

ED Band - Abnrg Band - Contact Band - Falls Risk Band - DNR Band -

IV Fields - Type _____ Rate - _____ ml/hr

Smoker - Y N - Quit - PPD - Diabetes - Y N - How Often

Vital Signs

T P R BP O2 Sat Oxygen - L/min via

Head

Swelling - Vision -

Pupils - Left _____mm Right _____mm K R R L A

Chest

Breath Sounds - Depth - Equal -

Adventitious Sounds - Type Location

Shortness of Breath - Y N Heart - Rhythmic - Rate -

Arms

Pain - ROM - Left Right

Strength - Left Right

Sensation - Left Right

CAP Refill -

Pulses - Brachial - L R Radial - L R

Abdomen

Shape - Swelling - Tenderness -

Bowel Sounds - Nausea - Vomiting -

Urinary

Issues -

Elimination

Last BM - Fasting Gluc -

Legs

Homan's - Positive Negative

Pain - ROM - Left Right

Strength - Left Right

Sensation - Left Right

Pulses - Popliteal - L R Pedal - L R

CAP Refill - seconds