4	¥)	4) 5
	DATE	PA	WIENT LABEL
Memorial Hospital	- (5 And 69 - 10		
PATIENT ADMISSION DA			
NFORMATION			
icheduled Procedure:		Chief Complaint: Physician:	
ınticipated Anesthesia: ☐ General ☐ IV Sed ☐ Lo lode: ☐ Same Day Admission ☐ Inpatient ☐ Outr	ocal 🔝 None 📋 Regional/Blo	20 March 2008 March 127 March 18	
REOP PHONE CALL			
lumber: ipoke To: iformation Given: □ Valuables □ Escort □ NPO	☐ Advance Directives ☐ Ins	DLeft Message □ No Answ	Time: er : ☐ Answering Machine cod Bank Protocol
☐ Location/Directions ☐ Time to A comments:		☐ Nails/Jewelry/Contacts	
PATIENT MEDICAL HISTORY A Indicates p			
Cother Self Testicular Exam Health: Mammiogram (>35 Yrs)	Self Breast Exam	PAP Smear	
nevaus surgenies		counter herbal medications?	ENT MEDICATIONS LAST DOSE
	Yes No	occurrence in the control of the con	
	-	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
			×
	1000		M2
	_	Notes that the second s	
	-		100 FEE
SUBSTANCE LISE DI Norie		ALLER	GIES
SUBSTANCE AMOUNT/DURATION Alcohol	LAST USED	□ NKD/	
] Drugs		Other	
Cessation Teaching - Dasire Smoking Cessation Teach.	ing? 🔲 Yes 🗋 No		
Comment:	<u> </u>		
GNATURE OF NURSE:		DATE:	TIME:

PREOP CHECKLIST	CARE NURSING RECO	RD AND PATIENT ADM	N DATA BASE					
Planned Procedure:	rbal 🔲 ID Band 🔲 DOB							
		90	N/W3 					
VITAL SIGNS: T	PR _Weight	BP D2 Sat	NPO					
FBS: Time	e:	nformed Consents: 🗀 Surgio	al Anesthesia	PATIENT LABEL				
YES	N/A DATE/COMMENT	1000	☐ Dentures removed/loose ter	eth noted Disposition/Locker #	TANKA			
H&P	D		☐ Jewelry/Body piercings rem	oved/taped gn				
HCI/CBC 🔲								
Chemistry			☐ Other					
PT/PTT	2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1							
UA 🔲			FOR REATTACHMENT OF BI	LOOD BANK BRACELET ented one picture ID or two other forms of ID) helare			
Pregnancy Test		200000000000000000000000000000000000000	reattachment of band from	pink envelope.	7 061010			
EKG 🔲		1 PS 4 12 V	RN SIGNATURE/DATE:					
Chest X-ray	D		I have presented the pink of the blood bracelet.	nvelope and identified my signature before h	aattachment of			
LMP:	N/A		PATIENT SIGNATURE:	. 2000				
SKIN ASSESSMENT		RESPIRATORY ASSES	SMENT	PHYSICAL LIMITATIONS				
Nursing Diagnosis: Skin Inte		Nursing Diagnosis: Gas Ex	change/Tissue	Nursing Diagnosis: Physical Mobility/Sens	sory Deficit			
가게 살은 그는 사이들이 가득하는 사람이 있는 것이 없는 것이 없는 것이 없는 것이 없다.	skin integrity/body temperature	Goal: Identify alterations in	gas exchange & support as	Goal: Identify limitations in mobility/sensor	num & support			
& support as appropriate.		appropriate.		as appropriate.				
Evaluation: Meets goal Pale Flushed		Evaluation: Meets goal	☐ See comments	Evaluation: Meets goal Descomm	nents			
☐ Cyanotic ☐ Cool	☐ Warm	☐ Lungs Clear	☐ Wheezes: Left Right	☐ Hearing ☐ Vision ☐ Spe	ech			
☐ Dry ☐ Diaphor	STATE OF THE STATE	☐ Rales: Left Right	☐ Hoarseness - Cough	☐ Mobility ☐ Walker ☐ Cruf	lches			
Rashes:			NA		i di di di la			
] Ulcers:		Liters Per M	inute:	Prostbesis:	<u> The Grand Addition .</u> An Austria — Santa			
Abdominal Assessment:		SaO2:	□ N/A □ Disposition:					
☐ round ☐ obese ☐ di	stended 🛄 non-distended	Comments:		Comments:				
☐ tender ☐ non-tender								
Comments:					27.00			
4.0	Thought Process / Coping Ability		Nursing Diagnosis: Altered G.	100				
Evaluation: Meets goal	hought process/coping ability/a	nxiety level	Goal: Identify afterations in gr & support as appropriate.	awin & development				
	riented Confused		Evaluation: Meets goal {	□ See comments				
155100 ¹¹⁻¹ 11	rowsy		☐ Appropriate For Age☐ Un					
하는 집에서 얼마하다는 게 기존하다니다.	gitated Combative		☐ Inappropriate For Age					
	busive Cooperati	ле <u>По</u>	le c					
☐ Non-communicative			Comments:					
fistorian: Patient		.49 Lui	\$ 1					
Other:		1774 April 1774	1		<u>Podráváředský metro.</u> Podráva vědot vytodí se			
Comments:		er er						
					······································			
ALL RISK ASSESSME			<u> </u>					
Vursing Diagnosis; Potential		/ Reduce Risk Factors	Evaluation: Meets goal	☐ See comments				
EACH OF THE F	OLLOWING EQUALS 1 PO	OINT SCORE	EACH OF THE FO	LLOWING EQUALS 3 POINTS	SCORE			
tge 70 or greater		<u> </u>	Chronic / episodic confusion					
Jrinary / bowel - urgency / in	ocontinence		Unsteady gait	* * *				
hronic debilating disease			History of prior falls	# ************************************				
ise of drugs affecting blood	pressure /		er ensurescentiv letters w					
Mental status, urination /	defecation		TOTAL POINTS					
ensory deficit			Low risk protocol (0-2 points)					
ostural hypotension			High risk fall prevention proto	col	<u> </u>			
pepression / hopelessness	10		Initiated (3 points or greate	er)				
leurological dysfunction /	***************************************		High risk protocol NOT initiate	ed	-			
Mobility deficit			Due to condition:		1			

	IONS LINE CONTRACTOR	ANE	STHESIA CO	MPLICATION	5	\$ 10.00 M			
Unknown	☐ Hepatitis			Nausea/Vomitin					
☐ Up to date	☐ Tetanus	# E		Other	250				
Childhood	Other	<u> </u>	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7.7. XX				
		-		-	***************************************				
	5 -					*		CONCRET LADEL	
INVASIVE LI	NES, TUBES, AND A	PPLIANCES	☐ None	61 1 1		in, topics	200 St. 10	State Control of the	Town F
	osis: Altered Nutrition / Sk			ng / Infection	W.	10 10			
	integrity of identified lines				☐ Meets goal	See comments	i		
	V: Site:							Inserted By:	
•	Site:					Amount:			
☐ Other: ☐ PI	ICC Line 📋 Central Lin							NY 1971 17	
Comments:	95 <u>—</u> 27								_I Nasogastric Tube
	200								☐ Endotracheal Tube
CHITHRAL	SPIRITUAL, AND PS	VCHOCOCIA	I NEEDE				4		
	osis: Spiritual Distress / A		L NEEDS	18					38.8H
	ndividual needs & support		Euroteotion: E	7 44	7 6	-4-:			
						าเร			
	eds:					G 11805			
_) Language Br			130						@ 5% <u></u>
	eds / Religious Preference							0.000	
	al Needs: needs expressed by the p		200 82100-300000	190-10		3276	184 1846		- 1018 - 101 - 1764E
				is:					
	PLANNING	ne de de se pro-			,	30. 3 69	V 76	31 494 the 3-0 to	
	osis: Home Maintenance I								
	ndividual needs & make re	elertals as appro	opriate. Evalua	tion: 🔲 Meets g	oal 🗌 See c	omments		E 102	758
☐ Family Waitin	ng: Name:	Ž		200 0000					
	Location:	3 37					·		
☐ Ride Home:	Name:				-				
	Number:							- Verse Wall	
Available hel	lp after discharge: 🔲 Fa	mily 📋 Friend	I IN/A I	Needs discharg	e planning: N	otified:		31V2721	<u> </u>
	Lives With: 🔲 Fa	mily 🔲 Friend	I □ N/A						
TEACHING N	IEEDS	100		3 8			. 4		A The war 10 ag
Nursing Diagno	sis: Knowledge Deficit					STATE OF STREET		· · · · · · · · · · · · · · · · · · ·	
Goal: Identify in	idividual needs & provide	instruction as a	ppropriato. Eve	aluation: 🚨 Mee	ts goal 🔲 Se	e comments			
	and/or Significant Other 1	Verbalizes Unde	erstanding Of:	Surgical Proce	dure U Rre-	Op Care 🔲 Intra-C	p Care 🔲 F	Post-Op Care	Pain Management
Comments:		wante la company	a a market and			****			
PRE-OP MED	AND RESERVED IN THE LAND OF THE PARTY OF THE			Compared to the control of the contr			_8243		
	JICATIONS LINA		Dose	Route	Time	Given	Ву	Col	nments
	ACATIONS 1 N/A		Dose	Route	Time	Given	Ву	Col	nments
	JICATIONS LINA		Dose	Route	Time	Given	Ву	Col	nments
	AVA EL EMOITACIO		Dose	Route	Time	Given	Ву	Col	nments
	JICATIONS 11 N/A		Dose	Route	Time	Given	Ву	Col	nments
	JICATIONS 11 N/A		Dose	Route	Time	Given	Ву	Col	nments
	JICATIONS 11 N/A		Dose	Route	Time	Given	Ву	Co	nments
	JI N/A		Dose	Route	Time	Given	Ву	Col	nments
	JUNA I		Dose	Route	11me	Given	Ву	Col	nments
	JUNA IN A I		Dose	Route	Time	Given	Ву	Col	nments
	JUNA IN A		Pose	Route	Time	Given	Ву	Col	nments
	JUNA INVA		Dose	Route	Time	Given	Ву	Col	nments
	JUNA DINA		Dose	Route	Time	Given	Ву	Col	nments
					Time	Given	Ву	Col	nments
IURSE NOTE			Dose			Given	Ву		
IURSE NOTE									nments
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IMMEDIATE PRE	-OP A	SSESSME	ENT B	Y:			:, (* ' , ; j),	1 9 E 19 4 A									HOSPITA
Nursing Diagnosis: /						아이 아이들이 아이지 않는다.	ng Ability G	Goal: Identify at	terations								
in thought process/c				support a	as appropri	ate.											
Evaluation: Meet Patient Identification				Chart	□ Fami	w me	bood Rand	Ď									
Procedure/Site of su						,	2000 Band										
Consents:						-						24-2000025	0.00				
Blood Available: 📋	N/A L	_I Type & Se	creen [Type &	Crossmate	ch Uni	ts			ALLE	RGIES:		(P)**.				
Mental Status:									3	DN	KDA			React	on:		
<u> </u>	Drowsy		sleep	1000	responsive	·	Unconsciou	ıs		u	itex			T-400-2009			
[1] 전시시시 (CONTRACTOR) 2 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전	Confuse Combat	3 ¹¹	nxious busive	386666	jitated		Crying	(1)			her						- 10
15.75 (1991 - 15	Patient	45.00000.0			n-commun					7. 2 							
_							1775	100 (TS4000		10000	1000		-7-7-			7500 - ETCH	9450MH1 X 22 5 50
												20 000					
	#12-2165-121					******		35 M						-5:-			
TRANSPORTATIO	-			-									ř.				
U Stretcher ⊔ Be					3586 AS	25	7.0000000000000000000000000000000000000	100000				her			99		
INTRAOPERATIV	ADDEC.				**(0)2/25/01/25			<u>du Ak</u> réu		a KAŽĄ	gyz jájsti			MARIE.		A	7349 A
Room:			3662-4579 CO	- 10	_ASA #:		Delay	Code:		0 100 				CASE 1	TYPE:		
Times: Room Read	ty Time	Pa	itient In		Pause Tir	ne .	Procedu	ure Start F	rocedure !	Stop	Pati	ent Out		☐ Elect		☐ Ad	
1					1 1									Urge Urge		☐ Re	tum to OR
Preoperative Diagnos	sis:			, .										☐ Eme	rgent		
	m.m., -	323799	95	k-1881		•	- W-15	2250				188200				3000	
Postoperative Diagno	osis: 🗌	Same as P	re-Op		- X883167		6536	7.5%			3 4 5	10.0					_
78 2						11-00/00	**		7.0				_		70.0	- Wester	
Operative Procedure	(s):_			2015—24:					1		e me		40.			-015-	
															2000-20		
Wound Classification	: 🔲 1/5	Clean; 🔲	2/Clean/C	Contamin	nated; 🔲	3/Conta	minated;									82	
Anesthesia: 🖸 GEN	ERAL	MONIT	ORED AN	NESTHE	SIA CONTI	OL SED	NOITA	LOCAL (SPINAL	□ BL	оск п	EPIDL	IRAL	□ NON	F		
Anesthesia Provider(
Physician:								1st Assistant:									
2nd Physician:								2nd Assistant:									
		or woods to the	V-7-7704	2	W45			I [
C	IRCUL	ATING NUR	ISE		JNT.	IN	ОСТ	ļ ļ		SC	RUB PER	SON				IN	OUT
350 55 CO		Cartesia-	500				4			-							
Relief:	X-				 		+ -										
nellel.		· · · · · ·			1			Relief:	2000					\$5			
							1		0-00000	700		7.				- 20	
Vendor:				Y.:				Other:	0.833			ENGLISH	i.				
Position for Surgery	r: Nursii	ng Diagnosi	is: Physic	al Mobili	ty / Skin Int	tegrity / E	Body Tempe	o rature -				120					77.5
Goal: Prevent physica	al injury	& infection,	, maintain	proper b	ody alignm	ent & ter	mperature.	Evaluation;	☐ Meets	goal [See con	nments					
☐ Sitting		Beach C	hair		OR B	ed:		Positionin	g Alds:		☐ Foot	plate			☐ Tho	mton H	ead Rest
☐ Jackknife		Supine			□s	tandard		Armbox			Hear	d ring			☐ Table	e Exter	nslon
☐ Lateral, Left sideup		Other:	trianguerra en maistra		# ### ###	racture		Arms to		ht Left	☐ Head						/Andrews
Lateral, Right side:		*# prone, B				ysto		Axillary			☐ Kidn	10000	121 7				ctive wraps
☐ Lithotomy ☐ Prone*		Checked By				ye Streto	cher	☐ Bean B	ag		☐ Late				U Othe	er	
_ Frome				- 29	9 5	tretcher		Bypass	Leo Posit	tioner	☐ Leg l		100	n Len	Commi	ante:	
Safety Strap: 🗋 Yes	FINA	A			1 <u>207</u> 88	t. Bed olette		☐ Cardia	200		200	7.5		25 - 110000	Commi		
fi 8	1924	• ,			\$200 PA 15	ackson		Chest r			☐ Sand						
Applied By:		18068			14	ariatric		☐ Eggcra			☐ Schi				-		
Location: Across the	highs					ascular		O Kn		ht Left	☐ Shou				\$8		
Other:	3-10-10-000	3				R Specia	alty Table	D EN		ht Left	☐ Shot	device		the			
					7-			D He	-	ht Left					ow Fin) Cen	dy Cane
Equipment: Nursing	Diagno	sis: Injury	•••					Y-10	or D Flot	plata	0	(11)	· 1307045		77. 1.11	_ Oan	ay opino
Goal: Prevent injury	Evalua	tion; 🔲 Me	ets goal	□ See	comments				y: 🔲 Flat unding Pa						Bv:		170
Electrosurgical Unit:						Coag		Pre	Op Skin C	Condition	: 🔲 Intac	t 🖸 (Other:		-,,	12.00	
Bipolar			A	1975—T		W 200	\$25(±);	Area	Shaved/0	Clipped:	Yes	☐ No					
8:						Coag _			ositioning								
Argon Beam:	#	10	Cut			Coag	***************************************	Ren	noved By:	Condition	. ni						
Endoscope:	#								rt Lung Ma								200
tanana a		THE STATE SCENE OF THE STATE OF						, 100	19 1711			100	**				

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	The state of the s	RECORD AND PATIENT ADM ONTINUED)	The second of the second secon		MEMORIAL HOSPITAL
Compression Stocking	a: Nursing Diagnosis: Emi	boli	W 10 10 10 10 10 10 10 10 10 10 10 10 10		
	[편^^ - ^^ ^^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^	Meets goal See comments			
		Left Knee Thigh			
- 19.55명이 19.50 - 10.00 - 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00	뭐가건지하더라고!!! 그렇게 하는 말라고 살	tLeg □ Knee □ Thigh □ Fo	pot		
		nments:			
	mmrng #000	milena.	[Discoult DR. Chican	
Tourniquet #1:		over a		Placed in OR: None	ne a
	norrhage/Neuromuscular tra				eft By:
	for hemorrhage & neuromus	scular frauma.		All the state of t	eft By:
Evaluation: Meets go			e Alemantania de Calabrida de La como de Calabrida de Cal	CVP Right Left By:	
☐ None #:	Location:	*****	Padded: U Yes U No	Pulmonary Artery Catheter	Right Left Other
Pressure:	mm/Hg Applie	d By:	77.0	IABP Right Left By:	
On:	Off:	_ Off:		Foley / Catheter By:	5 51
Tourniquet #2:				Coude Size:	
☐ None #	Location:		Padded: Yes No	Clear, yetlow, cloudy, amber	r, bloody urine;
		d By:		Initial output:	
CARSING STORY (1994)	Off: On:			Final output:	
Warming Devices:		78 A T T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			uous bladder irrigation
	v Tamnaratura Goal: Main	tain appropriate body temperature.		The state of the s	nous bladder in gation
73 SQ (S	20	tall appropriate body tomperators.		Specimens: None	
Evaluation: Meets go		11.		Permanent	
- 1 to the second of the second of the	Lamp D Warmed Solution	* NO. 10 CO.	22		Li Fresh
				Anaerobic Culture	
Other:				Other	Trozen
Shave Prep Area:		By:	112		FIO
Surgical Skin Preparat	Jon: Site:		None	Disposition at relief:	
Nursing Diagnosis: Infed	ction. Goal: Reduce potenti	lal for Infection.		Ву:	
Evaluation: Meets go	pal :See comments			Blood Replacement: N/A	
☐ Betadine Scrub/Betad	dine Solution 🔲 Durapre	p 🗆 Exidine		Estimated blood loss:	No. of Units:
		166 FUTO (8228980800		Cell Saver: ☐ N/A Operator:	##
			lo pooling of solution		Off
				Bypass: Yes No	
IDDICATIONALEDIC	ATIONS on startle field	Dose Roul	e Time		Comments
MINIOATIONALDIO	ATIONS OF SIBING HOL	20107 2020 3 31000	, , , , , , , , , , , , , , , , , , ,	and the same of th	
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tel god signatur var var som som som som som					7000
					121 12799
-E			79	- 101 / - - - - - - - - - -	A A A A A A
IMPLANT LOG IN	/A 🔲 See Implant Record	đ			
	osis: Retained foreign body	Goal: Reduce potential for retained			
Sponge	rect	□ N/A Comments:			
Sharp	rect 🔲 Incorrect	□ N/A Comments:			H = H = 3723
Instruments 🔲 Con	rect Incorrect	□ N/A Comments:			- 100 Y
Initial Count: Circula	dor.	Scrub Person:			E CONTRACTOR OF THE CONTRACTOR
	itor.				
	itor:				
400000 HEROPAGE HOLD AND HAND TO BE A 201 FOR 15000		Scrub Person:			
Surgeon notined of co	Junt Action for incorrect	count:	U A-ray outcome:	riim	read by:
54 U U—4	500 300	The 20 17 M M M M M M M	4004 Mr Mr 1000 BCBC	15 <u>—3 43</u> 1	V 22.44.000
Drains: None Nu	rsing Diagnosis: Infection.	Goal: Reduce potential for infection.	Evaluation: Meets go	al 🔲 See comments	
	Size Loca	ation	Size L	ocation	Size Location
☐ T-tube		Nasogastric	·	Jackson Pra	utt
☐ Peorose		Hemovac		Blake	147 1722-1734-173
☐ Chest	85 TV 95	☐ Drain activated €	₩ <u></u>	Other	10 10 10 10 10 10 10 10 10 10 10 10 10 1
☐ Pleurovax/Emerson P	לשחי,		52440 ATAN	ASSESSED DE	TO 1200 H
					
Dressings: LI None	⊕ Band ald	☐ EZ Wrap Knee Brace	Packing	☐ Scrotal Support	☐ Telfa
4 x 4's / 2 x 2's	☐ Benzoin	☐ Frederick Mammary Support	Peri Pad	☐ Shoulder Immobilize	er
☐ ABD Pads				Sling, velpeau	☐ Xeroform
AND THE STATE OF THE PROPERTY STATE OF THE PARTY.	☐ Biedsoe Brace	Sland Dressing	Philadelphia collar	173 PR DII	Other
☐ Abdominal Binder	Cervical Collar, soft	☐ Kedix	Plaster/Fiberglass ca	D Dt. (Dt.)	
■ Abduction Pillow	☐ Dermabond	☐ Kling	Plaster/Fiberglas spli		
☐ Ace	Eye Pad	Knee Immobilizer	□ Post op shoe	Tape	
□ Adaptic	☐ Eye Shield	□ Laminated Splint	Red Cross Cotton	☐ Tegaderm	

ERIOPERATIV	E PATIEN	IT CARE N	URSING RECO	RD AND PAT	IENT AL	MISSION	ATA BASE		•	
MONITORING	LOCAL A	NESTHES	IA DNA	ff for the l			a di Arjir e			
MONITORS AND EQUIPMENT	TIME									
EUDIPMENT	220-									
☐ ECG ☐ BP Cuff	200-				1					
☐ Pulse Ox ☐ SaO₂	180-				_				COMMENTS	
	160-									
V •	140-							İ	····	
X	120-									
LOC Scale:	100-							ļ——		
Fully Awake=2	80-									
Arousable=1 Not responding=	60-									
	40-									_
	SaO ₂							1		
	Resp.			111						
	LOC									
	INITIALS									_
IMMEDIATE PO	ST-OP S	TATUS	似的特别是特			MARK!	312303		生物的现在分词 化二氯甲基甲基	
PATIENT STATUS			SKIN CONDE	ION:	r.h	TRANSPO	RT:		ACCOMPANIED BY:	
	LMA Rer		☐ Warm	Cool		☐ Stretche		oulatory	☐ Anesthesia/CRNA ☐ Nurse ☐ Resident/Inte	em
	Extubate		Pink	☐ Diaphor	etic	☐ Bed	A-1111 /	.PM	□ Surgeon □ Physician/Surgical Assistant	
	Intubated		Dry	Pale		Crib	trace as to find a contract		Other:	
	☐ Airway o		☐ Flushed	☐ Mottled		□ wc		ou/T-piece	Transferred To:	
	☐ Tracheos	storny	Other		-	☐ Side rain		Monitor	Report To:	
Unresponsive						Ambulat			Signature:	-
Comments:		_	·			Other:				_
								7000		
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		COCCOMENT DV					1		n	MEMUNIA	LHUSPIIA
		SSESSMENT BY:					-				
2,50		/Knowledge Deficit/Altered T	0.00	50	ng Ability G	oal: Identify afterations					
		ability/anxiety/ level & suppor See comments	т as арргорп	ate.							
0	(27.2)	erbal DBand Cha	rt D Fami	lv Oe	lood Band						
		erified: Yes Init.:		.,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
		Anesthesia Other					SHEATS OF S				
[2] [2] [2] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4		☐ Type & Screen ☐ Type	1925 1975	ch Uni	ts		ALLER	GIES:			2.44
Mental Status:	—Pransson s				27,44		DNK		Reaction		
☐ Alert [Drows	y 🔲 Asleep 🔲	Unresponsivo	e 🗀 l	Jneonsciau	5	Lat		Hodolio		
☐ Oriented	☐ Confus	ed 🔲 Anxious 🔲	Agitated		Crying		₩ <u>186</u> 00830		-		
☐ Cooperative [Comba	Section 200 Section 2 Control of the	Non-commun				□ OH	ner			
Historian:] Patient	☐ Other				**	4000	33 4			
Comments:	y		200	V2773. 10	35.12		/ x				
		ACCEPTANCE OF THE SECOND SECON									Old Depth Children
					- C						7 T. T. P.
TRANSPORTA	TION TO	THE OPERATING ROO	M to the second	4-77			1 1 22.00		227	. 1.1.	
☐ Stretcher ☐ I	Bed 📙	Carried W/C Am	bulatory By:		928 ED W			Other			ui.
INTRAOPERAT	IVE NU	RSING RECORD	建筑建设	李、刘、孙。	in originally	diota iliandis	19 mg 44 44	Historialismis	H. Karajir	r Report	January &
Room:		se #:				Code:		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	CASE TY		States a substant state
Times: Room Re			Pause Ti		Procedu			Patient Out	☐ Electiv		Add on
1100111110	1809 18110		7 2036 11		1100800	T T T T T T T T T T T T T T T T T T T		ranen out	☐ Urgent		Add-on OR
									☐ Emerg	The same of the sa	Return to OR
Preoperative Diagr	nosis:				D 00 0	19 29 TA 00 TA	 	54 X4 82 83 30	_ Emerg	lei ii	
/									*****		
Bostonorativa Dias	nancie: [] Same as Pre-Op									
Logiobeignae Digi	gnosis. C	J Same as Pre-Op							<u> </u>		276
		a ista								A12-13-146-	E 90/01/13
Operative Procedu	re(s):	<u> </u>	2 70 00 20 0	1 10 10			-			3.7720	
# <u></u>		2474		- 100 A				8			
Wound Classification	on: 🔲 1/	Clean; 🔲 2/Clean/Contan	ninated; 🔲	3/Contai	minated;	☐ 4/Infected					
Anesthesia: 🔲 GE	NERAL	☐ MONITORED ANESTH	ESIA CONTI	ROL SED	ATION [LOCAL SPINAL	BLO	CK DEPIDURAL	☐ NONE		
		· · · · · · · · · · · · · · · · · · ·							5 No 1. 10 (1971) 20 12		
Znd Friysician:						2nd Assistant:		-673	7.335.00		
	CIRCUL	ATING NURSE	INT.	IN	OUT		SCR	UB PERSON		IN	OUT
1		* * *		1	1 1				- 10 ±232	1	
		_	_	Constant of the Constant of th	1	-			84 83886		
Relief:			_	1	1	Relief:	ii X			-1-	-
, tellet.		Processor		-		noilei.		70	7.0-13.0-13.		
172540		W. M. (400)	400	1		L.,				i	
Vendor:						Other:					
State of the state	erv: Nurs	ing Diagnosis: Physical Mol	oility / Skin In	tearly / F	100			11 USA 18 6			
		y & infection, maintain prope				Evaluation: Meets	s ooal 🔘	See comments			
☐ Sitting	1000	☐ Beach Chair	25. 0.70		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		o gam, 🚨		r		
☐ Jackknife			ORE			Positioning Aids:		Foot plate			n Head Rest
112/2		□ Suplne	27-34	Standard		Armboards Rig	T.3	☐ Head ring		☐ Table Ex	
Lateral, Left side		Other:	V	racture		Arms tucked Rig	gnt Lett	Headrest	arena da reta		tall/Andrews
Lateral, Right sk	geup	"If prone, Breasts/Genitalia	M-18	Cysto	147001000	Axillary roll		☐ Kidney Rest Rig	T)	27.7	otective wraps
Lithotomy		Checked By:	92770	ye Streto	cher	☐ Bean Bag		☐ Lateral Arm Posit		Otner _	
Prone				stretcher		☐ Bypass Leg Pos	eltioner	☐ McGuire hip rest	7.44	Comments:	•
Safety Strap: - Y	(no. [] N	7A S	55000	t. Bed		☐ Cardiac Pillow	Signorie)	☐ Pillows	1 2	Comments.	
amety Strap: 1	es 🗀 N	/A	3,000	solette		☐ Chest rolls Rk	laht Left	☐ Sand bag	200	o/600	
Applied By:		1 1000		ackson		☐ Eggcrate Paddin		Schlein			* *
			7	ariatric		EES/W	5.5 Sec. 5.	☐ Shoulder roll	î		e e
Location: Across			10,500.0	ascular	alty Table	□ Eyes		☐ Shoulder traction	,		
Other:				/n Specia	апу табів	☐ Elbow Rig	ight Left	Sled device	lbs.		
					1000 2000 20	☐ Heel Rig	ght Left	☐ Stirrups: ☐ Aller	n 🔲 Yellov	v Fin 🔲 C	andy Cane
Equipment: Nursh	ng Diagn	osis: Injury		1000		Y-row Cla	on u M	Csarm Mini C-			
Goal: Prevent injun	y Evalu	ation: 🗋 Meets goal 📋 Se	e commente					u		lu-	
								☐ Intact ☐ Other			
Electrosurgical Unit		Cut				Area Shaved	VClipped:	_) Yes □ No			
Bipolar:	#2	Cut	- 2	Coag_				_Yes □No □	N/A		
Argon Beam;	#	Cut		Coap							
Endoscope:	#	710	- 747			Post-Op Skin	Condition.	: 🛄 Intact 🔲 Othe	r:		
	3966	CHOA	4. v			Heart Lung M	Aachine: (_]Yes □No #		500 - 167 - 1800 - 180	70 (1700)
Ligasure: #		_CUSA: # H	tarmonic Sca	apel: #		Other:				,	_

MEMORIAL HOSPITAL

NTRAOPERATIVE	E NURSING RECORD (CONTINUED)			\$Q				
Compression Stocki	ngs: Nursing Diagnosis: Er	mboli							
Envertigatives and accompanies remaining the property of the p	al for emboll. Evaluation: 🗆		See comments						
- Harrie and the state of the s	oolism Stockings: Right	게임하다 하를 하고 이용되어 되면			tij				
	ession: Right Leg Le	oot	**						
	_ mm/Hg #: Co			154	6 PG				
Fourniquet #1:		Note			Placed in OR: None	V15-11			
	emorrhage/Neuromuscular t	rauma.				Left By:			
	al for hemorrhage & neurom					Left By:			
Evaluation: Meets	goal 🔲 See comments					201 07.			
☐None #:	Location:			Padded: Yes No	Pulmonary Artery Cathel				
	mm/Hg Appli					to riight cost other			
	_ Off: On:		× 252	D RO A GAI AGAISCEANA					
Fourniquet #2:					The state of the s				
] None #	Location:			Padded: Yes No	Clear, yellow, cloudy, am				
⊃ressure:	mm/Hg Appli	ed By:			Initial output:	CONTROL OF THE STATE OF THE STA			
	Off: On:				Final output:				
Warming Devices:					1574 C- 3757	ntinuous bladder irrigation			
Nursing Diagnosis: Bo	dy Temperature. Goal: Mai	ntain appropriat	e body temperature.		Specimens: None	Intoos biacoci migatori			
	goal 🔲 See comments	27-4 M	4500 Tr		Permanent				
☐ None ☐ Warming	g Lamp	ions: Imigation/I	Prep/I.V.			 			
] Warm Blankets	Warm alr blanket #	_	Warm water blank	et #:		Cytology			
	7-7-					C Frozen			
						FIO			
	ation: Site:								
Nursing Diagnosis: Info	ection. Goal: Reduce poten	itial for infection	le de la companya de						
Evaluation: 🔲 Meets	goal 🔲 See comments	- 1 (F)			Blood Replacement: 🔲 N	/A 25 to 65 d to			
☐ Betadine Scrub/Bet	adine Solution 🔲 Durapr	rep 🔲 Exidina	e		Estimated blood loss: No. of Units:				
_] Alcohol □ Other:					Cell Saver: N/A Operato	or;#			
Ву:				to pooling of solution	Cross Clamp: N/A	On Off			
	CATIONS on sterile fle		Dose Rout		Bypass: Yes No	□ N/A			
THE PERSON OF		<u> </u>							
IMPLANT LOG	N/A See Implant Reco	rď							
Counts: Nursina Diaa	mosis: Retained foreign bod	v. Goal: Reduc	e potential for retains	d foreign body. Evaluation	: Meets goal See com	manle			
Sponge 🔲 Co		□ N/A							
Sharp		□ N/A							
Instruments 🔲 Co		□ N/A							
Initial Count: Circui	lator.		Scrub Person:			18:			
	lator					18:			
	lator:			***		10:			
Final Count: Circul	lator:	.50	Scrub Person:	te Verila	Tim	ne;			
	count Action for incorrect					n read by:			
						2. 12 10 10 10 10 10 10 10 10 10 10 10 10 10			
Drains: None No	ursing Diagnosis: Infection.	Goal: Reduce	potential for infection.	Evaluation: Meets goa	al 🗀 See comments	S25-5-			
	0.200	ation			ocation	Size Location			
☐ T-tube	2		Nasogastric	5)************************************	Jackson P				
☐ Penrose	(Hemovac		Blake	82.00			
☐ Chest	7/0/2011-01-01-01-01-01-01-01-01-01-01-01-01-		Drain activated @		Other	# FO SEED D			
Pleurovac/Emerson	Pump					3 -3			
	- 	174 No. 1752		The state of the s		- January			
Dressings: 🔲 None	Band aid	EZ Wrap	Knee Brace	☐ Packing	☐ Scrotal Support	☐ Telfa			
☐ 4 x 4's / 2 x 2's	☐ Benzoin	☐ Frederick	Mammary Support	Pen Pad	☐ Shoulder Immobili	STORE CO. A CONTROL OF THE PROPERTY OF THE PRO			
🗐 ABD Pads	☐ Biedsoe Brace	☐ Island Dre	essing	Philadelphia collar	Sling, velpeau	☐ Xeroform			
Abdominal Binder	☐ Cervical Collar, soft	☐ Kerlix		☐ Plaster/Fiberglass cas		Other			
Abduction Pillow	 Dermabond 	☐ Kling		☐ Plaster/Fiberglas splin					
Ace	☐ Eye Pad	☐ Knee Imm	nobifizer	Post op shoe	☐ Tape				
☐ Adaptic	☐ Eye Shield	Laminated	f Splint	☐ Red Cross Cotton	☐ Tegaderm				

ERIOPERATIVE PATIENT CARE NURSING RECORD AND PATIENT ADMISSION DATA BASE