## UW Medicine

**Bone and Joint Center – Shoulder and Elbow Team** 4245 Roosevelt Way NE Seattle, WA 98105-6920 campus Box 354740

## **Physician Presence Statement Form**

Dr. Soren Olson

Dr. Jason Wilcox

Dr. Addison Stone

Dr. Raj. Meheshwari

Dr. Annie Links

Dr. Karen Perser

Dr. Jason King

Dr. Scott Ruhlman

| I saw and evaluated the patient with the resident circled above and agree with his/her findings and plan. Please refer to the paper chart and dictation for this clinical encounter. |                   |                   |                       |                   |                   |
|--|-------------------|-------------------|-----------------------|-------------------|-------------------|
| Over 50% of time spent with the attending physician was used for direct counseling and/or coordination care. Patient contact time with the attending physician took:                 |                   |                   |                       |                   |                   |
| New Patient:   | 10 Minutes<br>201 | 20 Minutes<br>202 | 30 Minutes<br>203     | 45 Minutes 204    | 60 Minutes<br>205 |
| Established Patient:   | 5 Minutes<br>211  | 10 Minutes<br>212 | 15 Minutes<br>213     | 25 Minutes<br>214 | 40 Minutes<br>215 |
|  |                   |                   |                       |                   |                   |
| Signature: Frederick A Matsen M.D. Winston J Warme M.D.  |                   |                   |                       |                   |                   |
| Joseph Lynch M.D.  |                   |                   | Jeremiah Clinton M.D. |                   |                   |
| Affix Pt Label Here Name: U Number: DOB: DOS:  | ·                 |                   |                       |                   |                   |
| DO2:   |                   |                   |                       |                   |                   |