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						- Tim	,
		Please put	Initials				
ID Bands	Notes scanned	Falls Score	VIP	Monitor Obs prir	nt out if unable to record		
PATIENT TRANSFER TO:		ESCORTED BY:		HANDED OVER TO:	TIME:		



L	Laceration	Na	IMPOR	TANT INFOR	MATION TO
W	Wound	K+		BE HIGHLIGH	ITED
С	Cannula	Cr			
Α	Arterial Line	CRP			
CVP	Central Line	GI			
CD	Chest Drain	Urea			
CTH	Catheter	Ca			
PIC	PICC line	Trop			
F	Fracture	D-dimer			
0	Other				
	·				
Tissue Viability assessment done? Y N			N		

RESPIRATORY & METABOLIC STATUS	7.35-7.45	Ph
	4.6-6	PCO2
	11.7-13	PO2
	0 +/- 2	BE
	>120	Haemoglobin
	3.3-6	Blood Glucose
	<2	Lactate

	IPAP
NON	EPAP
INVASIVE	CPAP
VENTILATION	Machine Respiratory Rate
BIPAP/CPAP	Machine Inspiratory Time
	Tidal Volume

	Mean Invasive Arterial Pressure (IAP)
CARDIO	Central Venous Pressure (CVP)
/ASCULAR	Urine output volume in mls/hr (target > 1ml/Kg)
RENAL	Please tick when Urine catheter inserted
STATUS	Other fluid output (vomit/chest drain/GIB/PRB)
	Urine:Bloody(B)Cloudy(C)Dark(D)Normal(N)