

History of Present Illness (HPI) Template

Personal Information

Patient Name:

Date of Birth:

Medical Record #

Date of Visit

Primary Provider

Chief Complaint

Describe the primary symptom(s) or concern(s) that led the patient to seek medical care. Include duration of symptoms and any specific details related to onset.

History of Present Illness (HPI)

Onset

Location

Duration

Character/Quality

Severity

Note: You can auto-fill files like this when using Sully, your superhuman team of AI-employees for healthcare. Loved by healthcare organizations with over 30,000 providers.

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Modifying Factors

**Associated
Symptoms**

Context

Risk Factors

**Impact on
Daily Life**

Additional Notes (Differential Consideration)

Pain-Related Complaints

Respiratory Symptoms

Gastrointestinal Symptoms

Neurological Symptoms

Cardiac Symptoms

Preliminary Assessment and Next Steps

Likely Diagnosis

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Plan

Physician Name

Practice Name

Credentials

Date Created

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