

A. Number of Diagnosis or Treatment Options

CATEGORIES FOR PROBLEMS/MAJOR NEW SYMPTOMS	NUMBER	POINTS	RESULTS
Self-limited or minor (stable, improved or worsening)	MAX = 2	1	
Established problem (to examining physician); stable, improved		1	
Established problem (to examining physician); worsening		2	
New problem (to examining physician); no add'l workup planned	MAX = 1	3	
New problem (to examining physician); add'l workup planned		4	
		TOTAL	

B. Amount and/or Complexity of Data to be Reviewed

CATEGORIES OF DATA TO BE REVIEWED	POINTS
Review and/or order of clinical lab tests	1
Review and/or order of tests in the radiology section of CPT (nuclear medicine and all imaging except echocardiography and cardiac cath)	1
Review and/or order of tests in the medicine section of CPT (examples: EEG, echocardiography, cardiac cath, non-invasive vascular studies, pulmonary function studies, psychological testing, endoscopy)	1
Discussion of test results with performing physician	1
Decision to obtain old records and/or obtain history from someone other than patient	1
Review and summarization of old records and/or obtaining from someone other than patient and/or discussion of case with another health care provider	2
Independent visualization of image, tracing or specimen itself (not simply review of report)	2

Total _____

C. TABLE OF RISK OF COMPLICATIONS AND/OR MORBIDITY OR MORTALITY

Level of Risk	Presenting Problem(s)	Diagnostic Procedure(s) Ordered	Management Options Selected
Minimal	<ul style="list-style-type: none"> One self-limited or minor problem, e.g. cold, insect bite, linea corporis 	<ul style="list-style-type: none"> Lab tests requiring venipuncture Chest x-ray EKG/EEG Urinalysis Ultrasound, e.g. echocardiography KOH prep 	<ul style="list-style-type: none"> Rest Gargles Elastic bandages Superficial dressings
Low	<ul style="list-style-type: none"> Two or more self-limited or minor problems One stable chronic illness, e.g. well controlled hypertension or non-insulin dependent diabetes, cataract, BPH Acute uncomplicated illness or injury, e.g. cystitis, allergic rhinitis, simple sprain 	<ul style="list-style-type: none"> Physiologic tests not under stress, e.g. pulmonary function tests Non-cardiovascular imaging studies with contrast, e.g. barium enema Superficial needle biopsies Clinical laboratory tests requiring arterial puncture Skin biopsies 	<ul style="list-style-type: none"> Over-the-counter drugs Minor surgery with no identified risk factors Physical Therapy Occupational Therapy IV fluids without additives
Moderate	<ul style="list-style-type: none"> One or more chronic illnesses with mild exacerbation, progression, or side effects of treatment Two or more stable chronic illnesses Undiagnosed new problem with uncertain prognosis, e.g. lump in breast Acute illness with systemic symptoms, e.g. pyelonephritis, pneumonitis, colitis Acute complicated injury, e.g. head injury with brief loss of consciousness 	<ul style="list-style-type: none"> Physiologic tests under stress, e.g. cardiac stress test, fetal contraction stress test Diagnostic endoscopies with no identified risk factors Deep needle or incisional biopsy Cardiovascular imaging studies with contrast and no identified risk factors, e.g. arteriogram, cardiac cath Obtain fluid from body cavity, e.g. lumbar puncture, thoracentesis, culdocentesis 	<ul style="list-style-type: none"> Minor surgery with identified risk factors Elective major surgery (open, percutaneous or endoscopic) with no identified risk factors Prescription drug management Therapeutic nuclear medicine IV fluids with additives Closed treatment of fracture or dislocation without manipulation
High	<ul style="list-style-type: none"> One or more chronic illnesses with severe exacerbation, progression or side effects of treatment Acute or chronic illnesses or injuries that may pose a threat to life or bodily function, e.g. multiple trauma, acute MI, pulmonary embolus, severe respiratory distress, progressive severe rheumatoid arthritis, psychiatric illness with potential threat to self or others, peritonitis, acute renal failure An abrupt change in neurologic status, e.g. seizure, TIA, weakness, or sensory loss 	<ul style="list-style-type: none"> Cardiovascular imaging studies with contrast with identified risk factors Cardiac electrophysiological tests Diagnostic endoscopies with identified risk factors Discography 	<ul style="list-style-type: none"> Elective major surgery (open, percutaneous, endoscopic) with identified risk factors Emergency major surgery (open, percutaneous or endoscopic) Parenteral controlled substances Drug therapy requiring intensive monitoring for toxicity Decision not to resuscitate or to de-escalate care because of poor prognosis

FINAL RESULTS FOR COMPLEXITY

A	Number diagnoses or management options	≤ 1 Minimal	2 Limited	3 Multiple	≥ 4 Extensive
B	Amount and complexity of data	≤ 1 Minimal or low	2 Limited	3 Moderate	≥ 4 Extensive
C	Highest risk	Minimal	Low	Moderate	High
Type of decision making	Based on the 2 highest columns of the 3 listed	STRAIGHT-FORWARD	LOW COMPLEXITY	MODERATE COMPLEXITY	HIGH COMPLEXITY