

EHR DOCUMENTATION TEMPLATES

Copy-Paste Ready Templates for AI Integration Documentation

HOW TO USE THESE TEMPLATES

Replace bracketed items [***] with specific clinical information. Create smart phrases/dot phrases in your EHR for rapid insertion. Modify language to match your documentation style.

TEMPLATE 1: AI-INFORMED, ASSESSMENT CONFIRMED

Use when: AI gave accurate information that your examination confirms

Patient reports pre-visit AI consultation ([ChatGPT/Google/other]) regarding [chief complaint/symptoms]. AI suggested [diagnosis/recommendation]. Physical examination confirms this assessment with findings including [specific physical findings not available to AI—e.g., reproducible chest wall tenderness, normal cardiac exam, clear lungs]. Patient educated that AI assessment was accurate in this case; discussed the value of physical examination for confirmation and the limitations of remote AI assessment. Patient understands appropriate use of AI for medical questions.

Smart Phrase: **.AIOK**

TEMPLATE 2: AI-INFORMED, ASSESSMENT PARTIALLY CONFIRMED

Use when: AI was on the right track but incomplete or needed refinement

Patient reports AI consultation suggesting [AI assessment]. Clinical evaluation partially supports this assessment; however, additional findings of [specific findings] indicate [refined/modified diagnosis]. AI assessment was reasonable but incomplete due to [specific limitation—inability to examine, missing clinical context, population vs. individual factors, etc.]. Patient educated on AI limitations regarding [specific limitation]. Plan reflects integrated clinical assessment incorporating but extending beyond AI-sourced information.

Smart Phrase: **.AIPARTIAL**

TEMPLATE 3: AI-INFORMED, ASSESSMENT CORRECTED

Use when: AI was wrong and you are making a different diagnosis

Patient reports AI consultation suggesting [AI diagnosis]. Physical examination reveals [findings inconsistent with AI assessment], specifically [detailed findings]. AI assessment did not account for [physical findings/contextual factors/individual patient characteristics]. Correct diagnosis: [your diagnosis]. Patient educated on limitation of AI for [specific type of assessment—visual diagnosis, physical exam findings, individual context, etc.]. Discussed importance of in-person evaluation when [specific scenario]. Patient verbalized understanding.

Smart Phrase: .AICORRECT

TEMPLATE 4: AI-INFLUENCED DELAY IN CARE

Use when: AI caused patient to delay appropriate evaluation

Patient reports [X]-day delay in presentation based on AI ([ChatGPT/other]) reassurance that symptoms were likely [AI's assessment]. On examination, findings consistent with [actual diagnosis] including [specific findings]. AI assessment was inadequate due to [specific limitation—inability to assess vital signs, physical findings, symptom severity, evolution over time, etc.]. Patient counseled on AI limitations for [specific scenario] and appropriate thresholds for seeking in-person evaluation regardless of AI guidance. Provided specific return precautions and red flags for this diagnosis.

Smart Phrase: **.AIDELAY**

TEMPLATE 5: AI-INFLUENCED MEDICATION CHANGE

Use when: Patient modified medications based on AI information

Patient reports [starting/stopping/adjusting] [medication] based on AI-sourced information regarding [topic—interactions, dosing, side effects, etc.]. AI provided [general information] that was [accurate/inaccurate] at population level but [appropriate/inappropriate] for this patient given [specific factors—renal function, drug interactions, individual circumstances, comorbidities]. [Clinical consequences if any—e.g., subtherapeutic levels, toxicity, adverse event, none]. Patient counseled that medication changes require individualized assessment considering their specific organ function, other medications, and clinical context, and should be discussed with prescribing physician prior to modification. Patient verbalized understanding.

Smart Phrase: **.AIMED**

TEMPLATE 6: AI-RELATED HARM

Use when: AI guidance resulted in patient harm requiring medical intervention

Patient presents with [condition/complication] related to [action taken/not taken] based on AI ([source]) guidance. Timeline: [X days/weeks ago], patient consulted AI regarding [symptoms/concern]. AI advised [AI recommendation]. Patient followed this guidance, resulting in [clinical consequence]. Current presentation: [symptoms/findings/severity]. Assessment: [diagnosis]. AI guidance was inappropriate for this patient because [specific limitation—unable to detect physical findings, missing clinical context, population vs. individual advice, etc.]. Plan: [treatment plan]. Patient counseled on [specific AI limitation relevant to this case] and importance of [specific guidance for future]. Patient demonstrates understanding of when to seek immediate care regardless of AI guidance.

Smart Phrase: **.AIHARM**

TEMPLATE 7: AI DISCUSSED, NO CONCERNS

Use when: You discussed AI use but patient did not use AI or no issues arose

AI use discussed per routine. Patient denies AI consultation for current symptoms. Standard education provided regarding appropriate AI use for medical questions and the importance of in-person evaluation for concerning symptoms.

Smart Phrase: .AINONE

SPECIALTY-SPECIFIC ADDENDA

Pediatrics Addendum

Parent/caregiver reported concern that 'something is different' despite AI ([source]) reassurance that [child's symptoms] were [AI assessment]. Clinical examination reveals [findings]. Parent's instinct was [validated/appropriate to investigate]. Discussed that parental observation of subtle changes in child's behavior, activity, and interaction patterns represents accumulated baseline knowledge that AI cannot assess remotely. Parental concern alone is sufficient reason for evaluation.

Emergency Medicine Addendum

Patient presented to ED [X hours/days] after initial symptom onset. Patient reports initial AI consultation ([source]) suggesting [AI assessment] and recommending [AI recommendation—monitoring, home treatment, etc.]. ED evaluation reveals [findings requiring emergency intervention]. Time-sensitive diagnosis: [diagnosis]. AI triage was inappropriate for this presentation due to [inability to assess vital signs/physical findings/symptom severity/clinical trajectory]. Patient educated on emergency red flags that require immediate ED evaluation regardless of AI guidance.

Chronic Disease Management Addendum

Patient with [chronic condition—DM, HTN, CHF, etc.] reports using AI ([source]) for management guidance regarding [specific question—medication adjustment, symptom interpretation, dietary changes, etc.]. AI provided [population-level/guideline-based] information. Discussed that management of [condition] requires individualization based on [specific patient factors—current organ function, medication interactions, disease trajectory, prior response to treatment, etc.]. AI guidelines apply to average patient; plan customized to this patient's [specific factors]. Reinforced importance of discussing management changes prior to implementation.

QUICK COPY: SMART PHRASE SUMMARY

Copy these into your EHR smart phrase library:

PHRASE	TEXT
.AIOK	Patient consulted AI pre-visit. AI assessment consistent with clinical findings. Education provided regarding appropriate AI use.
.AIPARTIAL	Patient consulted AI pre-visit. AI assessment of [***] partially supported; clinical findings of [***] refine diagnosis to [***]. Patient educated on AI limitations.
.AICORRECT	Patient consulted AI pre-visit. AI assessment of [***] corrected based on physical examination revealing [***]. Patient educated on AI limitations.
.AIDELAY	Patient delayed care based on AI reassurance. Discussed importance of in-person evaluation for [***] symptoms regardless of AI guidance.
.AIMED	Patient [started/stopped/adjusted] [medication] based on AI guidance. [Consequences if any]. Counseled on medication individualization requirements.
.AIHARM	Patient presents with [condition] related to AI-guided [action]. AI unable to assess [limitation]. Treatment initiated. Counseled on AI limitations.
.AINONE	AI use discussed. Patient denies pre-visit AI consultation.