	Generic CCU				_	NASTVAL					
Signature Tit		Title	Initial		4						
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Signature Requiring	Co-Signature Date/Shift	Initial/Tit	tle		1	Magnetic on					
- December 100 Control of the Contro	the first safety and the first						ADDRESSOGRAPH				
	-	DES	_	-	-	OMES	D = DAYS E = EVENINGS N = NIC	SHTS			
Problem/	Day		D	E	N	Problem/			D	E	T
Needs Knowledge	Patient/family verbalizes understanding of anticipated discharge and participates in decision making			+	-	Ineffective Airway / Clearance	ENGLISHED BURNEY YOURS TO SHOW			_	\perp
							No evidence of respiratory distress Lungs clear		-	_	+
Deficit related							Lungs clear	-+	-	-	+
to plan of care							[270 0 3 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6				
	Hered I heling the totalize					Impaired Gas					
	de la programma de la constanta	191				Exchange	elderliggs 1 7 4 5 6 i				
	Pain free or verbalizes relief after			+	1		Transfer out of CCU	_	-		十
Pain /	intervention.					Discharge	Transfer dat of CCC				
Symptom	Relief of symptoms					Plan					H
Management				_			base0894-3000fb7**(
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	Afebrile			Ī		auconione en la mentra de la companya de la company					
Potential Infection	No. 11 Control of the		e de								
inrection	No evidence of infection					1000	sing menuepanam holmod \ analgyhij				
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Immobility	Performs ADL's independently			_			and the control of the second of the control of the				
	T chomis ADE's independently						Damaina la la facilitation de		_		L
						Patient Safety					
er e general a partir e algoris a ante							CHAIR CHINICITE.	_	+		-
Hemodynamic	Vital signs stable										
Status Impaired	No cardiac arrhythmia Chest pain free					Chi lata ii	No evidence of skin breakdown.		T		
	- Indicate paint in Co			-		Skin integrity			+		_
Fluid / Electrolytes	Urine output > intake						Patient/family verbalizes satisfaction	$\overline{}$	十		
	Labs within therapeutic range				-	Patient/Family	with hospital stay/care.				
	cabs within therapeditc range					Satisfaction			T		
		INTERVE	NT	ONS	(co	ntinued on back)					
Patient Care	bsalctalem labate to at		D	Ε	N	Patient Care		[T	F	N
Categories	Indepart of the second					Categories		-		-	,,
Discharge	Identify discharge needs:		100						\top		_
Plan	- Home with VNSwithout VNS	4	12.50								
	- Renab racility									1	ш
	- Long Term Care						Lunch%	-	+		Н
	hawating to pate			1			Dinner %		1		::::
	Collaborate with physician regarding ne	- he	_		\dashv						
	for continued critical care						completed. Daily Weight:		+	\dashv	_
							VVeigit.				
				\neg	1			_	+	-	

* indicates medical orders needed

INTERVENTIONS

Patient Care	Day	-	E	AI	Patient Care		-	E	A/
		D	E	N			D	E	N
Categories	Date:				Categories	The production of the state of			
	Cardiac monitor alarm parameters set					Encourage verbalization of fears /			3.1
Assessment					Teaching	concerns.			
&	Admission assessment reviewed /			3 .	&	Assess patient / family satisfaction			
Treatments	updated				Psychosocial				1.
						Learning needs / teaching plan:			
	Assessment completed per unit				Samuel and the second s	Discharge Instructions:			
	standards					Medications:			
	Standards				The second secon	wedications.			
					all protection of the production of the contract of the contra				
TOTAL TRANSPORT	I & O measured per unit standard				en de la companya del la companya de	Food and Drug interaction:	-		
64.60	D/C foley if not done already		23	803					mangi -
	Security Colors (Color, Color, Color) Colors (Color) Color	100	8	1.9		MD follow-up		and the	
	* Respiratory care provided	base i				and the second s			
ing in the second second	a de la composição de l	internation				Activity restrictions:			
	Patient extubated if applicable	200	(1)			named a colonia biological and a balancial as			
and the second second second second		arer i		1		Diet:			-
	D/C O ₂ if applicable	1015	10			Dict.	30.0	1	- 1
	Dio O2 ii applicable	100	EEE POST			Daile dia avanian with a stire to the sail.	\vdash		-
	D/C iV/o if analisable			1		Daily discussion with patient / family on			
	D/C IV's if applicable			1		current status / issues (document details			
						in progress record)			
	Maintain 1 Heplock		ide :	3		35498V2950	1,00		
	Peripheral IV Therapy Management	is a first		-	and the part of the second or and the second of the second	Analgoya ie iela Elija je e	1932		
	Protocol followed			-000		to the state of th	er se ig		
				-		the production of the producti			
	* GI Prophylaxis							- 1	
	Or Frominano			1					
	* DVT Prophylaxis	\vdash	-			II ob / diagnostics society society of: MD		-	=
	DV I Propriylaxis					Lab / diagnostics results reviewed; MD			- 1
				2000	Specimens	notified if indicated.			_
	Hygiene / comfort management protocol			93.	&	* Tests / Procedures		- 1	
	followed				Diagnostics				
	Pain Management Protocol followed					A CONTRACTOR OF A CONTRACTOR O			
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	D/C invasive lines if applicable			T-sec-	alies angles and responsible to the second of	Mississes about a 31 A 2015 CT CT		- 1	
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University Medical Center

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