

Resource Tool: Review of Systems
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Review of Systems (ROS) is an inventory of body systems obtained through a series of questions seeking to identify signs and/or symptoms which the patient may be experiencing. The provider reviews systems based on information gathered from the history of present illness (HPI) and helps define the problem. . For the purposes of assigning an Evaluation & Management (E/M) code, the following elements of a system review have been identified:

CONSTITUTIONAL: Average weight, weight loss or gain, general state of health, sense of well-being, strength, ability to conduct usual activities, exercise tolerance

INTEGUMENTARY: Rash, itching, pigmentation, moisture or dryness, texture, changes in hair growth or loss, nail changes, breast lumps, tenderness, swelling, nipple discharge

EYES: Vision, double vision, tearing, blind spots, pain

EARS/NOSE/MOUTH/THROAT: Nose bleeding, colds, obstruction, discharge, dental difficulties, gingival bleeding, dentures, neck stiffness, pain, tenderness, masses in thyroid or other areas

CARDIOVASCULAR: Precordial pain, substernal distress, palpitations, syncope, dyspnea on exertion, orthopnea, nocturnal paroxysmal dyspnea, edema, cyanosis, hypertension, heart murmurs, varicosities, phlebitis, claudication

RESPIRATORY: Pain (location, quality, relation to respiration), shortness of breath, wheezing, stridor, cough (time of day, productive, amount and color of sputum), hemoptysis, respiratory infections, tuberculosis (or exposure to tuberculosis), fever or night sweats

GASTROINTESTINAL: Appetite, dysphagia, indigestion, food idiosyncrasy, abdominal pain, heartburn, eructation, nausea, vomiting, hematemesis, jaundice, constipation, diarrhea, abnormal stools (clay-colored, tarry, bloody), flatulence, hemorrhoids, recent changes in bowel habits

GENITOURINARY: Urgency, frequency, dysuria, nocturia, hematuria, polyuria, oliguria, unusual or change in color of urine, stones, infections, nephritis, hesitancy, change in size of stream, dribbling, acute retention or incontinence, libido, potency, genital sores, discharge, venereal disease, female age of onset of menses, regularity, last period, dysmenorrhea, menorrhagia, or metrorrhagia, vaginal discharge, post-menopausal bleeding, dyspareunia, number and results of pregnancies (gravida, para)

MUSCULOSKELETAL: Pain, swelling, redness or heat of muscles or joints, limitation of motion, muscular weakness, atrophy, cramps

NEUROLOGIC: Convulsions, paralysis, tremor, incoordination, paresthesia, difficulties with memory or speech, sensory or motor disturbances or muscular coordination (ataxia, tremor)

PSYCHIATRIC: Predominant mood "nervousness" (define), emotional problems, anxiety, depression, previous psychiatric care, unusual perceptions, hallucinations

ALLERGIC/IMMUNOLOGIC: Reactions to drugs, food, insects, skin rashes

HEMATOLOGIC/LYMPHATIC: Anemia, bleeding tendency, previous transfusions and reactions, Rh incompatibility, local or general lymph node enlargement or tenderness

ENDOCRINE: Polydipsia, polyuria, asthenia, hormone therapy, growth, secondary sexual development, intolerance to heat or cold

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Coding

There are three types of ROS identified for the purpose of coding:

- A **problem pertinent** ROS consists of the patient's positive responses and pertinent negatives for the system related to the chief complaint.
- An **extended** ROS consists of the patient's positive responses and pertinent negatives for two to nine body systems.
- A **complete** ROS consists of the patient's positive responses and pertinent negatives for at least ten organ systems.

Supported ROS Statements:

- CU Medicine requires each system to be documented with the positive or pertinent negative responses.
- Examples: *Each of these examples demonstrates documentation of 5 ROS.*
 - "Patient denies chest pain, shortness of breath, double vision, neck stiffness, nausea"
 - "Cardiovascular and respiratory systems are negative. Patient is positive for muscular weakness, paresthesia and abdominal pain"
 - ROS:
 - Constitutional: + fatigue.
 - Eyes: + loss of peripheral vision.
 - ENMT: No complaints.
 - Cardiovascular: + palpitations
 - Respiratory: + SOB on exertion

Unsupported ROS Statements:

- "A '10' point ROS is negative" without documentation of any individual systems listed. (Note: This would be applicable whenever, a "__ point ROS" is documented, regardless of the number).
- "ROS is negative except as in HPI" without documentation of any individual systems listed.

****If you are seeing examples of unacceptable ROS statements, please notify ACE to provide education to the provider****

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.

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