

TODAY'S DATE		SHIFT	UNIT			Page	
[C] [M] [W] [I&O] [Note]		Kardex -	Blood Sugars	Medications	Drips	IV FLUIDS	
Allergies _____		CODE STATUS _____ AGE _____			Rate of _____ cc/o	Rate of _____ cc/o	
Room _____ Bed (1) (2)		Replacement (K) _____ (Mag) _____ (Phos) _____			Rate of _____ cc/o	Rate of _____ cc/o	
Report -		Vital Signs	02 NC / MASK RA / High Flo Oximiser / Bi Pap / C Pap	OUTPUT _____ cc (BR) (F) (U)	LOCATION IV'S		
DX/HX _____				INPUT FI Restrict _____	IJ [L] [R]	Tri/D/L	
					PICC [L] [R]		
					PIV [L] [R]		
				LUNG SOUNDS	Central Arm		
				LPM _____ %	AC Hand		
				SATS _____ %	DIET		
Wounds / Incisions / Drains		Chest Pain	Cardiac Monitor SB / SR / ST/ RATE _____			NPO @ _____	
			1 st AVB / BBB / Bi-Gem/ Tri/ Pacer - Rate _____ %			Cardiac _____ Other _____	
			A-Fib / A-Flutter / VT / SVT / V-Fib - Rate _____ %			TF _____ cc / hour	
Pain			PVC _____ PAC _____ PJC _____	Other _____		BM _____ Act _____ (1) (2) Bedrest _____	

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