

Pt: \_\_\_\_\_ M/F Age: \_\_\_\_\_ Admit Date: \_\_\_\_\_ MD: \_\_\_\_\_ Rm # \_\_\_\_\_

Dx: \_\_\_\_\_ Surg/Proc: \_\_\_\_\_ POD #: \_\_\_\_\_ Code: \_\_\_\_\_ Rhythm: \_\_\_\_\_

<b>PMH</b>	<b>Background</b>	<b>Plan</b>
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<b>Neuro</b> 4 3 2 1	<b>Cardiac</b> EF: _____ DW: _____	<b>Resp</b> Sat _____% on _____ Tx	<b>GI</b> NG/GT/JT Last BM: Diet:
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<b>GU</b> Amber Yellow Straw Clr/Cldy Odor	Void Foley BSC Inct UTI	<b>IV Sites</b> _____ on _____ _____ on _____ Δ site / tubing	<b>IV Fluids</b>	<b>Skin</b>
				<b>Dsng Δ</b>

<b>Drains/Tubes</b>	<b>Accu</b> ✓ AC HS @ _____ @ _____ @ _____	Time Tmp HR RR O2 BP Pain _____ _____ _____
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<b>Draws</b>	<b>Previous PRNs</b>	_____ _____ _____
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<b>Intake &amp; Output</b> PS: / +/- _____@_____ +/- _____@_____ +/- _____@_____ +/- _____@_____ +/- _____@_____ IN: _____ Out: _____	<b>PRNs given</b> _____@_____ _____@_____ _____@_____ _____@_____ _____@_____	<b>Precautions:</b> F Bld ASP Sz Cont Air Drop <b>Activity:</b> Ad lib Br ___° BRP AMB OOB/Ch <b>Allergies:</b> NKDA _____ WBC _____ PT _____ K _____, _____ Hgb _____ INR _____ Mg _____ Hct _____ BUN _____ Trop _____, _____, _____ PLT _____ Cr _____
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<b>Draws</b>	<b>Previous PRNs</b>	_____ _____ _____
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<b>Intake &amp; Output</b> PS: / +/- _____@_____ +/- _____@_____ +/- _____@_____ +/- _____@_____ +/- _____@_____ IN: _____ Out: _____	<b>PRNs given</b> _____@_____ _____@_____ _____@_____ _____@_____ _____@_____	<b>Precautions:</b> F Bld ASP Sz Cont Air Drop <b>Activity:</b> Ad lib Br ___° BRP AMB OOB/Ch <b>Allergies:</b> NKDA _____ WBC _____ PT _____ K _____, _____ Hgb _____ INR _____ Mg _____ Hct _____ BUN _____ Trop _____, _____, _____ PLT _____ Cr _____
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<b>PMH</b>	<b>Background</b>	<b>Plan</b>
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<b>Neuro</b> 4 3 2 1	<b>Cardiac</b> EF: _____ DW: _____	<b>Resp</b> Sat _____% on _____ Tx	<b>GI</b> NG/GT/JT Last BM: Diet:
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<b>GU</b> Amber Yellow Straw Clr/Cldy Odor	<b>IV Sites</b> Void Foley BSC Inct UTI _____ on _____ _____ on _____ Δ site / tubing	<b>IV Fluids</b>	<b>Skin</b>
			<b>Dsng Δ</b>

<b>Drains/Tubes</b>	<b>Accu</b> ✓ AC HS @ _____ @ _____ @ _____	Time Tmp HR RR O2 BP Pain _____ _____ _____
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<b>Draws</b>	<b>Previous PRNs</b>
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<b>Intake &amp; Output</b> PS: / +/- _____@_____ +/- _____@_____ +/- _____@_____ +/- _____@_____ +/- _____@_____ IN: _____ Out: _____	<b>PRNs given</b> _____@_____ _____@_____ _____@_____ _____@_____ _____@_____	<b>Precautions:</b> F Bld ASP Sz Cont Air Drop <b>Activity:</b> Ad lib Br ___° BRP AMB OOB/Ch <b>Allergies:</b> NKDA _____ WBC _____ PT _____ K _____, _____ Hgb _____ INR _____ Mg _____ Hct _____ BUN _____ Trop _____, _____, _____ PLT _____ Cr _____
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<b>Draws</b>	<b>Previous PRNs</b>
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<b>Intake &amp; Output</b> PS: / +/- _____@_____ +/- _____@_____ +/- _____@_____ +/- _____@_____ +/- _____@_____ IN: _____ Out: _____	<b>PRNs given</b> _____@_____ _____@_____ _____@_____ _____@_____ _____@_____	<b>Precautions:</b> F Bld ASP Sz Cont Air Drop <b>Activity:</b> Ad lib Br ___° BRP AMB OOB/Ch <b>Allergies:</b> NKDA _____ WBC _____ PT _____ K _____, _____ Hgb _____ INR _____ Mg _____ Hct _____ BUN _____ Trop _____, _____, _____ PLT _____ Cr _____
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