

## Documenting the Patient Education Protocols and Codes

Disease	Education Topic	Level of Understanding	Time	Provider Initials	Behavior Goal
Obesity	Exercise	Group	30	XYZ	Goal set: patient will add 30 minutes of exercise to daily routine
OBS-EX-GP-30min-XYZ-GS; Add 30 minutes of exercise to daily routine					
<b>Level of Understanding</b>					
Good (G)	Fair (F)	Poor (P)	Refuse (R)	Group (Gp)	
Verbalizes understanding. Verbalizes decision or desire to change (plan of action indicated). Able to return demonstrate correctly	Verbalizes need for more education. Undecided about making a decision or a change. Return demonstration indicates need for further teaching.	Does not verbalize understanding. Refuses to make a decision or needed changes. Unable to return demonstrate	Refuses Education	Education provided in group. Unable to evaluate individual response	
<b>Behavior Goal</b>					
Goal Set (GS)	Goal Met (GM)	Goal Not Met (GNM)			
State a plan; State a plan how to maintain at least one ____; Write a plan of management; Plan to change ____; A plan to test ____ (blood sugar); Choose at least one change to follow ____; Demonstrate ____ and state a personal plan for ____; Identify a way to cope with ____;	Behavior Goal Met	Behavior Goal Not Met			

To view the complete Patient Education Protocols and Codes Manual, visit:

[www.ihs.gov](http://www.ihs.gov).

Click on Nationwide Programs and Initiatives, *look in the upper right-hand corner*, and then click on the link to the Patient Education Protocols and Code Manual. You may down-load this pamphlet from the link.

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# Patient and Family Education Protocols and Codes (PEPC)

## Prenatal/Perinatal Codes

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## Why Use the Codes?

Use of the codes helps nurses, physicians and other health care providers to document and track patient education. While it is frequently desirable to spend 15, 30 even 60 minutes making an assessment of need, providing education and then documenting the encounter, the reality of a busy clinical practice often requires us to do this in a more abbreviated fashion. The codes allow the educator a quick method of documenting that education took place during a given patient visit. The codes are then transferred to the health summary which informs everyone using the chart that a given patient received education on specific topics. The codes are limited in that they do not detail the exact nature of the education. However, using these codes consistently will show the pattern of education provided and encourage subsequent health professionals to do the appropriate follow-up. For instance, a typical health summary for a diabetic patient might show the following history of patient education:

07/19/04 DM-Nutrition, poor understanding, 10 min. (Provider Initials) GS: Pt. will include 5 veg/fruit/day

10/27/04 DM-Foot care, good understanding, 7 min. (Provider Initials) GM: Pt included 5 veg/fruit/day

11/07/04 DM-Exercise, good understanding, 15 min. (Provider Initials) GS: Pt. will walk 5 dys/wk/30 min.

A reasonable interpretation of this summary tells you that this patient is trying to understand management of their diabetes.

## SOAP Charting and the Codes

Use of the codes *does not* preclude writing a SOAP note on educational encounters. Whenever a health professional spends considerable time providing education in a one-on-one setting, that visit should be recorded as an independent, stand-alone visit. The primary provider can incorporate the educational information into their SOAP note and use the code to summarize the visit and get the information onto the health summary. If the patient sees both a physician and a nurse during the same visit and the nurse completes a lengthy educational encounter, two PCC forms should be used—one for the physician visit and one for the nursing visit. In that particular case the patient had two primary care encounters during the same day.

SIDS-SHS Second-Hand Smoke

**SPE**

**SURGICAL PROCEDURES AND ENDOSCOPY**

SPE-C Complications

SPE-CUL Cultural/Spiritual Aspects of Health

SPE-EQ Equipment

SPE-FU Follow-up

SPE-IS Incentive Spirometry

SPE-L Patient Information Literature

SPE-PM Pain Management

SPE-PO Postoperative

SPE-PR Preoperative

SPE-PRO Procedures

SPE-TCB Turn, Cough, Deep Breath

SPE-TE Tests

SPE-WC Wound Care

**TO**

**TOBACCO USE**

TO-C Complications

TO-CUL Cultural/Spiritual Aspects of Health

TO-DP Disease Process

TO-EX Exercise

TO-FU Follow-up

TO-L Patient Information Literature

TO-LA Lifestyle Adaptations

TO-M Medications

TO-QT Quit

TO-RTC Readiness to Change

TO-SCR Screening

TO-SHS Second-Hand Smoke

TO-SM Stress Management

**UTI**

UTI-AP

UTI-DP

UTI-FU

UTI-HY

UTI-L

Patient Information Literature

UTI-M Medication

UTI-MNT Medical Nutrition Therapy

UTI-N Nutrition

UTI-P Prevention

UTI-PM Pain Management

UTI-SM Stress Management

UTI-TE Tests

**WH**

**WOMEN'S HEALTH**

WH-AP Anatomy and Physiology

WH-BE Breast Exam

WH-CUL Cultural/Spiritual Aspects of Health

WH-FU Follow-up

WH-HY Hygiene

WH-KE Kegel Exercise

WH-L Patient Information Literature

WH-MNT Medical Nutrition Therapy

WH-MP Menopause

WH-MS Menses

WH-N Nutrition

WH-OS Osteoporosis

WH-PAP Pap Smear

WH-PMS Premenstrual Syndrome

WH-PRO Procedures

WH-RS Reproductive System

WH-SM Stress Management

WH-STI Sexually Transmitted Infections

WH-TE Tests

PDEP-LA Lifestyle Adaptations  
 PDEP-M Medications  
 PDEP-MNT Medical Nutrition Therapy  
 PDEP-N Nutrition  
 PDEP-SM Stress Management  
 PDEP-TX Treatment

### **PN PRENATAL**

PN-1T First Trimester  
 PN-2T Second Trimester  
 PN-3T Third Trimester  
 PN-ADM Admission to Hospital  
 PN-AOD Alcohol and Other Drugs  
 PN-BH Behavioral Health  
 PN-C Complications  
 PN-CUL Cultural/Spiritual Aspects of Health  
 PN-DC Dental Caries  
 PN-DV Domestic Violence  
 PN-EX Exercise  
 PN-FU Follow-up  
 PN-GD Growth and Development  
 PN-GDM Gestational Diabetes  
 PN-GEN Genetic Testing  
 PN-HIV Human Immunodeficiency Virus  
 PN-L Patient Information Literature  
 PN - M Medications  
 PN-MNT Medical Nutrition Therapy  
 PN-N Nutrition  
 PN-NJ Neonatal Jaundice  
 PN-PIH Pregnancy Induced Hypertension And Pre-Eclampsia  
 PN-PM Pain Management  
 PN-PTL Preterm Labor  
 PN-S Safety and Injury Prevention  
 PN-SCR Screening

PN-SF Introduction of the Infant to Solid Foods  
 PN-SHS Second-Hand Smoke  
 PN-SOC Social Health  
 PN-STI Sexually Transmitted Infections  
 PN-TE Tests  
 PN-TO Tobacco  
 PN-VBAC Vaginal Birth after Cesarean Section

### **STI SEXUALLY TRANSMITTED INFECTIONS**

STI-C Complications  
 STI-CUL Cultural/Spiritual Aspects of Health  
 STI-FU Follow-up  
 STI-I Information  
 STI-L Patient Information Literature  
 STI-M Medications  
 STI-P Prevention  
 STI-SM Stress Management  
 STI-TE Tests  
 STI-TX Treatment

### **SIDS SUDDEN INFANT DEATH SYNDROME**

SIDS-CUL Cultural/Spiritual Aspects of Health  
 SIDS-I Information  
 SIDS-L Patient Information Literature  
 SIDS-P Prevention  
 SIDS-S Safety and Injury Prevention

## **2005 Prenatal/Perinatal Codes**

### **ANS ANESTHESIA**

ANS - C Complications  
 ANS-EQ Equipment  
 ANS - FU Follow-up  
 ANS-INT Intubation  
 ANS-IS Incentive Spirometry  
 ANS - L Literature  
 ANS-PM Pain Management  
 ANS - PO Postoperative  
 ANS-PR Preoperative  
 ANS-PRO Procedures  
 ANS-TCB Turn, Cough, Deep Breath

### **BF BREASTFEEDING**

BF-AP Anatomy and Physiology  
 BF-BB Benefits Of Breastfeeding  
 BF-BC Breast Care  
 BF-BP Breastfeeding Positions  
 BF-CS Collection And Storage Of Breast-Milk  
 BF-EQ Equipment  
 BF-FU Follow-up  
 BF-GD Growth and Development  
 BF-HC Hunger Cues  
 BF-L Patient Information Literature  
 BF-LA Lifestyle Adaptations  
 BF-M Maternal Medications  
 BF-MK Milk Intake  
 BF-MNT Medical Nutrition Therapy  
 BF-N Nutrition (Maternal)  
 BF-NJ Neonatal Jaundice  
 BF-ON Latch-On  
 BF-SF Introduction To Solid Foods  
 BF-SM Stress Management

BF-T Teething  
 BF-W Weaning

### **CHN CHILD HEALTH NEW-BORN (0-60 DAYS)**

CHN-FU Follow-up  
 CHN-GD Growth and Development  
 CHN-I Information  
 CHN-L Patient Information Literature  
 CHN-MNT Medical Nutrition Therapy  
 CHN-N Nutrition  
 CHN-NJ Neonatal Jaundice  
 CHN-PA Parenting  
 CHN-S Safety and Injury Prevention  
 CHN-SF Introduction to Solid Foods  
 CHN-SHS Second-Hand Smoke

### **CB CHILDBIRTH**

CB-AP Anatomy and Physiology  
 CB-C Complications  
 CB-CUL Cultural/Spiritual Aspects of Health  
 CB-EQ Equipment  
 CB-EX Exercises, Relaxation & Breathing  
 CB-FU Follow-up  
 CB-L Literature  
 CB-LB Labor Signs  
 CB-M Medications  
 CB-NJ Neonatal Jaundice  
 CB-OR Orientation  
 CB-PM Pain Management  
 CB-PRO Procedures, Obstetrical  
 CB-RO Role Of Labor And Delivery

	Partner/Coach	FF-I	Information	HIV-LA	Lifestyle Adaptations	<b>PNL</b>	<b>PERINATAL LOSS</b>
CB-TE	Tests	FF-L	Patient Information Literature	HIV-M	Medications	PNL-C	Complications
CB-VBAC	Vaginal Birth after Cesarean Section	FF-ME	Maternal Engorgement	HIV-MNT	Medical Nutrition Therapy	PNL-CUL	Cultural/Spiritual Aspects of Health
<b>DV</b>	<b>DOMESTIC VIOLENCE</b>	FF-NJ	Neonatal Jaundice	HIV-N	Nutrition	PNL-DP	Disease Process
DV-CUL	Cultural/Spiritual Aspects of Health	FF-S	Safety Outcomes	HIV-P	Prevention	PNL-FU	Follow Up
DV-DP	Disease Process	FF-SF	Introduction to Solid Foods	HIV-PN	Prenatal	PNL-GP	Grieving Process
DV-FU	Follow-up	<b>GENE</b>	<b>GENETIC DISORDERS</b>	HIV-S	Safety	PNL-L	Literature
DV-L	Patient Information Literature	GENE-BH	Behavioral and Social health	HIV-SM	Stress Management	PNL-M	Medications
DV-P	Prevention	GENE-C	Complications	HIV-TE	Tests	PNL-MNT	Medical Nutrition Therapy
DV-PSY	Psychotherapy	GENE-EQ	Equipment	HIV-TX	Treatment	PNL-N	Nutrition
DV-S	Safety and Injury Prevention	GENE-FU	Follow-up	<b>NJ</b>	<b>NEONATAL JAUNDICE</b>	PNL-PM	Pain Management
DV-SCR	Screening	GENE-I	Information	NJ-C	Complications	PNL-SM	Stress Management
DV-SM	Stress Management	GENE-L	Patient Information Literature	NJ-DP	Disease Process	PNL-TX	Treatment
DV-TX	Treatment	GENE-LA	Lifestyle Adaptations	NJ-P	Prevention	<b>PP</b>	<b>POSTPARTUM</b>
		GENE-MNT	Medical Nutrition Therapy	NJ-TE	Tests	PP-C	Complications
<b>FP</b>	<b>FAMILY PLANNING</b>	GENE-N	Nutrition	NJ-TX	Treatment	PP-CUL	Cultural/Spiritual Aspects of Health
FP-AP	Anatomy and Physiology	GENE-P	Prevention	<b>PM</b>	<b>PAIN MANAGEMENT</b>	PP-FU	Follow-up
FP-DIA	Diaphragm	GENE-PA	Parenting	PM-AP	Anatomy and Physiology	PP-I	Information
FP-DPO	Depot Medroxyprogesterone Injections	GENE-PT	Physical Therapy	PM-CUL	Cultural/Spiritual Aspects of Health	PP-INF	Infant Care
FP-FC	Foam And Condoms	GENE-S	Safety and Injury Prevention	PM-DP	Disease Process	PP-KE	Kegel Exercise
FP-FU	Follow-up	GENE-SM	Stress Management	PM-EQ	Equipment	PP-L	Patient Information Literature
FP-IC	Implant Contraception	GENE-TE	Tests	PM-EX	Exercise	PP- M	Medications
FP-IUD	Intrauterine Device	<b>HIV</b>	<b>HUMAN IMMUNODEFICIENCY VIRUS</b>	PM-FU	Follow-up	PP-MNT	Medical Nutrition Therapy
FP-L	Patient Information Literature	HIV-C	Complications	PM-L	Patient Information Literature	PP-NJ	Neonatal Jaundice
FP-MNT	Medical Nutrition Therapy	HIV-CUL	Cultural/Spiritual Aspects of Health	PM-LA	Lifestyle Adaptations	PP-PM	Pain Management
FP-MT	Methods	HIV-DP	Disease Process	PM-M	Medication	PP-SF	Introduction of the Infant to Solid Foods
FP-N	Nutrition	HIV-EQ	Equipment	PM-MNT	Medical Nutrition Therapy	PP-WC	Wound Care
FP-OC	Oral Contraceptives	HIV-FU	Follow-up	PM-N	Nutrition	<b>PDEP</b>	<b>POSTPARTUM DEPRESSION</b>
FP-ST	Sterilization	HIV-HM	Home Management	PM-P	Prevention	PDEP-DP	Disease Process
		HIV-HY	Hygiene	PM-PSY	Psychotherapy	PDEP-FU	Follow-up
<b>FF</b>	<b>FORMULA FEEDING</b>	HIV-L	Patient Information Literature	PM-TE	Tests	PDEP-L	Patient Information Literature
FF-FS	Formula Feeding Skills			PM-TX	Treatment		