DIET: NITAKE: SERVICE TEAM	DATE	N	UTRITION	/ METABO	DLIC PA	TTERN		DATE	ELIMINATION PATTERN						
HOUSE OFFICER: BEEPER #: OUTPUT: BEEPER #:		DIET:									SERVICE TEAM				
NPO FOR PROCEDURE ON															
NPO FOR PROCEDURE ON									OUTPUT						
FLUIDS:		□ NPO F	OR PROCE	DURE ON	-	(E	DATE)		0017 01.	BEEPER #:					
TOTAL AMOUNT:									EXERCISE AND ACTIVITY PATTERN	COND	CONDITION DATE				
DIETARY:		TOTAL AN	AOUNT:		cc/24	HOURS				ITION/DATE					
NURSING:		DIETARY:		cc/24 HOU					ACTIVITY.	ISOLATION: TYPE AND DATE					
DAYS		NURSING						 							
NEST SPECIMEN MONTOHING TYPE FREQUENCY									VITAL CICLIC						
WEIGHT: BEDSCALE STANDING PATIENT CARE PLAN PRIORITIES INTRAVENOUS LINES #1 #2 #3 #4 DATE OF INSERTION: URINE TEST LOCATION: STOOL FOR HEMATEST CARE: TYPE: OTHER			שחוט	LVLS	NIGH	113			VITAL SIGNS:		SPECIMEN MONITORING				
WEIGHT:								 		DATE	TYPE FREQUENCY				
INTRAVENOUS LINES		WEIGHT		OCAL E		TANIDIA					FINGERSTICK				
INTRAVENOUS LINES		WEIGHT.		SUALE		IANDING	<u> </u>		PATIENT CARE PLAN PRIORITIES						
DATE OF INSERTION: SIZE: LOCATION: CARE: TYPE: NORDERS - INCLUDE RATE URINE TEST URINE TEST OTHER		INITED AT ITS	10110111								SPECIFIC GRAVITY				
SIZE: LOCATION: STOOL FOR HEMATEST CARE: TYPE: OTHER		" " " " " " " " " " " " " " " " " " " "					#4		,						
LOCATION: CARE: TYPE: OTHER NORDERS-INCLUDE RATE STOOL FOR HEMATEST OTHER											URINE TEST				
CARE: TYPE: OTHER DATE N ORDERS-INCLUDE RATE															
TYPE: OTHER DATE IV ORDERS - INCLUDE RATE		LOCATION:									STOOL FOR HEMATEST				
DATE IV ORDERS - INCLUDE RATE		CARE:													
DATE IV ORDERS - INCLUDE RATE		TYPE:									OTHER				
	DATE		IV ORDE	RS - INCLI	JDE RA	TE		DATE							
	-ni-	(RE							TREATMENTS	DATE	TREATMENTS				
								-							
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		-													

Patient Label

PATIENT KARDEX

DATE ORDERED			DAILY LAB WORK	DATE ORDERED	DAILY PROCEDURES			DATE ORDERED	DATE TO BE DONE		TESTS AND PROCEDURES
DATE RDERED	SLIP MADE OUT	DATE TO BE DONE:	BLOOD WORK	DATE ORDERED	SLIP MADE OUT	DATE TO BE DONE:	BLOOD WORK				
								DATE ORDERED	SLIP MADE OUT	DATE TO BE DONE:	SPECIMENS

Patient Label

PATIENT KARDEX