|  |  |
| --- | --- |
| Rm: | Team:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_RT:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Name:** Age: Wt: | Resident:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Allergies: | New Orders/Rounds: |
| **Med DX:** |  |
|   |  |
| **Nx Dx:** |  |
|   |  |
| **Hx:** |  Symptom O L D C A R T |
|  |  |
|   |  |
| **VS:** |  |
| 0800 BP: Pul: RR: T: O2: P: |  |
| 1200 BP: Pul: RR: T: O2: P: |  |
| 1600 BP: Pul: RR: T: O2: P: |  |
| **Cardiac:** MAP> \_\_\_\_\_\_\_\_ | **Priority of Care** |  |
|  |  |  |  |
| Main IV \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ml/hr |   |   |
| CVL#1\_\_\_\_\_\_\_\_\_\_\_\_\_IVF\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ @ \_\_\_\_\_ml/hr | **Saftey** |  |  |    |
| PIV#1\_\_\_\_\_\_\_\_\_\_\_\_\_IVF\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ @ \_\_\_\_\_ml/hr |  |
| PIV#2\_\_\_\_\_\_\_\_\_\_\_\_\_IVF\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ @ \_\_\_\_\_ml/hr | **OLDCART** |   |      |
| Rhythm: NSR / ST / SB --- Apical Pulse: \_\_\_\_\_\_\_BPM |   |   |
| Cap Refill: < 3 sec / >3 sec |   |
|  |
| S1 / S2 / S3 / Murmur / Click JVD R / L / bilat | 07 |   |   |   |   |
| Ht sounds: +1 +2 +3 +4 Bruit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |   |   |   |   |   |
| **Pulm:** R/A / NC / Mask \_\_\_\_\_\_L/min started at \_\_\_\_\_\_\_\_\_\_\_ | 08 |  |  |  |   |
| C / Fcrckles / Ccrackles / H / D / bilat / R / L |   |   |   |   |   |
|  | 09 |  |  |  |   |
| Cough: Non – productive Sputum:  |   |   |   |   |   |
| **GI:** Diet: \_\_\_\_\_\_\_\_\_\_\_\_\_ | 10 |  |  |  |   |
| \_\_\_\_\_\_\_Tube \_\_\_\_Fr \_\_\_\_\_\_cm@nare |   |   |   |   |   |
|  Active / Hypo / Hyper-- Non distended -- Soft / Firm  | 11 |  |  |  |   |
|   |   |   |   |   |   |
| **GU:** \_\_\_\_\_\_\_\_\_\_Foley 12H U/O=\_\_\_\_\_\_\_\_\_\_cc/kg/hr | 12 |  |  |  |   |
| Not – continent urine color/character: |   |   |   |   |   |
|   | 13 |  |  |  |   |
| Output:  |   |   |   |   |   |
| **Neuro:** GCS \_\_\_\_\_ Pupil R\_\_\_\_/\_\_\_\_ L\_\_\_\_/\_\_\_\_ E R B S F | 14 |  |  |  |   |
| Alert and Oriented X: 1 2 3 4 |   |   |   |   |   |
| Movement: symmetrical / non-symmetrical | 15 |  |  |  |   |
| Weakness: L / R U / L / Bilat |   |   |   |   |   |
|   | 16 |  |  |  |   |
|   |   |   |   |   |   |
| **Skin:**  | 17 |  |  |  |   |
|   |   |   |   |   |   |
|   | 18 |  |  |  |   |
| **Labs:** |   |   |   |   |   |
|   | 19 |  |  |  |   |
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| **Diagnostic:** |  |  |  |  |   |
| x-ray |  |  |  |  |   |
| CT |  |  |  |  |   |
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| Reaction | Reaction |
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