

Resource Tool: History of Present Illness (HPI)

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History of Present Illness (HPI) is the chronological description of the development of the patient's present illness from the first sign and/or symptom, or from the previous encounter to the present. The HPI must be documented by the provider. When taking an HPI, the provider asks questions focusing on the eight elements listed below.

LOCATION: Where in or on the body the signs and/or symptoms are occurring. Location includes a site of injury or illness, anatomical body area or the site of the chief complaint.

Example: Right upper quadrant abdominal pain

Statements: right, left, upper, upper, lower, posterior, anterior, distal proximal, 2nd digit, unilateral, bilateral

Question: *Can something like "shortness of breath" be used as a location?*

Answer: *No. If one is short of breath, it cannot be assumed that it is from the "lungs." It could be due to the heart, fatigue, or some other malady.*

QUALITY: The patient's statement regarding characteristics about the problem using adjectives to describe the type of sign and/or symptoms as to how it looks or feels.

Example: The patient has a throbbing headache

Statements: crampy, stabbing, shooting, dull, burning, purple and blotchy, metallic taste, whistling sound, green, itchy, acute, chronic

SEVERITY: Descriptive statement depicting the severity of symptoms. A degree or measurement of how bad the problem is.

Example: The patient states the pain is worse than the pain of kidney stones.

Statements: severe, improving, moderate, intolerable, unable to, scale of 1-10, much better, slight, worsening, better than

DURATION: The patient's statement regarding how long the complaint has occurred or the time when the complaint first occurred.

Example: The patient was injured last night

Statements: for a week, since yesterday, months, years, since childhood, started today

TIMING: Indication of the number of occurrences or at what frequency the patient notices the complaint.

Example: The patient has nausea and vomiting at night

Statements: daily, intermittent, constant, frequent, ten minutes after, comes and goes, a pattern, every 30 minutes, sporadic

CONTEXT: The patient's statement regarding what the patient was doing, the environmental factors and the circumstances surrounding the complaint when it occurred.

Example: The patient was sharpening a knife when she cut her finger

Statements: occurred at, during, while, gradually over time, suddenly after a fall, motor vehicle accident, during recreational activity

MODIFYING FACTORS: Patient's statement as to remedies tried for relief of a condition

Example: The patient has applied heat to the injured area and has taken Tylenol for the pain.

Statement: ice, elevation, rest, exacerbated by, relieved by, not affected by, aggravated by activity, improves with activity

ASSOCIATED SIGNS AND SYMPTOMS: The patient's statement regarding associated secondary complaints or other signs and symptoms the patient is experiencing. This is sometimes captured alongside the chief complaint.

Example: The patient has also experienced blurred vision since the onset of her headache.

Statements: associated with, along with, accompanying, pertinent positives & negatives

Resource Tool: History of Present Illness (HPI)*Generated on: 01/26/2018***Using Status of Chronic Conditions**

- The **status of chronic conditions** can be documented in lieu of HPI elements. If documenting the status of chronic conditions, each condition must be summarized. For example, “Diabetes well controlled on Metformin,” “GERD worsens without PPI,” “Dermatitis is under control and patient seen regularly in a Dermatology clinic.”

Coding

There are two types of HPI identified for the purpose of coding:

- A **brief** HPI consists of 1-3 elements from the list below or the documentation of the status of 1-2 chronic conditions.
- An **extended** HPI consists of at least 4 elements from the list below or documentation of the status of at least 3 chronic conditions

References:

- Decision Health
- American Academy of Professional Coders

This is not a coding directive, but an informal coding guidance based on the date generated. These resource tools will not be regularly reviewed and updated. Please refer to the most recent references and resources available.

The examples given do not represent all coding cases. Every case is individual and discretion may need to be used.