
Gastric Retroflexion <input type="checkbox"/> Y <input type="checkbox"/> N		
Image Taken <input type="checkbox"/> Y <input type="checkbox"/> N		
ASA Class: <input type="text"/>		
Patient Tolerance: <input type="text"/>		
Exam Information Comments: <input type="text"/>		
Expand		

Fluoroscopy Used? Y N
 Fluoro Time/Mins:
 Fluoro Notes:

Instrument(s) Used	
Instrument	Serial#

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Exam Information	Sedation Medications Used	Monitoring
Depth Reached: <input type="text"/>	Appropriate for: <input type="text"/>	BP/Pulse Monitoring <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>
Depth Intended: <input type="text"/>	Managed By: <input type="text"/>	Oximetry <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>
Incomplete Due to: <input type="text"/>	<input type="checkbox"/> General Anesthesia	<input type="checkbox"/> Supplemental O2
Other Reason: <input type="text"/>	<input type="checkbox"/> Residual sedation present	
Anastomosis Site: <input type="text"/>	<input type="checkbox"/> No sedation given	
<input type="text"/> Duodenum <input type="text"/> Esophagus <input type="text"/> Jejunum <input type="text"/> Stomach	Patient Intubated? <input type="checkbox"/> Y <input type="checkbox"/> N	
PT Position: <input type="text"/>		
Duration (mins): <input type="text"/>	Medication	Dosage
Vocal Cords Viewed <input type="checkbox"/> Y <input type="checkbox"/> N		Route
Gastric Retroflexion <input type="checkbox"/> Y <input type="checkbox"/> N		
Image Taken <input type="checkbox"/> Y <input type="checkbox"/> N		
ASA Class: <input type="text"/>		
Patient Tolerance: <input type="text"/>		
Exam Information Comments: <input type="text"/>		
Expand		

Fluoroscopy Used? Y N
 Fluoro Time/Mins:
 Fluoro Notes:

Instrument(s) Used	
Instrument	Serial#

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Exam Information

Depth Reached: [dropdown]
 Depth Intended: [dropdown]
 Incomplete Due to: [dropdown]
 Other Reason: inability to intubate obstruction
 patient combative
 patient discomfort
 patient intolerance
 poor prep
 retained food
 stricture

PT Position: [dropdown]
 Duration (min): [dropdown]
 Vocal Cords V: [dropdown]
 Gastric Retrof: [dropdown]
 Image Taken: Y N
 ASA Class: [dropdown]
 Patient Tolerance: [dropdown]

Sedation Medications Used

Appropriate for: [dropdown]
 Managed By: [dropdown]
 General Anesthesia
 Residual sedation present
 No sedation given
 Patient Intubated? Y N

Medication	Dosage	Route

Monitoring

BP/Pulse Monitoring Y N
 Oximetry Y N
 Supplemental O2

Fluoroscopy

Fluoroscopy Used? Y N
 Fluoro Time/Mins: [dropdown]
 Fluoro Notes: [text area]

Instrument(s) Used

Instrument	Serial#

Exam Information Comments: [text area] Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Exam Information

Depth Reached: [dropdown]
 Depth Intended: [dropdown]
 Incomplete Due to: [dropdown]
 Other Reason Incomplete: [dropdown]

PT Position: [dropdown]
 Duration (mins): [dropdown]
 Vocal Cords V: from side to side
 on left side
 on right side
 Gastric Retrofle: prone
 right side to back
 supine
 Image Taken: [dropdown]
 ASA Class: [dropdown]
 Patient Tolerance: [dropdown]

Sedation Medications Used

Appropriate for: [dropdown]
 Managed By: [dropdown]
 General Anesthesia
 Residual sedation present
 No sedation given
 Patient Intubated? Y N

Medication	Dosage	Route

Monitoring

BP/Pulse Monitoring Y N
 Oximetry Y N
 Supplemental O2

Fluoroscopy

Fluoroscopy Used? Y N
 Fluoro Time/Mins: [dropdown]
 Fluoro Notes: [text area]

Instrument(s) Used

Instrument	Serial#

Exam Information Comments: [text area] Expand

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Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Exam Information	Sedation Medications Used	Monitoring
Depth Reached: [Dropdown]	Appropriate for: [Dropdown]	BP/Pulse Monitoring Y <input type="checkbox"/> N <input type="checkbox"/>
Depth Intended: [Dropdown]	Managed By: [Dropdown]	Oximetry Y <input type="checkbox"/> N <input type="checkbox"/>
Incomplete Due to: [Dropdown]	<input type="checkbox"/> General Anesthesia	<input type="checkbox"/> Supplemental O2
Other Reason Incomplete:	<input type="checkbox"/> Residual sedation present	
PT Position: [Dropdown]	<input type="checkbox"/> No sedation given	
Duration (mins): [Dropdown]	Patient Intubated? Y <input type="checkbox"/> N <input type="checkbox"/>	
Vocal Cords Viewed 10	Medication Dosage Route	Fluoroscopy
Gastric Retroflexion 100		Fluoroscopy Used? Y <input type="checkbox"/> N <input type="checkbox"/>
Image Taken 110		Fluoro Time/Mins: [Dropdown]
ASA Class: 15		Fluoro Notes: [Text Area]
Patient Tolerance: 20		
		Instrument(s) Used
		Instrument Serial#
Exam Information Comments:		Expand

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Exam Information	Sedation Medications Used	Monitoring
Depth Reached: [Dropdown]	Appropriate for: [Dropdown]	BP/Pulse Monitoring Y <input type="checkbox"/> N <input type="checkbox"/>
Depth Intended: [Dropdown]	Managed By: [Dropdown]	Oximetry Y <input type="checkbox"/> N <input type="checkbox"/>
Incomplete Due to: [Dropdown]	<input type="checkbox"/> General Anesthesia	<input type="checkbox"/> Supplemental O2
Other Reason Incomplete:	<input type="checkbox"/> Residual sedation present	
PT Position: [Dropdown]	<input type="checkbox"/> No sedation given	
Duration (mins): [Dropdown]	Patient Intubated? Y <input type="checkbox"/> N <input type="checkbox"/>	
Vocal Cords Viewed Y <input type="checkbox"/> N <input type="checkbox"/>	Medication Dosage Route	Fluoroscopy
Gastric Retroflexion Y <input type="checkbox"/> N <input type="checkbox"/>		Fluoroscopy Used? Y <input type="checkbox"/> N <input type="checkbox"/>
Image Taken Y <input type="checkbox"/> N <input type="checkbox"/>		Fluoro Time/Mins: [Dropdown]
ASA Class: [Dropdown]		Fluoro Notes: [Text Area]
Patient Tolerance: [Dropdown]		
		Instrument(s) Used
		Instrument Serial#
Exam Information Comments:		Expand

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I - Normally healthy patient.
 II - Mild systemic disease (hypertension, mild diabetes...)
 III - Severe systemic disease
 IV - Severe systemic disease which is a constant threat to the patient's life.
 V - Moribund patient who has little chance of survival.

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Exam Information	Sedation Medications Used	Monitoring
Depth Reached: [dropdown]	Appropriate for: [dropdown]	BP/Pulse Monitoring Y <input type="checkbox"/> N <input type="checkbox"/>
Depth Intended: [dropdown]	Managed By: [dropdown]	Oximetry Y <input type="checkbox"/> N <input type="checkbox"/>
Incomplete Due to: [dropdown]	<input type="checkbox"/> General Anesthesia	<input type="checkbox"/> Supplemental O2
Other Reason Incomplete: [text]	<input type="checkbox"/> Residual sedation present	
PT Position: [dropdown]	<input type="checkbox"/> No sedation given	
Duration (mins): [dropdown]	Patient Intubated? Y <input type="checkbox"/> N <input type="checkbox"/>	
Vocal Cords Viewed Y <input type="checkbox"/> N <input type="checkbox"/>	Medication Dosage Route	Fluoroscopy
Gastric Retroflexion Y <input type="checkbox"/> N <input type="checkbox"/>		Fluoroscopy Used? Y <input type="checkbox"/> N <input type="checkbox"/>
Image Taken Y <input type="checkbox"/> N <input type="checkbox"/>		Fluoro Time/Mins: [dropdown]
ASA Class: [dropdown]		Fluoro Notes: [text]
Patient Tolerance: [dropdown]		
excellent fair fair, adequate exam fair, exam compromised good poor		Instrument(s) Used
		Instrument Serial#
Exam Information Comments: [text]		Expand

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Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Exam Information	Sedation Medications Used	Monitoring
Depth Reached: [dropdown]	Appropriate for: [dropdown]	BP/Pulse Monitoring Y <input type="checkbox"/> N <input type="checkbox"/>
Depth Intended: [dropdown]	<input type="checkbox"/> anxiolytic sedation <input type="checkbox"/> deep sedation <input type="checkbox"/> general anesthesia <input type="checkbox"/> moderate (conscious) sedation <input type="checkbox"/> Naso-laryngeal Insufflation <input type="checkbox"/> no sedation	Oximetry Y <input type="checkbox"/> N <input type="checkbox"/>
Incomplete Due to: [dropdown]	Medication Dosage Route	<input type="checkbox"/> Supplemental O2
Other Reason Incomplete: [text]		
PT Position: [dropdown]		Fluoroscopy
Duration (mins): [dropdown]		Fluoroscopy Used? Y <input type="checkbox"/> N <input type="checkbox"/>
Vocal Cords Viewed Y <input type="checkbox"/> N <input type="checkbox"/>		Fluoro Time/Mins: [dropdown]
Gastric Retroflexion Y <input type="checkbox"/> N <input type="checkbox"/>		Fluoro Notes: [text]
Image Taken Y <input type="checkbox"/> N <input type="checkbox"/>		
ASA Class: [dropdown]		Instrument(s) Used
Patient Tolerance: [dropdown]		Instrument Serial#
Exam Information Comments: [text]		Expand

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Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

	Exam Information	Sedation Medications Used	Monitoring
B: History	Depth Reached: <input type="text"/>	Appropriate for: <input type="text"/>	BP/Pulse Monitoring <input type="checkbox"/> Y <input type="checkbox"/> N
C: PE / Labs	Depth Intended: <input type="text"/>	Managed By: <input type="text"/>	Oximetry <input type="checkbox"/> Y <input type="checkbox"/> N
D: Proc. Info.	Incomplete Due to: <input type="text"/>	<input type="checkbox"/> General Anesth	<input type="checkbox"/> Supplemental O2
E: *Indications	Other Reason Incomplete: <input type="text"/>	<input type="checkbox"/> Residual sedation	
E: Liver Disease	PT Position: <input type="text"/>	<input type="checkbox"/> No sedation	
G: Exam Info	Duration (mins): <input type="text"/>	Patient Intubated: <input type="text"/>	
H: Findings/Therapy	Vocal Cords Viewed <input type="checkbox"/> Y <input type="checkbox"/> N	Medication: <input type="text"/>	
I: Intervent/Events	Gastric Retroflexion <input type="checkbox"/> Y <input type="checkbox"/> N		
J: Assess/Diag	Image Taken <input type="checkbox"/> Y <input type="checkbox"/> N		
K: Treatment Plan	ASA Class: <input type="text"/>		
L: Scheduling	Patient Tolerance: <input type="text"/>		
	Exam Information Comments: <input type="text"/>		Expand

Fluoroscopy

Fluoroscopy Used? Y N

Fluoro Time/Mins:

Fluoro Notes:

Instrument(s) Used

Instrument	Serial#

F1 Help
F2 Schedule
F3 New
F4 Study
F5 Exam
F6 Reports
F7 Lock
F8 Patient
F9 Staff
F10 Utilities
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F12 Pathways

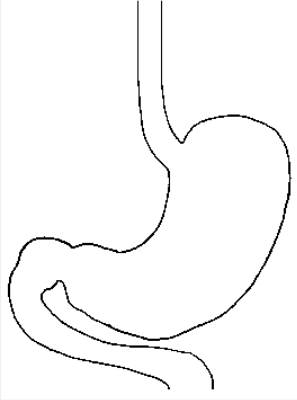
EGD_Finds

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Item for Multiple Selection: Center Print on Report Erase

A: Home
 B: History
 C: PE / Labs
 D: Proc. Info.
 E: *Indications
 F: Liver Disease
 G: Exam Info
H: Findings/Therapy
 I: Intervent/Events
 J: Assess/Diag
 K: Treatment Plan
 L: Scheduling



Findings/Therapy Comments: Expand

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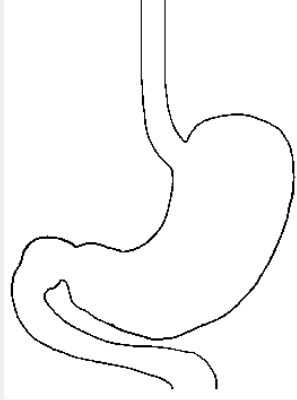
EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Item for Multiple Selection: Center Print on Report Erase

A: Home
 B: History
 C: PE / Labs
 D: Proc. Info.
 E: *Indications
 F: Liver Disease
 G: Exam Info
H: Findings/Therapy
 I: Intervent/Events
 J: Assess/Diag
 K: Treatment Plan
 L: Scheduling

- Tumor
- Varices
- Mallory-Weiss Tear
- Foreign Body / Retained F
- Other Finding
- Polyp
- Nodule
- Healed Ulcer
- Stricture / Stenosis
- Dieulafoy Lesion
- Angiodysplasia (AVMs)
- Ulcer
- Diagnostic Test
- Image Taken
- Normal
- Blood Clot



Findings/Therapy Comments: Expand

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Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

A: Home

B: History

C: PE / Labs

D: Proc. Info.

E: *Indications

E: Liver Disease

G: Exam Info

H: Findings/Therapy

I: Intervent/Events

J: Assess/Diag

K: Treatment Plan

L: Scheduling

Item for Multiple S Erase

Finding Description

Anastomosis

Anatomical Deformity

Angiodysplasia (AVMs)

Barrett's Esophagus

Blood Clot

Diagnostic Test

Dieulafoy Lesion

Esophageal Inflammation

Foreign Body / Retained Food

Healed Ulcer

Hiatal Hernia

Image Taken

Mallory-Weiss Tear

Mucosal Abnormality

Nodule

Normal

NOT SEEN ON EXAM

Other Finding

Polyp

Prior Surgery

Sprue (Celiac Disease)

Stricture / Stenosis

Therapeutic Procedure

Tumor

Ulcer

Varices

Therapy/
Dx Test-F9

Save - F10
✓




Delete - Esc
✗

Expand




Ⓜ F1 Help
📅 F2 Schedule
💡 F3 New
🔍 F4 Stud

📄 F11 Path Rpt
📌 F12 Pathways




EGD_Anastamosis_172

Finding Description	
<input type="text" value="Anastamosis"/>	
Location:	<input type="text"/>
Prior Procedure:	<input type="text"/>
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 	
Save - F10 	
Delete - Esc 	

EGD_AnatomicalDeformity_

Finding Description	
<input type="text" value="Anatomical Deformity"/>	
Location:	<input type="text" value="Antrum"/>
Description:	<input type="text"/>
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 	
Save - F10 	
Delete - Esc 	

EGD_Angiodysplasia_476

Finding Description	
Angiodysplasia (AVMs)	
Total # of AVMs: <input type="text"/>	Max Size (mm): <input type="text"/>
Bleeding Status: <input type="text"/>	
Location: <input type="text" value="Antrum"/>	
Diagnostics:	
<input type="checkbox"/> Biopsy taken	Path #: <input type="text"/>
ICD9: <input type="text"/>	ICD9 <input type="text"/>
Comments: <input type="text"/>	
	Therapy/ Dx Test-F9 
	Save - F10 
	Delete - Esc 

EGD_BarrettsEsophagus_48

Finding Description		
Barrett's Esophagus		
Susp/Est: <input type="text"/>	Therapy/ Dx Test-F9 +	
Margins (cm) from Mouth.		
Proximal: <input type="text"/>		Z Line: <input type="text"/>
Distal: <input type="text"/>		LES: <input type="text"/>
Length of Barrett's (cm): <input type="text"/>		
Inflammation: <input type="text"/>	Save - F10 ✓	
Diagnostics:		
<input type="checkbox"/> Biopsy taken Path #: <input type="text"/>		
<input type="checkbox"/> Brushing done Path #: <input type="text"/>	Delete - Esc ✗	
ICD9: <input type="text"/> ICD9		
Comments: <input type="text"/>		




EGD_BloodClot_3612

Finding Description	
Blood Clot	
Description:	<input type="text"/>
Location:	<input type="text" value="Body"/>
ICD9:	<input type="text"/> ICD9
Comments:	<input type="text"/>
	Therapy/ Dx Test-F9 +
	Save - F10 ✓
	Delete - Esc ✗

EGD_DiagnosticTest_692

Finding Description	
<input type="text" value="Diagnostic Test"/>	
Diagnostics:	
<input type="checkbox"/> Biopsy taken	Path #: <input type="text"/>
<input type="checkbox"/> Random Biopsies	Path #: <input type="text"/>
From Location:	<input type="text" value="Antrum"/>
(to) End Location:	<input type="text" value="Antrum"/>
<input type="checkbox"/> Brushing	Path #: <input type="text"/>
<input type="checkbox"/> Cytology	Path #: <input type="text"/>
<input type="checkbox"/> RUT Results Pending	
<input type="checkbox"/> RUT Complete	
RUT Results:	<input type="text"/>
<input type="checkbox"/> Other	
Reason for test:	<input type="text"/>
Comments:	<input type="text"/>
	Therapy/ Dx Test-F9 +
	Save - F10 ✓
	Delete - Esc ✗

EGD_DieulafoyLesion_475

Finding Description	
<input type="text" value="Dieulafoy Lesion"/>	
Location:	<input type="text" value="Body"/>
Bleeding Status:	<input type="text"/>
Description:	<input type="text"/>
ICD9:	<input type="text"/> ICD9
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 	
Save - F10 	
Delete - Esc 	




EGD_EsophagealInflammati

Finding Description	
Esophageal Inflammation	
Susp/Est:	<input type="text"/>
Etiology:	<input type="text"/>
Severity:	<input type="text"/>
Margins (cm) from Mouth.	
Proximal:	<input type="text"/>
Distal:	<input type="text"/>
Length of Inflam. (cm):	<input type="text"/>
Los Angeles Classification:	<input type="text"/>
Diagnostics:	
<input type="checkbox"/> Brushing done	Path #: <input type="text"/>
<input type="checkbox"/> Biopsy taken	Path #: <input type="text"/>
ICD9:	<input type="text"/> ICD9
Comments: <input type="text"/>	
Therapy/ Dx Test-F9 +	
Save - F10 ✓	
Delete - Esc ✗	




EGD_ForeignBodyRetainedF

Finding Description	
Foreign Body / Retained Food	
<input type="checkbox"/> Foreign Body	<input type="checkbox"/> Retained food
Description:	<input type="text"/>
Location:	<input type="text" value="Antrum"/>
Removed?	Y <input type="checkbox"/> N <input type="checkbox"/>
ICD9:	<input type="text"/> ICD9
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 +	
Save - F10 ✓	
Delete - Esc ✗	




EGD_HealedUlcer_473

Finding Description	
<input type="text" value="Healed Ulcer"/>	
Location: <input type="text" value="Body"/>	Therapy/ Dx Test-F9 
Orient. (o'clock): <input type="text" value=""/> Max Size (mm): <input type="text" value=""/>	
Description: <input type="text"/>	
Diagnostics:	
<input type="checkbox"/> Biopsy taken	Path #: <input type="text"/>
<input type="checkbox"/> RUT Results Pending	
<input type="checkbox"/> RUT Complete	
Results: <input type="text"/>	
ICD9: <input type="text"/>	ICD9
Comments: <input type="text"/>	
Save - F10 	
Delete - Esc 	




EGD_HiatalHernia_457

Finding Description	
<input type="text" value="Hiatal Hernia"/>	
Landmarks (cm) From Mouth: Diaphragm: <input type="text"/> Z-line/GEJ: <input type="text"/>	
Description: <input type="checkbox"/> Regular <input type="checkbox"/> Irregular <input type="checkbox"/> Prolapsing Length (cm): <input type="text"/>	Therapy/ Dx Test-F9 
Other Description: <input type="text"/>	
Diagnostics: <input type="checkbox"/> Biopsy taken Path #: <input type="text"/>	
ICD9: <input type="text"/> ICD9	
Comments: <input type="text"/>	Save - F10 
	Delete - Esc 




EGD_ImageTaken_828

Finding Description	
Image Taken	
Location: <input type="text" value="Antrum"/>	
Image #: <input type="text"/>	
Comments: <input type="text"/>	
	Therapy/ Dx Test-F9 
	Save - F10 
	Delete - Esc 

EGD_Mallory_WeissTear_46

Finding Description	
<input type="text" value="Mallory-Weiss Tear"/>	
Location:	<input type="text" value="Antrum"/>
Bleeding Status:	<input type="text"/>
ICD9:	<input type="text"/> ICD9
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 	
Save - F10 	
Delete - Esc 	




EGD_MucosalAbnormality_4

Finding Description	
Mucosal Abnormality	
Start Location:	Body
End Location:	Body
Folds:	
Mucosa appears:	
<input type="checkbox"/> Erosions	<input type="checkbox"/> Hemorrhage (oozing)
<input type="checkbox"/> Erythema	<input type="checkbox"/> Mosaic / Scaly
<input type="checkbox"/> Friable	<input type="checkbox"/> Mottled
<input type="checkbox"/> Granular	<input type="checkbox"/> Ulcers
	<input type="checkbox"/> Nodularity
	<input type="checkbox"/> Red Spots
	<input type="checkbox"/> Subepithelial Hemorrh.
	<input type="checkbox"/> Portal HPT
Diagnostics:	
<input type="checkbox"/> Biopsy taken	Path #: <input type="text"/>
<input type="checkbox"/> Brushing done	Path #: <input type="text"/>
<input type="checkbox"/> RUT Results Pending	
<input type="checkbox"/> RUT Complete	
RUT Results:	<input type="text"/>
ICD9:	<input type="text"/> ICD9
Comments:	<input type="text"/>
	Therapy/ Dx Test-F9 
	Save - F10 
	Delete - Esc 




EGD_Nodule_472

Finding Description	
<input type="text" value="Nodule"/>	
Max Size (mm): <input type="text"/>	Therapy/ Dx Test-F9 +
Description: <input type="checkbox"/> Mucosal <input type="checkbox"/> Submucosal	
Location: <input type="text" value="Antrum"/>	Save - F10 ✓
Erosions Present? Yes No <input type="checkbox"/> <input type="checkbox"/>	
Diagnostics: <input type="checkbox"/> Biopsy taken Path #: <input type="text"/>	Delete - Esc ✗
<input type="checkbox"/> RUT Results Pending	
<input type="checkbox"/> RUT Complete RUT Results: <input type="text"/>	
ICD9: <input type="text"/> ICD9	
Comments: <input type="text"/>	

EGD_NormalExam_877

Finding Description		
<input type="text" value="Normal"/>		
Start Location: <input type="text" value="Antrum"/>	<input type="text" value="Antrum"/>	
(to) End Location:		
<input type="checkbox"/> Esophagus	Therapy/ Dx Test-F9 	
<input type="checkbox"/> Stomach		
<input type="checkbox"/> Duodenum		
<input type="checkbox"/> Jejunum		
Not Seen:	Save - F10 	
<input type="checkbox"/> Tumor		<input type="checkbox"/> Ulcer
<input type="checkbox"/> Barrett's		<input type="checkbox"/> Esoph Inflammation
<input type="checkbox"/> Mucosal Abn		<input type="checkbox"/> Mallory-Weiss
<input type="checkbox"/> AVM's		<input type="checkbox"/> Foreign Body
<input type="checkbox"/> Polyp		<input type="checkbox"/> Sprue
<input type="checkbox"/> Stricture		<input type="checkbox"/> Varices
<input type="checkbox"/> Other		
Diagnostics:		
Path #: <input type="text"/>		
Comments: <input type="text"/>	Delete - Esc 	




EGD_NotSeenOnExam_140

Finding Description	
NOT SEEN ON EXAM	
Start Location:	Antrum
(to) End Location:	Antrum
Not Seen:	
<input type="checkbox"/> Tumor	<input type="checkbox"/> Ulcer
<input type="checkbox"/> Barrett's	<input type="checkbox"/> Esoph Inflammation
<input type="checkbox"/> Mucosal Abn	<input type="checkbox"/> Mallory-Weiss
<input type="checkbox"/> AVM's	<input type="checkbox"/> Foreign Body
<input type="checkbox"/> Polyp	<input type="checkbox"/> Sprue
<input type="checkbox"/> Stricture	<input type="checkbox"/> Varices
<input type="checkbox"/> Other	
Diagnostics:	
Therapy/ Dx Test-F9 	
Save - F10 	
Delete - Esc 	




EGD_OtherFinding_468

Finding Description	
<input type="text" value="Other Finding"/>	
Description: <input type="text"/>	Therapy/ Dx Test-F9 +
<input type="checkbox"/> Posterior Thickening	
Location: <input type="text"/>	Save - F10 ✓
Diagnostics:	
<input type="checkbox"/> Biopsy taken Path #: <input type="text"/>	
<input type="checkbox"/> Brushing Path #: <input type="text"/>	
<input type="checkbox"/> RUT Results Pending	
<input type="checkbox"/> RUT Complete	
RUT Results: <input type="text"/>	
<input type="checkbox"/> Other Test	
Comments: <input type="text"/>	Delete - Esc ✗
<input type="text"/>	

EGD_Polyp_471

Finding Description	
<input type="text" value="Polyp"/>	
Location: <input type="text" value="Body"/>	Therapy/ Dx Test-F9 
Max Size (mm): <input type="text"/>	
<input type="checkbox"/> Diminutive	
Attachment: <input type="text"/>	
Procedure: <input type="text"/>	Save - F10 
Procedure Results:	
Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Retrieved? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Polyp sent to path Path #: <input type="text"/>	Delete - Esc 
ICD9: <input type="text"/> ICD9	
Comments: <input type="text"/>	




EGD_PriorSurgery_1189

Finding Description	
<input type="text" value="Prior Surgery"/>	
Location: <input type="text" value="Body"/>	Therapy/ Dx Test-F9 
<input type="checkbox"/> Anti-Reflux Surgery <input type="checkbox"/> Banded Gastroplasty <input type="checkbox"/> Billroth I <input type="checkbox"/> Billroth II <input type="checkbox"/> Gastroenterostomy <input type="checkbox"/> Pyloroplasty <input type="checkbox"/> Esophagectomy	
Anastomosis Present? <input type="checkbox"/> Y <input type="checkbox"/> N	Save - F10 
<input type="checkbox"/> Biopsy taken Path #: <input type="text"/> <input type="checkbox"/> Other	
ICD9: <input type="text"/> ICD9	Delete - Esc 
Comments: <input type="text"/>	

EGD_Sprue_779

Finding Description	
<input type="text" value="Sprue (Celiac Disease)"/>	
Susp/Est: <input type="text"/>	Therapy/ Dx Test-F9 +
Mucosal Appearance:	
<input type="checkbox"/> Flat <input type="checkbox"/> Bumpy	
<input type="checkbox"/> Atrophic <input type="checkbox"/> Scalloped	
Diagnostics:	
<input type="checkbox"/> Biopsy taken Path #: <input type="text"/>	
ICD9: <input type="text"/> ICD9	Save - F10 ✓
Comments: <input type="text"/>	
Delete - Esc ✗	




EGD_StrictureStenosis_47

Finding Description	
Stricture / Stenosis	
<input type="checkbox"/> Stenosis	<input type="checkbox"/> Stricture
Location:	<input type="text" value="Body"/>
Severity:	<input type="text"/>
Etiology:	<input type="text"/>
<input type="checkbox"/> Anastomosis site?	
Distance from Mouth (cm):	<input type="text"/>
Lumen Diameter (mm):	<input type="text"/>
Diagnostics:	
<input type="checkbox"/> Biopsy taken	Path #: <input type="text"/>
ICD9:	<input type="text"/> ICD9
Comments:	
<input type="text"/>	
	Therapy/ Dx Test-F9 
	Save - F10 
	Delete - Esc 

EGD_Tumor_458

Finding Description	
<input type="text" value="Tumor"/>	
Benign / Malignant:	<input type="text"/>
Established / Suspected:	<input type="text"/>
Location:	<input type="text" value="Body"/>
Length (cm):	<input type="text"/>
Description:	
<input type="checkbox"/> Circumferential	<input type="checkbox"/> Mucosal
<input type="checkbox"/> Fungating	<input type="checkbox"/> Submucosal
Obstruction:	<input type="text"/>
Diagnostics:	
<input type="checkbox"/> Biopsy taken	Path #: <input type="text"/>
ICD9:	<input type="text"/> ICD9
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 +	
Save - F10 ✓	
Delete - Esc ✗	

EGD_Ulcer_481

Finding Description	
Ulcer	
Location: <input type="text" value="Body"/>	
Orient. (o'clock): <input type="text"/>	
Min Size (mm): <input type="text"/>	Max Size (mm): <input type="text"/>
Description: <input type="text"/>	Therapy/ Dx Test-F9 
Washed with Water? Y <input type="checkbox"/> N <input type="checkbox"/>	
Number cc of water used: <input type="text"/>	
Image Taken? Y <input type="checkbox"/> N <input type="checkbox"/>	
Video Taken? Y <input type="checkbox"/> N <input type="checkbox"/>	
Diagnostics:	
<input type="checkbox"/> Biopsy taken Path #: <input type="text"/>	Save - F10 
<input type="checkbox"/> RUT Results Pending	
<input type="checkbox"/> RUT Complete	
RUT Results: <input type="text"/>	
ICD9: <input type="text"/> ICD9	
Comments: <input type="text"/>	Delete - Esc 

EGD_Varices_465




Finding Description	
<input type="text" value="Varices"/>	
Location (Proximal Level): <input type="text"/>	Therapy/ Dx Test-F9 +
Number of varices: <input type="text"/>	
Distance (cm) from incisioris: Proximal: <input type="text"/> Distal: <input type="text"/>	
Maximum Size: <input type="text"/>	
Activity level of bleeding: <input type="text"/>	
<input type="checkbox"/> Signs of Risk (red wales, cherry red spots)	Save - F10 ✓
ICD9: <input type="text"/> ICD9	
Comments: <input type="text"/>	Delete - Esc ✗

Therapies




(see table names below)

Finding Description	
<input type="text"/>	
APC	
Balloon Tamponade	
Banding	
Bicap/Coagulation	
BoTox Treatment	
Clip(s)	
Dilation	
Glue	
Heater Probe	
Injection	
Laser	
No treatment	
Other treatment	
Stent Placement/Replacement	
Stent Removal	
Tube Placement	
	Therapy/ Dx Test-F9
	Save - F10 ✓
	Delete - Esc ✗

EGD_APC_1

Finding Description	
<input type="text" value="APC"/>	
Location:	<input type="text" value="Body"/>
Finding:	<input type="text"/>
Reason for Procedure:	<input type="text"/>
Watts:	<input type="text"/>
Total Seconds:	<input type="text"/>
Joules:	<input type="text"/>
Setting:	<input type="text"/>
Total Applications:	<input type="text"/>
Outcome:	<input type="text"/>
Comments:	<input type="text"/>
	Therapy/ Dx Test-F9 
	Save - F10 
	Delete - Esc 




EGD_BalloonTamponade_2

Finding Description	
<input type="text" value="Balloon Tamponade"/>	
Action:	<input type="text"/>
Location:	<input type="text" value="Antrum"/>
Finding:	<input type="text"/>
Reason for Procedure:	<input type="text"/>
Outcome:	<input type="text"/>
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 	
Save - F10 	
Delete - Esc 	




EGD_Banding_3

Finding Description	
<input type="text" value="Banding"/>	
Location:	<input type="text" value="Antrum"/>
Finding:	<input type="text"/>
Reason for Procedure:	<input type="text"/>
Total Bands Fired:	<input type="text"/>
Bands Placed(#):	<input type="text"/>
Band Misfired(#):	<input type="text"/>
Banding Device:	<input type="text"/>
Banding Time	
Minutes: <input type="text"/>	Seconds: <input type="text"/>
Outcome:	<input type="text"/>
Comments:	<input type="text"/>
	Therapy/ Dx Test-F9 +
	Save - F10 ✓
	Delete - Esc ✗




EGD_BicapCoagulation_4

Finding Description	
<input type="text" value="Bicap/Coagulation"/>	
Location:	<input type="text" value="Body"/>
Finding:	<input type="text"/>
Reason for Procedure:	<input type="text"/>
Bicap/Coagulator Brands	
Bicap:	<input type="text"/>
<input type="checkbox"/> ERBE	<input type="checkbox"/> Valley Lab
Watts:	<input type="text"/>
Joules:	<input type="text"/>
Setting:	<input type="text"/>
Total Seconds:	<input type="text"/>
Cut (#):	<input type="text"/>
Coagulate (#):	<input type="text"/>
Total Applications:	<input type="text"/>
Outcome:	<input type="text"/>
Comments:	<input type="text"/>
	Therapy/ Dx Test-F9 
	Save - F10 
	Delete - Esc 

EGD_BotoxTreatment_5

Finding Description	
<input type="text" value="BoTox Treatment"/>	
Location:	<input type="text" value="Body"/>
Finding:	<input type="text"/>
Reason for Procedure:	<input type="text"/>
Given at (cm) from Mouth:	<input type="text"/>
Total Units Used:	<input type="text"/>
Number of Quadrants:	<input type="text"/>
Units per Quadrant:	<input type="text"/>
Outcome:	<input type="text"/>
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 	
Save - F10 	
Delete - Esc 	

EGD_Clip_6

Finding Description	
Clip(s)	
Location:	<input type="text" value="Body"/>
Finding:	<input type="text"/>
Reason for Procedure:	<input type="text"/>
Type of Clip:	
<input type="checkbox"/> Marking Clip	
<input type="checkbox"/> Metallic Clip	
<input type="checkbox"/> EndoClip	
<input type="checkbox"/> Other:	
Outcome:	<input type="text"/>
Comments:	<input type="text"/>
	Therapy/ Dx Test-F9 
	Save - F10 
	Delete - Esc 

EGD_Dilation_18

Finding Description			
Dilation			
Location:	Body		
Finding:			
Reason for Procedure:			
<input type="checkbox"/> Performed Under Fluoroscopy			
Dilator	Size (mm)	Resistance	Heme on extraction
Total Number Dilators Used:			
Patient Tolerance:			
Outcome:			
Comments:			




Therapy/
Dx Test-F9
+

Save - F10
✓




Delete - Esc
×

Dilation grid data is not available.




EGD_Glue_19

Finding Description	
<input type="text" value="Glue"/>	
Location:	<input type="text" value="Antrum"/>
Finding:	<input type="text"/>
Reason for Procedure:	<input type="text"/>
Type of Glue:	<input type="text"/>
ccs used:	<input type="text"/>
Outcome:	<input type="text"/>
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 	
Save - F10 	
Delete - Esc 	

EGD_HeaterProbe_34

Finding Description	
<input type="text" value="Heater Probe"/>	
Location:	<input type="text" value="Body"/>
Finding:	<input type="text"/>
Reason for Procedure:	<input type="text"/>
Watts:	<input type="text"/>
Joules:	<input type="text"/>
Setting:	<input type="text"/>
Total Seconds:	<input type="text"/>
Total Applications:	<input type="text"/>
Outcome:	<input type="text"/>
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 	
Save - F10 	
Delete - Esc 	

EGD_Injection_41

Finding Description	
Injection	
Location:	<input type="text" value="Body"/>
Finding:	<input type="text"/>
Reason for Procedure:	<input type="text"/>
injectant:	<input type="text"/>
Number of ccs:	<input type="text"/>
Combined With:	<input type="text"/>
4 Quadrants w/in 1 mm Injected?	Y <input type="checkbox"/> N <input type="checkbox"/>
Outcome:	<input type="text"/>
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 	
Save - F10 	
Delete - Esc 	

EGD_Laser_45

Finding Description	
<input type="text" value="Laser"/>	
Location:	<input type="text" value="Body"/>
Finding:	<input type="text"/>
Reason for Procedure:	<input type="text"/>
Type of Laser:	<input type="text"/>
Watts:	<input type="text"/>
Joules:	<input type="text"/>
Setting:	<input type="text"/>
Total Seconds:	<input type="text"/>
Total Applications:	<input type="text"/>
Outcome:	<input type="text"/>
Comments:	<input type="text"/>
	Therapy/ Dx Test-F9 +
	Save - F10 ✓
	Delete - Esc ✗

EGD_NoTreatment_52

Finding Description	
<input type="text" value="No treatment"/>	
Reason for No Treatment: <input type="text"/>	
Location: <input type="text" value="Body"/>	Therapy/ Dx Test-F9 +
Finding: <input type="text"/>	
Reason for Procedure: <input type="text"/>	
Outcome: <input type="text"/>	
Comments: <input type="text"/>	
	Save - F10 ✓
	Delete - Esc ✗

EGD_OtherTreatment_60

Finding Description	
<input type="text" value="Other treatment"/>	
Treatment: <input type="text"/>	Therapy/ Dx Test-F9 +
Location: <input type="text" value="Antrum"/>	
Finding: <input type="text"/>	
Reason for Procedure: <input type="text"/>	
Outcome: <input type="text"/>	
Comments: <input type="text"/>	
Save - F10 ✓	
Delete - Esc ✗	

EGD_StentPlacementReplac

Finding Description					
Stent Placement/Replacement					
Location:	Body				
Finding:					
Reason for Procedure:					
<input type="checkbox"/> Placement					<input type="checkbox"/> Replacement
Stent	Length (cm)	cm Covered	Diameter	Flange (mm)	Note
<input type="checkbox"/> Proximal Clips Placed? <input type="checkbox"/> Distal Clips Placed?					
<input type="checkbox"/> Performed Under Fluoroscopic Guidance					
<input type="checkbox"/> Injected With Contrast?					
Guidewire Used:					
Outcome:					
Comments:					

Therapy/
Dx Test-F9
+

Save - F10
✓

Delete - Esc
✗




Stent grid data is not available.

EGD_StentRemoval_136

Finding Description					
Stent Removal					
Location:	<input type="text"/>				
Finding:	<input type="text"/>				
Reason for Procedure:	<input type="text"/>				
<input type="checkbox"/> Fluoroscopic Guidance	<input type="checkbox"/> Injected With Contrast				
Instrument	Length (cm)	cm Covered	Diameter (mm)	Flange (mm)	Note
Guidewire Used:	<input type="text"/>				
Guidewire Relationship to Instrument:	<input type="text"/>				
Outcome:	<input type="text"/>				
Comments:	<input type="text"/>				
Therapy/ Dx Test-F9 +					
Save - F10 ✓					
Delete - Esc ✗					

Stent grid data is not available.

EGD_TubePlacement_3843

Finding Description	
Tube Placement	
Location:	<input type="text" value="Body"/>
Finding:	<input type="text"/>
Reason for Procedure:	<input type="text"/>
Procedure:	<input type="text"/>
Tube Type:	<input type="text"/>
Brand:	<input type="text"/>
Size (Fr):	<input type="text"/>
Procedure Information	
Pt Position:	<input type="text"/>
Site ID by:	<input type="text"/>
Abdominal Prep with:	<input type="text"/>
Incision Size (cm):	<input type="text"/>
Site infiltrated with:	<input type="text"/>
Procedure Detail:	
<input type="checkbox"/> Pull PEG	<input type="checkbox"/> Push PEG
<input type="checkbox"/> PEG/J	<input type="checkbox"/> Stayput
<input type="checkbox"/> Other	
Procedure Outcome:	<input type="text"/>
Comments:	<input type="text"/>
Therapy/ Dx Test-F9 	
Save - F10 	
Delete - Esc 	

EGD_Complications

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

<p>A: Home</p> <p>B: History</p> <p>C: PE / Labs</p> <p>D: Proc. Info.</p> <p>E: *Indications</p> <p>F: Liver Disease</p> <p>G: Exam Info</p> <p>H: Findings/Therapy</p> <p>I: Intervent/Events</p> <p>J: Assess/Diag</p> <p>K: Treatment Plan</p> <p>L: Scheduling</p>	<p>Unplanned Interventions</p> <p><input type="checkbox"/> No Intervention Required</p> <p><input type="checkbox"/> Sed. Reversed as Intervention</p> <p><input type="checkbox"/> Oxygen <input type="checkbox"/> Transfusion</p> <p><input type="checkbox"/> Hosp Admit <input type="checkbox"/> Sent to ER</p> <p><input type="checkbox"/> Surgery <input type="checkbox"/> Cautery</p> <p><input type="checkbox"/> IV Fluids</p> <p><input type="checkbox"/> Procedure Stopped</p> <p><input type="checkbox"/> Code 99/CPR</p> <p><input type="checkbox"/> Other</p>	<p>Unplanned Events</p> <p>Any complications? Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>Cardiopulmonary Events</p> <p><input type="checkbox"/> Chest Pain <input type="checkbox"/> Arrhythmia</p> <p><input type="checkbox"/> Bradycardia <input type="checkbox"/> Tachycardia</p> <p><input type="checkbox"/> Wheezing <input type="checkbox"/> Hypotension</p> <p><input type="checkbox"/> Hypertension</p> <p><input type="checkbox"/> Transient Hypoxia</p> <p><input type="checkbox"/> Prolonged Hypoxia</p> <p><input type="checkbox"/> Respiratory Distress</p> <p><input type="checkbox"/> Pulmonary Edema</p> <p><input type="checkbox"/> Vasovagal Reaction</p> <p><input type="checkbox"/> Tracheal Compression</p> <p><input type="checkbox"/> Death <input type="checkbox"/> Other</p> <p><input type="checkbox"/> O2 Saturation less than 95%</p> <p>O2 Saturation (%): <input type="text"/></p>	<p>Gastrointestinal Events</p> <p><input type="checkbox"/> Bleeding <input type="checkbox"/> Perforation</p> <p><input type="checkbox"/> Abd Pain <input type="checkbox"/> Peritonitis</p> <p><input type="checkbox"/> N/V <input type="checkbox"/> Migration</p> <p><input type="checkbox"/> Other</p> <p>Other Events</p> <p>PEG comp/s: <input type="text"/></p> <p>Dilation Comp/s: <input type="text"/></p> <p>Comments: <input type="text"/></p> <p><input type="checkbox"/> Rash/Hives <input type="checkbox"/> Drug React</p> <p><input type="checkbox"/> Prolonged Sed <input type="checkbox"/> DVT</p> <p>Intervention Results</p> <p>Successful? Y <input type="checkbox"/> N <input type="checkbox"/></p> <p><input type="checkbox"/> Hemostasis Achieved</p> <p><input type="checkbox"/> Vital Signs Stabilized</p> <p><input type="checkbox"/> O2 Desaturation Reversed</p> <p><input type="checkbox"/> Spontaneous Resolution</p> <p>Notes: <input type="text"/></p>						
	<p>Intervention Medications</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Medication</th> <th style="width: 50%;">Dosage</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	Medication	Dosage						
Medication	Dosage								
	<p>Interventions and Events Comments: <input style="width: 80%;" type="text"/></p> <p style="text-align: right;">Expand</p>								

F1 Help
F2 Schedule
F3 New
F4 Study
F5 Exam
F6 Reports
F7 Lock
F8 Patient
F9 Staff
F10 Utilities
F11 Path Rpt
F12 Pathways

Unplanned intervention grid data found in EGD_Medications_3929

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Unplanned Interventions

- No Intervention Required
- Sed. Reversed as Intervention
- Oxygen Transfusion
- Hosp Admit Sent to ER
- Surgery Cautery
- IV Fluids
- Procedure Stopped
- Code 99/CPR
- Other

Unplanned Events

Any complications? Y N

Cardiopulmonary Events

- Chest Pain Arrhythmia
- Bradycardia Tachycardia
- Wheezing Hypotension
- Hypertension
- Transient Hypoxia
- Prolonged Hypoxia
- Respiratory Distress

Gastrointestinal Events

- Bleeding Perforation
- Abd Pain Peritonitis
- N/V Migration
- Other

Other Events

PEG comp/s:

Dilation Comp/s:

Comments:

Intervention Medication

Medication	Dosage

Intervention Results

Successful? Y N

- Stasis Achieved
- Signs Stabilized
- Resaturation Reversed
- Spontaneous Resolution

Notes:

Interventions and Events Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

IV Fluids Detail

ccs given:

IV Given:

Close

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Unplanned Interventions

- No Intervention Required
- Sed. Reversed as Intervention
- Oxygen Transfusion
- Hosp Admit Sent to ER
- Surgery Cautery
- IV Fluids
- Code 99/CPR
- Procedure Stopped
- Other

Unplanned Events

Any complications? Y N

Cardiopulmonary Events

- Chest Pain Arrhythmia
- Bradycardia Tachycardia
- Wheezing Hypotension
- Hypertension
- Transient Hypoxia
- Prolonged Hypoxia
- Respiratory Distress
- Pulmonary Edema

Gastrointestinal Events

- Bleeding Perforation
- Abd Pain Peritonitis
- N/V Migration
- Other

Other Events

PEG comp/s:

Dilation Comp/s:

Comments:

Intervention Medication

Medication	Dosage

Intervention Results

Successful? Y N

- Stasis Achieved
- Signs Stabilized
- Resaturation Reversed
- Spontaneous Resolution

Notes:

Interventions and Events Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

Code 99/CPR Detail

- Chest Compression
- Ventilation performed.

Close

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Unplanned Interventions

No Intervention Required

Sed. Reversed as Intervention

Oxygen Transfusion

Hosp Admit Sent to ER

Surgery Cautery

IV Fluids

Procedure Stopped

Code 99/CPR

Other

Intervention Medications

Medication	Dosage

Unplanned Events

Any complications? Y N

Cardiopulmonary Events

Chest Pain Arrhythmia

Bradycardia Tachycardia

Wheezing Hypotension

Hypertension

Transient Hypoxia

Prolonged Hypoxia

Respiratory Distress

Pulmonary Edema

Vasovagal Reaction

Tracheal Compression

Death Other

O2 Saturation less than 95%

O2 Saturation (%):

Gastrointestinal Events

Bleeding Perforation

Abd Pain Peritonitis

N/V Migration

Other

Other Events

PEG comp/s:

Dilation Comp/s:

Comments:

Rash/Hives Drug React

Prolonged Sed DVT

Intervention Results

Successful? Y N

Hemostasis Achieved

Vital Signs Stabilized

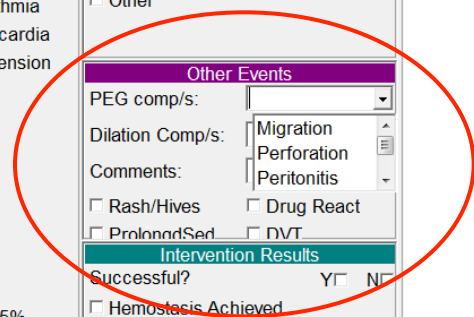
O2 Desaturation Reversed

Spontaneous Resolution

Notes:

Interventions and Events Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways



EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Unplanned Interventions

No Intervention Required

Sed. Reversed as Intervention

Oxygen Transfusion

Hosp Admit Sent to ER

Surgery Cautery

IV Fluids

Procedure Stopped

Code 99/CPR

Other

Intervention Medications

Medication	Dosage

Unplanned Events

Any complications? Y N

Cardiopulmonary Events

Chest Pain Arrhythmia

Bradycardia Tachycardia

Wheezing Hypotension

Hypertension

Transient Hypoxia

Prolonged Hypoxia

Respiratory Distress

Pulmonary Edema

Vasovagal Reaction

Tracheal Compression

Death Other

O2 Saturation less than 95%

O2 Saturation (%):

Gastrointestinal Events

Bleeding Perforation

Abd Pain Peritonitis

N/V Migration

Other

Other Events

PEG comp/s:

Dilation Comp/s:

Other complication (see comments)

Perforation

Rash/Hives Drug React

Prolonged Sed DVT

Intervention Results

Successful? Y N

Hemostasis Achieved

Vital Signs Stabilized

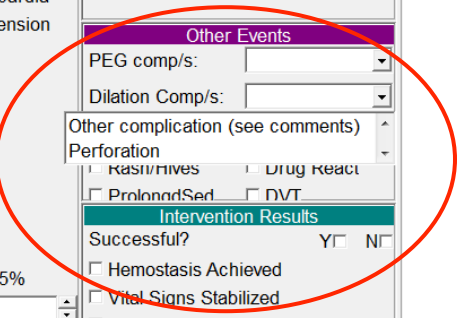
O2 Desaturation Reversed

Spontaneous Resolution

Notes:

Interventions and Events Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways



EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

<p>A: Home</p> <p>B: History</p> <p>C: PE / Labs</p> <p>D: Proc. Info.</p> <p>E: *Indications</p> <p>F: Liver Disease</p> <p>G: Exam Info</p> <p>H: Findings/Therapy</p> <p>I: Intervent/Events</p> <p>J: Assess/Diag</p> <p>K: Treatment Plan</p> <p>L: Scheduling</p>	<p>Unplanned Interventions</p> <p><input type="checkbox"/> No Intervention Required</p> <p><input type="checkbox"/> Sed. Reversed as Intervention</p> <p><input type="checkbox"/> Oxygen <input type="checkbox"/> Transfusion</p> <p><input type="checkbox"/> Hosp Admit <input type="checkbox"/> Sent to ER</p> <p><input type="checkbox"/> Surgery <input type="checkbox"/> Cautery</p> <p><input type="checkbox"/> IV Fluids</p> <p><input type="checkbox"/> Procedure Stopped</p> <p><input type="checkbox"/> Code 99/CPR</p> <p><input type="checkbox"/> Other</p>	<p>Unplanned Events</p> <p>Any complications? Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>Cardiopulmonary Events</p> <p><input type="checkbox"/> Chest Pain <input type="checkbox"/> Arrhythmia</p> <p><input type="checkbox"/> Bradycardia <input type="checkbox"/> Tachycardia</p> <p><input type="checkbox"/> Wheezing <input type="checkbox"/> Hypotension</p> <p><input type="checkbox"/> Hypertension</p> <p><input type="checkbox"/> Transient Hypoxia</p>	<p>Gastrointestinal Events</p> <p><input type="checkbox"/> Bleeding <input type="checkbox"/> Perforation</p> <p><input type="checkbox"/> Abd Pain <input type="checkbox"/> Peritonitis</p> <p><input type="checkbox"/> N/V <input type="checkbox"/> Migration</p> <p><input type="checkbox"/> Other</p> <p>Other Events</p> <p>PEG comp/s: <input type="text"/></p> <p>on Comp/s: <input type="text"/></p> <p>ents: <input type="text"/></p> <p>sh/Hives <input type="checkbox"/> Drug React</p> <p>mondSed <input type="checkbox"/> DVT</p>								
			<p>Intervention Results</p> <p><input type="checkbox"/> Successful? Y <input type="checkbox"/> N <input type="checkbox"/></p> <p><input type="checkbox"/> Hemostasis Achieved</p> <p><input type="checkbox"/> Vital Signs Stabilized</p> <p><input checked="" type="checkbox"/> O2 Desaturation Reversed</p> <p><input type="checkbox"/> Spontaneous Resolution</p> <p>Notes: <input type="text"/></p>								
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Medication	Dosage										
	<p>Interventions and Events Comments: Expand</p>										

O2 Desaturation Reversed Detail

O2 Saturation (%):

Close

--	--	--	--	--	--	--	--	--	--	--	--

EGD_Assessment

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake | Prior exams | New | Date: 01/01/2000 | Time: 03:07 PM

B: History Assessment

- Incomplete Exam
- Abnormal Findings
- Normal

Assessment Comments

Diagnoses

Category	ICD-9 Codes	Comments

E: *Indications

E: Liver Disease

G: Exam Info

H: Findings/Therapy

I: Intervent/Events

J: Assess/Diag

K: Treatment Plan

L: Scheduling

Assessment and Diagnosis Comments Expand

F1 Help
 F2 Schedule
 F3 New
 F4 Study
 F5 Exam
 F6 Reports
 F7 Lock
 F8 Patient
 F9 Staff
 F10 Utilities
 F11 Path Rpt
 F12 Pathways

Diagnosis grid data available in EGD_Category_4112

EGD_Treatment

EGD
Current User: CORI Tech Support
Demonstration Only - x

A: Home

B: History

C: PE / Labs

D: Proc. Info.

E: *Indications

E: Liver Disease

G: Exam Info

H: Findings/Therapy

I: Intervent/Events

J: Assess/Diag

K: Treatment Plan

L: Scheduling

Patient: Patient, Fake ▼
Prior exams New
Date: 01/01/2000 📅
Time: 03:07 PM ⌵

Post Exam Instructions

When to Call What to Expect

Sedation Activity Levels

Hm. Hemoccult Tests # of Cards: ▼

NPO for: Liquids:

Resume Prior Diet:

No Alcohol:

Hold ASA/NSAIDS:

Restart Medications:

Findings Related Recommendations

Standard Instructions For:

Ulcer Barrett's

Hiatal Hernia Reflux

Stenosis / Stricture Varices

Mucosal Abnormality Polyps

Normal Exam Other Finding

Special Instructions:

Medication Plan

Await Pathology DC Current Medications No Meds Required

Medications per referring provider Continue current medications

Med Type	Med	Dose	sig	Start Date	Duration	DC'd

Treatment Plan Comments: Expand

F1 Help
 F2 Schedule
 F3 New
 F4 Study
 F5 Exam
 F6 Reports
 F7 Lock
 F8 Patient
 F9 Staff
 F10 Utilities
 F11 Path Rpt
 F12 Pathways

Medication plan grid data available in EGD_MedType_321

Scheduling

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Disposition

After Procedure Patient Sent:

After Recovery Patient Sent:

Scheduling and Referral

Await Pathology to schedule patient

Follow-up prn

Activity	To Whom	Comments	When	Date

Scheduling Comments: Expand

F1 Help **F2 Schedule** **F3 New** **F4 Study** **F5 Exam** **F6 Reports** **F7 Lock** **F8 Patient** **F9 Staff** **F10 Utilities** **F11 Path Rpt** **F12 Pathways**

Scheduling activity grid data available in EGD_Activity_330

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Disposition

After Procedure Patient Sent:

After Recovery Patient Sent:

- back to hospital ward
- home
- remain in endo suite for second procedure
- remain in ICU
- to hospital for admission
- to NICU
- to PICU
- to recovery
- to short stay unit
- to surgery

Scheduling at

Await Pathology to schedule patient

Follow-up prn

Activity	To Whom

Scheduling Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:07 PM

Disposition

After Procedure Patient Sent:

After Recovery Patient Sent:

- back to hospital
- home
- to hospital for admission

Scheduling at

Await Pathology to schedule patient

Follow-up prn

Activity	To Whom	Comments	when	Date

Scheduling Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD_Pathology

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:06 PM

Pathology

Biopsy Description	Results	Modifier	Comments

Pathology Report

Correspondence - Results

Normal H. pylori

Barrett's Ulcer

Notes:

Correspondence - Follow-Ups

No further PMD

Nurse Will Call

Notes:

Follow-Up Results

Action	Note

Post Exam Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

Pathology grid data available in EGD_BiopsyDescription_33

Followup grid data available in EGD_Action_332

EGD_FUPInfo

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:06 PM

	Post Exam Patient Information	Patient Satisfaction		
A: Home	Encounter Type: <input type="text"/>	How does pt feel post exam?: <input type="text"/>		
B: History	Information From: <input type="text"/>	Did pt feel prepared for procedure? <input type="checkbox"/> Y <input type="checkbox"/> N		
C: PE / Labs	Any problems with where IV was inserted? <input type="checkbox"/> Y <input type="checkbox"/> N	Was the pt groggy after procedure? <input type="checkbox"/> Y <input type="checkbox"/> N		
D: Proc. Info.	Did pt understand the dischg instructions? <input type="checkbox"/> Y <input type="checkbox"/> N	If yes, how many hours?: <input type="text"/>		
E: *Indications	Did pt have questions regarding follow-up? <input type="checkbox"/> Y <input type="checkbox"/> N	Any complaints about Procedure? <input type="checkbox"/> Y <input type="checkbox"/> N		
E: Liver Disease	Did pt take post exam Rxs as prescribed? <input type="checkbox"/> Y <input type="checkbox"/> N	If yes, what?: <input type="text"/>		
G: Exam Info	If not, explain: <input type="text"/>	Any suggestions for improvement? <input type="checkbox"/> Y <input type="checkbox"/> N		
H: Findings/Therapy	Complete Post Exam Events section if necessary	if yes, what?: <input type="text"/>		
Post Exam Events				
Event Type	Event	Date Occurred	Intervention	Comments
M: Post Exam	Follow-up Information and Events Comments:			Expand
N: F/up Info/Events				

F1 Help
F2 Schedule
F3 New
F4 Study
F5 Exam
F6 Reports
F7 Lock
F8 Patient
F9 Staff
F10 Utilities
F11 Path Rpt
F12 Pathways

Post exam event grid data available in EGD_EventType_107

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:06 PM

Post Exam Patient Information

Encounter Type:

Information From:

Any problems with where IV was placed?

Did pt understand the discharge instructions?

Did pt have questions regarding follow-up? Y N

Did pt take post exam Rxs as prescribed? Y N

If not, explain:

Complete Post Exam Events section if necessary

Post Exam Patient Information

How does pt feel post exam?:

Did pt feel prepared for procedure? Y N

Was the pt groggy after procedure? Y N

If yes, how many hours?:

Any complaints about Procedure? Y N

If yes, what?:

Any suggestions for improvement? Y N

if yes, what?:

Post Exam Events

Event Type	Event	Date Occurred	Intervention	Comments

Follow-up Information and Events Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:06 PM

Post Exam Patient Information

Encounter Type:

Information From:

Any problems with where IV was placed?

Did pt understand the discharge instructions?

Did pt have questions regarding follow-up? Y N

Did pt take post exam Rxs as prescribed? Y N

If not, explain:

Complete Post Exam Events section if necessary

Post Exam Patient Information

How does pt feel post exam?:

Did pt feel prepared for procedure? Y N

Was the pt groggy after procedure? Y N

If yes, how many hours?:

Any complaints about Procedure? Y N

If yes, what?:

Any suggestions for improvement? Y N

if yes, what?:

Post Exam Events

Event Type	Event	Date Occurred	Intervention	Comments

Follow-up Information and Events Comments: Expand

F1 Help F2 Schedule F3 New F4 Study F5 Exam F6 Reports F7 Lock F8 Patient F9 Staff F10 Utilities F11 Path Rpt F12 Pathways

EGD Current User: CORI Tech Support Demonstration Only

Patient: Patient, Fake Prior exams New Date: 01/01/2000 Time: 03:06 PM

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