Signature		Title	In	itial		WITTE					
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Signature Requirin	ng Co-Signature	Date/Shift	Initial/1	itle							
						1		ADDRESSOGRAPH			
			DES	IREL	00	J JTC	OMES	D = DAYS E = EVENINGS N = I	VIGHTS	3	
Problem/ Needs	Day Date:	10 marin		D	E	N	Problem/ Needs		D	E	N
Knowledge Deficit related to plan of care	Patient/family verbalizes understanding of diagnosis and plan of care, participates in decision making.										
									E.		
Pain Management	Pain free or verbalizes pain relief after intervention.										
	Pain management established for discharge.										
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Alterations in ADL's due to:	assist	n ADL's with (ch ance endently	noose one):	sites							
	ag sa sa sa sangajangan taka pagasalah pengabah berajah dalah tag pagasangan mendali salam sa tagtingan menasa sa jadi ditag							Discharged		\vdash	+
							Discharge Plan				
		1					Patient Safety	Remains injury free in a safe environment.			#
of Johnson State										_	
							Skin Integrity	No evidence of skin breakdown.			+
	graved have planted to the same service.						Patient/Family Satisfaction	Patient/family verbalizes satisfaction with hospital stay/care.			
	agun, e se es espagagan, y escarar, con estra esta del	in in the second	W750\/5		0116						
Patient Care			INTERVE	D	E	N	ntinued on bac Patient Care	(c) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	D	E	N
Categories	agentrola na glicarna, treli na como printeri emetrola presione i c		- via supranagana di su				Categories	* Diet:		-	1
Discharge Plan							Nutrition	% of diet consumed:			
								Breakfast% Lunch % Dinner %			
								Passure Liter Provention Protocol Passuretory Care provides (See Passuretory Care Pacers)	(3:3:33		

Generic Medical

MR#	INTE	ERVE	ENT	ONS	(continued)				
	Day	D	E	a beautiful to the	Patient Care	Q abit has	D	E	N
Categories	Date:				Categories				
Assessment	Vital signs q hrs.				Teaching	Assess patient/family satisfaction.			
& Treatments					& Psychosocial	Encourage verbalization of fears / concerns.			
	* Telemetry D/C'd					Learning needs / teaching plan: Medication:			
	* O2:				film of the security and the security of the s	Activity:			
				land to the state	TO THE SECTION OF THE SEC	Diet:			
	THE CONTROL ENGINEER CYAG & C					Modifiable Risk Factors:			
		11191	la de la companya de		* 1	Other:		200	
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					Specimens	Lab / diagnostics results reviewed; MD notified if indicated.			
					& Diagnostics	* Tests / Procedures			
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	Mecanismis - 45	hot							
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	Paramilianny verseises salicined on the			8.73		Falls protocol maintained.			=
	V V				Safety & Activity	* Activity level:			\dashv
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	Ulugiana & Comfort Protocol				grand from the control of the contro				
	Hygiene & Comfort Protocol Peripheral IV Therapy Protocol								
	Pressure Ulcer Prevention Protocol								
					Page digital in the self-				
	* Respiratory Care provided. (See Respiratory Care Record)								