

DUSOI/WONCA CHECKLIST

DUKE AND WORLD ORGANIZATION OF FAMILY DOCTORS SEVERITY OF ILLNESS CHECKLIST
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Patient: _____ Female: ___ Male: ___ Birth Date: _____ Provider: _____ Date of Encounter: _____

Health Problems (Addressed during this encounter)	Raw Scores (Enter 0-4)*				Total Raw Score (0-16)	Severity Code** (0-4)	ICPC-2 Code
	<u>Symptoms</u>	<u>Complications</u>	<u>Prognosis</u>	<u>Treatability</u>			
EXAMPLE: Gout	3	1	3	2	9	3	T92:3

1. _____	_____	_____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____	_____	_____	_____

(Use additional pages if more than six health problems.)

* RAW SCORES

	None	Questionable	Mild	Moderate	Major
1. <u>Symptoms</u> (past week):	0	1	2	3	4
2. <u>Complications</u> (past week):	0	1	2	3	4
	<u>Disability</u>				
	None	Mild	Moderate	Major	<u>Threat to Life</u>
3. <u>Prognosis</u> (next 6 months, without treatment):	0	1	2	3	4
	<u>Need for Treatment</u>		<u>Expected Response to Treatment</u>		
	No	Questionable	IF YES	Good	Questionable
4. <u>Treatability</u> :	0	1	2	3	4

** SEVERITY CODES

Total Raw Score	Severity Code	Severity
0	= 0	Zero
1 - 4	= 1	Low
5 - 8	= 2	Intermediate
9 - 12	= 3	High
13 - 16	= 4	Maximum