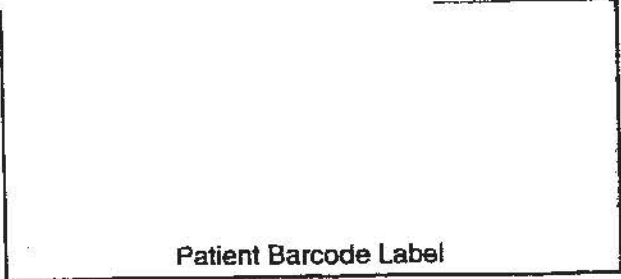


ACUTE PAIN SERVICE: North St Pain Management
DAILY PROGRESS NOTE



HealthSystem

Date: _____ Time: _____

At: _____ patient has been seen and examined for continuing treatment of pain
Body Site _____

Treatment Day # _____

IV PCA Daily follow-up (99231)

- morphine 1mg/ml
- dilaudid 0.2 mg/ml
- other _____
- Basal Rate _____ cc / hr
- Initial Bolus _____ cc
- PCA Dose _____ cc
- Delay _____ min

Epidural Daily follow-up (01996)

- new epidural placed today (62279)
- bupivacaine 0.125%/fentanyl 10 mcg/ml
- morphine 0.01 mg/ml
- other _____
- rate: _____ ml/hr

- catheter site: no sign of erythema, exudate, tenderness, or induration
 catheter removed intact

Pain Relief Assessment:

- Pain score (0-10) at rest: _____/10 with movement _____/10
 patient unable to report; behavioral indicators reflect adequate pain relief
 patient satisfied with current pain management yes
 no: specify: _____

Side Effects:

- none
- resolved spontaneously
- resolved with treatment
- did not resolve
- motor block
- sensory block
- respiratory depression
- hypotension
- sedation
- confusion/agitation
- pruritus
- nausea/vomiting
- urinary retention
- other: _____

Termination of Treatment:

- no longer needed
- anticoagulant therapy
- catheter disconnect
- other: _____
- side effects unresolved: _____
- catheter dislodged
- site inflammation
- fever > 39° C

Treatment Plan:

- continue present therapy to maintain control of pain
- modify present therapy to improve control of pain (see physician order sheet)
- discontinue present therapy; analgesia to be provided by primary service

Comments: _____

Name: _____ Signature: _____

704-011A

White = PROGRESS NOTE

Yellow - WORKBOOK

Pink - BILLING