



<b>Name</b> <b>Age</b> <b>Admitted</b> <b>Room#</b>	<b>Code</b> <b>Allergies</b>	<b>Isolation</b> <b>Precautions</b> <b>VTE</b>	<b>Attending</b> <b>Consults</b>			
<b>Course</b>						
<b>Present Illness</b>						
<b>PMH:</b> DM / CHF / HTN / CAD / PCI / HLD / PVD / GERD / COPD / Asthma / CKD / ESRD / Smoker / Drug Abuse / Psych / CVA / Dementia / Hypothyroid / CA /						
<b>Tests</b>						
<b>Neuro</b>  <b>A&amp;O</b> <b>GCS</b> <b>RASS</b> <b>CAM</b> <b>NIH</b> <b>Neuro ✓s</b>	<b>Lines</b>  <b>IV</b> <b>Central</b> <b>HD</b> <b>Date</b>	<b>Meds/IVF</b>	<b>Site</b>	<b>Size</b>	<b>Dose</b>	<b>Rate</b>
		1				
		2				
		3				
		4				
<b>Cardiovascular</b>  <b>Rhythm</b>  <b>Rate</b>  <b>Dysrhythmias</b>	<b>EF%</b>  <b>Pacemaker Int/Ext</b>  <b>Pacer A : V</b>  <b>% Paced</b>	<b>Edema</b>   <b>Pulses</b>	<b>In</b>	<b>In</b>	<b>In</b>	<b>In</b>
			<b>Out</b>	<b>Out</b>	<b>Out</b>	<b>Out</b>
			<b>Net</b>	<b>Net</b>	<b>Net</b>	<b>Net</b>
<b>Respiratory</b>  <b>O2 ___LPM FiO2%___</b> <b>NC NRB CPAP BiPAP Vent</b> <b>Setting</b>  <b>ETT Size___ Type</b> <b>CT (R/L) Level ___ Desc ___</b>	<b>Labs</b>    	<b>GU</b> <b>Foley</b> <b>HD</b>				
		<b>GI</b> <b>Diet</b> <b>TF</b>				
<b>Skin/Wounds</b>	<b>Drains</b>	<b>Pain</b>	<b>AC</b>	<b>AC</b>	<b>AC</b>	<b>HS</b>
<b>Plan</b>						