

# SOAP EXAM NOTE TEMPLATE

## **S: Subjective**

CC: "I am in pain" for example

Presents for: Comprehensive Exam, Recare Exam, Emergency Exam

Med Hx: Reviewed and no contraindications (or explain special considerations)

Med Consult needed: Yes/ No

Premed needed: Yes/ No (medication, dosage)

## **O: Objective**

Exam: Evaluate/ re-evaluate caries and periodontal risk

Vitals: BP/ Pulse

Extraoral examination was performed: within normal limits or with significant findings

Intraoral examination was performed: within normal limits or with significant findings

Radiographs taken: BWX/ PAN/ FMX

ROE and Odontogram completed

Consults obtained: List consults with department and faculty names

## **A: Assessment**

Diagnosis:

Perio Dx: Dx and Tx recommended

Caries and restorative dx: Caries active/ inactive. See ROE.

CAMBRA Risk: Level and caries management if moderate or high

## **P: Procedure notes**

Case presented to PC: PC name

Comments: Specific information discussed with the patient (include any important questions answered/ information discussed with the patient). Patient understood and agreed. Treatment plan approved and accepted by patient after discussion of risks, benefits, and alternatives.

Consents obtained: Financial, Medical, Privacy, General, Covid, Telehealth

Treatment Plan established: Please refer to Tx (include name and date)

Rx: If given

NV:

## **GROUP PRACTICE CASE NOTE (at the end of the exam, when it's ready)**

\_\_ year old male/female presents for a 150/120 exam.

The medical history was reviewed and the patient reports changes (fill in changes)/no changes.

No contraindications to today's treatment.

VITALS:

BP:

Pulse:

CAMBRA risk: \_\_\_\_\_

PERIODONTAL Dx: (use AAP)

RADIOGRAPHS TAKEN:

IMPRESSIONS TAKEN:

Consultations obtained with:

**Preferred name/ title/ pronouns:**

**Preferred method of contact:**

**Preferred language, if not English speaking:**

NV: Procedure