

### CSM PATIENT CARE WORKSHEET

<b>Student</b>					<b>Date</b>			
<b>Patient Initials</b>		<b>Rm #</b>		<b>Age</b>		<b>Religion</b>		
<b>Admission Date</b>		<b>Family type</b>		<b>Occupation</b>				
<b>Primary Diagnoses/ Surgical Procedure Code Status</b>					<b>Secondary Medical Diagnosis</b>			
<b>Dev. Stage/Task</b>					<b>HIPAA</b>			
					<b>Is this patient at the appropriate developmental level for age?</b>			
<b>Identified teaching needs of patient/caregiver:</b>				<b>Patient/ Caregiver Teaching Goal: (Based on teaching needs)</b>				
<b>Ethnic/Cultural Implications:</b>		<b>Discharge Plan:</b>		<b>Safety Issues: (Based on developmental level):</b>				
<b>BATH</b>	<b>ACTIVITY</b>	<b>DIET</b>	<b>FLUIDS</b>	<b>CHECK/LIST</b>			<b>EQUIPMENT BEING USED</b>	
Bed	Bed	Reg	Limit	Blood sugar:				
Self	BRP	Soft/Pureed	Sips	Wt:				
Shower	BRP c Asst	CI Liq	Ice Chips	Foley:				
Tub	Chair	Full Liq	Push	Specimen:				
Partial	Amb c Asst	NPO	Intake for my shift:	Output for my shift:				
Assist	Amb ad Lib	Special diet:						
Total Care	Restraints							
<b>IV Fluids: type</b>				<b>Flow rate</b>			<b>Site Assessment</b>	
<b>NG/Gastrostomy Fluids: Type</b>				<b>Flow rate/Bolus/ H<sub>2</sub>O Feed Amount</b>				<b>Residual</b>
<b>Allergy</b>								
<b>Treatments/ Therapy</b>		<b>Time</b>	<b>Normal Vitals for age</b>		<b>Special VS parameters for Patient</b>			
			Temp:		Temp:			
			BP:		BP			
			Pulse:		Pulse			
<b>Diagnostic Test Sched for today</b>			Resp:		Resp			
			O <sub>2</sub> saturation		O <sub>2</sub> saturation			
			Pain level					
			Other					