		KEY LEVEL OF RESPONSE: A=alert, S=sleeping, L=lethargic, D=disoriented DRESSING: D=dry and intact, B=bloody, R=reinforced VOID/CATHETER: P=catheter patent and draining, +=pt voided, O=problems requiring further documentation JP DRAIN: enter amount when drains emptied AMBULATION: +=pt ambulated. Pt's activity tolerance & any problems should be documented in the comments									
TIME				Τ		T				COMMENTS	
BLOOD PRESSURE											
TEMPERATURE											
PULSE											
RESPIRATION											
LEVEL OF RESPONSE											
DRESSING											
VOID/CATHETER											
JP DRAIN											
AMBULATION								-			
										,	
Vital signs to be done of Assessment to be done sounds, bowel sounds,	Q 30 mi	ins x 2,	then Q	hour	x 3 asse	essmen	t to incl	ude abo	ve items and may the comment sec	also include breath sounds, he	eart
CRITERIA FOR DISCHAR 1. Oriented to person, place 2. Stable vital signs 3. Able to walk without diz 4. Able to take oral fluids w 5. Able to void 6. Dressing dry with no vis 7. Able to cough 8. Absence of respiratory	ce, and to the siness without residue to the side of t	time nausea /	vomitin	g	JRGERY	:	- 124	signature			
Meets Criteria: Yes	Time	of Discha	arge		R ev. 2/2001						