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| --- | --- | --- | --- | --- | --- |
| **PATIENT** | STICKER | Past Med/Surg Hx: | Date: Admit Date:  MD: RN:  Age: Allergies:  Code Status:  Isolation Type:  Why: | | |
| **HX** | **Admission Hx:** | **24 Hour Events:** |  | | |
| **NEURO** | **Sedation/Analgesia/Paralytics:**  **Orientation: Cam ICU:**  **Motor Movement: CIWA Score:**  **GCS:**  E: 1 2 3 4  V: 1 2 3 4 5  M: 1 2 3 4 5 6 | | Other Neuro:  EVD/Bolt □  ICP Range:  Spinal Precautions:  Full T&Ls Cleared | | |
| **CARDIAC** | **Rhythm:**  **HR Range:**  **BP Range:**  **Map:**  **CVP: CI:**  **PA: SvO2**  **IV Drips/Rates:** | | Ectopy:  Edema:  Pulses:  Titration Goals: | | |
| **RESP** | **Lung Sounds:**  **RR: SpO2: O2 Type:**  **Vent:**  PIP  FiO2  PEEP  RR if on PC  **Most Recent ABG:**  **pH / PaCO2 / PaO2 /HCO3**  **Lactate:** | | ETT/Trach Size: ETT Depth:  IS Volumes:  Extubated @  Chest X-ray Ordered: Yes No | | |
| **RENAL** | **24 Hour Total Ins \_\_\_\_\_\_ Total Outs \_\_\_\_\_\_ Net \_\_\_\_\_\_\_**  **Foley:**  **Labs**    **CRRT Goals:** | | Ins | Outs | |
| IVs/Meds | Urine | |
| Tube Feeds | GI | |
| PO Intake | Drains | |
| Blood Products | 1. | |
| PRBCs | 2. | |
| FFP | 3. | |
| Platelets | Chest Tubes | |
| Cryo | 1. | |
| Albumin | 2. | |
| **GI/ENDO** | **Abdominal Assess:**  **Diet: NG / OG / DHT/CorTrak**  **Tube Feeds: Rate: Goal:**  **TPN: Bladder Pressures:**  **Last BM:**  **Glucose Range: Sliding Scale:**  **Insulin Drip Rate:** | | Speech/Swallow:  Bowel Regimen:  Nutrition Needs:  Labs (if done read to team):  Total Bili \_\_\_\_AST \_\_\_\_ ALT\_\_\_\_ Alk Phos\_\_\_\_ Amylase\_\_\_\_\_ Lipase \_\_\_\_  24 hour insulin total: \_\_\_\_\_  Blood Sugars  Q1H Q2H Q4H Q6H AC&HS | | |
| **HEME** | **24 Hour TMAX:\_\_\_\_\_\_**  **CBC: COAGS:**  [https://s-media-cache-ak0.pinimg.com/236x/f0/67/62/f06762bd44a8250e6bf8239200632e50.jpg](https://www.google.com/url?sa=i&rct=j&q=&esrc=s&frm=1&source=images&cd=&cad=rja&uact=8&ved=0CAcQjRw&url=https://www.pinterest.com/oooriotgrrrl/nursing-lab-values/&ei=_F-RVf7NL87LogSfpJM4&bvm=bv.96783405,d.cGU&psig=AFQjCNEd3u4jJ_cL6U480YsmiWgvZve2WQ&ust=1435677049786503)[https://s-media-cache-ak0.pinimg.com/736x/08/77/ba/0877ba43286149cf0687ab1c0f304bf4.jpg](https://www.google.com/url?sa=i&rct=j&q=&esrc=s&frm=1&source=images&cd=&cad=rja&uact=8&ved=0CAcQjRw&url=https://www.pinterest.com/pin/1125968632834375/&ei=xF-RVemVG5LjoAS6yajQCA&bvm=bv.96783405,d.cGU&psig=AFQjCNGNM0Nfo5fjOmSkwPN3PJKysbAE6g&ust=1435676987044320) | | Anticoagulation Type:  H/H goal: INR Goal:  Platelet Goal:  Tacro Level: Draw at\_\_\_\_  Vanco Peak/Trough:  Draw at \_\_\_\_\_\_\_  Antibiotics: | | |
| **SKIN** | **(Only mention abnormal findings)** | **Wounds/Pressure Ulcers**  1.  2.  3.  4. | Activity Status:  Wound Consult Yes No  Chlorhexidine wipe: Yes No  Chlorhexidine bath: Yes No | | |
| **LINES** | **Lines** | Date Placed | PT/OT Ordered Yes No  DVT Prophylaxis Yes No  SCDs Yes No  24 Hour Chart Check: | | |
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| **PATIENT** | **Psychosocial:**  ***Resident presents plan. Please bring up nursing concerns after resident has discussed plan.*** | | Questions for MD: | |

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| --- |
| Updates/Plan |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| 0800 | 0900 | 1000 | 1100 | 2000 | 2100 | 2200 | 2300 |
| 1200 | 1300 | 1400 | 1500 | 0000 | 0100 | 0200 | 0300 |
| 1600 | 1700 | 1800 | 1900 | 0400 | 0500 | 0600 | 0700 |