Coronary Car	theterization	_ Interver	ntional			1000					
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Problem/	Day			D	E	N	Problem/	是自己的证明,但是是一个企业的证明,但是是是一种的证明。	D	E	N
Needs							Needs	다음을 사용되었다. 아르 바라이 중인하는 수없들이다.			
	Patient/family verbalizes understanding of diagnosis and plan of care, participates in decision making.						Telemetry	Remains WNL for patient			
Knowledge											
Deficit related											
to plan of care								·			
							Unstable	Vital Signs stable for patient.			
	Pain free or verbalizes pain relief after										
Pain	intervention.		į.				Vital Signs	Patient awake, alert and oriented.			
Management	Remains free of chest pain, SOB, groin or back discomfort										
								Hemodynamic status stable for patient.			
	LEAR TO WELL AND			Π				1			
				17.09							
	Able to perform ADL's with (choose one):										
Alterations in	assistance independently										
ADL's due to:											
	Patient ambula	tory ad lib wit	hout difficulty	T							
	nation make by earlier and appear were trosses ever										
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	Remains free of bleed, hematoma, bruit, ecchymosis, signs and symptoms of infection			T				Remains injury free in a safe	T		
Sheath Access							Patient Safety	environment.			
Site											
				T				No evidence of skin breakdown.	T		
							Skin Integrity				
	Will have (+) po	eripheral puls	es and	T				Patient/family verbalizes satisfaction	T		
Tissue	affected extremity warm bilateral						Patient/Family	with hospital stay/care.			
Perfussion	(-) numbness / tingling						Satisfaction		+		
1 0/1433/0//	,										
gran i na sa sagara ta communidad mencana a gibangan Managan	All II de la contrata e repara la seguina dependa e la composita de la composi										
			INTERVE	NTI	ONS	(00	ntinued on bac	(k)			-
D-4'4 O	1		174121442	1	-	THE RESERVE OF THE PERSON NAMED IN			To	I E	I AI
Patient Care				D	=	N	Patient Care		D	E	N
Categories	The state of the s	A Committee of the Comm		-	_	_	Categories		+-	_	-
Discharge Plan	Patient will be discharged in a.m.						Nutrition	* Diet:			
									12222		
								% of diet consumed:			
								Breakfast%			
								Lunch%	-		
	*							Dinner %			
								Encourage P.O fluids			
								Yes No			
								CONTRACTOR OF THE PROPERTY OF			
	1							The state of the s			
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								(See Respiratory Care Report)			
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MR#	TNI emercial control of the control	ERVE	NTI	ONS	S (continued)	A. EPSTROPHEN GOISSNESS IN	<u> </u>		
Patient Care	Day	D	E	N	Patient Care	THE PROPERTY OF THE PROPERTY O	D	E	N
Categories	Date:				Categories				
Assessment	Vital signs q hrs. as per post interventional orders				Teaching	Assess patient/family satisfaction.			
& Treatments	I & O q hrs.				& Psychosocial	Encourage verbalization of fears / concerns.		timi natrimo i cas	
	* Telemetry					Discharge teaching completed, see discharge summary			
	* O ₂ :	+				uisonarge summary	\vdash		
	Change sheath dressing prn sterile	+		-					
	tech								-
	Final groin assessment and dressing change done prior to discharge and documented					(800) (800) (700)			
	HATLE TO THE TAXABLE PROPERTY.								
					Specimens &	Lab / diagnostics results reviewed; MD notified if indicated. * Tests / Procedures	1 2 2 2	Black of the	
					Diagnostics	CBC a.m. EKG a.m.	6 36 101 54	o de l	
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	CONTRACTOR OF THE STATE OF THE			-					
						contaction	2.5		
	PESDAIDHNE ECONOMY Y PORTER OF THE				Safety	Falls protocol maintained.			
					& Activity	* Activity level: Ambulatory ad lib			
						245-00-00-00-00-00-00-00-00-00-00-00-00-00			
British and the second	100 100					A CONTRACT OF THE PROPERTY OF		27%	
gang panggan santi maga-yang mag	Hygiene & Comfort Protocol								
	Peripheral IV Therapy Protocol								
	Pressure Ulcer Prevention Protocol								
	* Respiratory Care provided. (See Respiratory Care Record)								