

FAMILY NAME WILLIAMS MRN 4786621
 GIVEN NAME SIMON MALE FEMALE
 D.O.B. 21/02/41 M.O. CROZIER
 ADDRESS
 LOCATION HDU

STANDARD ADULT GENERAL OBSERVATION CHART

Altered Calling Criteria
 ALL OBSERVATIONS MUST BE GRAPHED COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE

Date	Time	0400	0800	1200	1600	2000	0000	0400	0800	1200	1600	1930	Date	Time
<p>AIRWAY/BREATHING</p> <p>Respiratory Rate: 20, 18, 18, 18, 18, 18, 18, 18, 18, 18, 18, 18, 18, 28</p> <p>SpO₂%: 95, 95, 95, 95, 95, 95, 95, 95, 95, 95, 95, 95, 95, 95</p> <p>O₂Lpm: RA, RA, RA, RA, RA, NP, NP, NP, NP, NP, NP, NP, NP, NP</p> <p>Device / mode: RA, RA, RA, RA, RA, NP, NP, NP, NP, NP, NP, NP, NP, NP</p> <p>Key: RA = Room Air, NP = Nasal Prongs, FM = Simple facemask, NRB = Non Re-breather, VM = Venturi Mask</p>														
<p>CIRCULATION</p> <p>Blood Pressure (mmHg) SBP is trigger: 120, 120, 120, 120, 120, 120, 120, 120, 120, 120, 120, 120, 120, 120</p> <p>Rhythm: SR, SR, SR, SR, SR, SR, SR, SR, SR, SR, SR, SR, SR, SR</p> <p>Heart Rate: 85, 85, 85, 85, 85, 85, 85, 85, 85, 85, 85, 85, 85, 115</p> <p>Neurological: A, V, P, U</p> <p>Enter appropriate letter. A= Alert, V= Rousable by voice (conduct GCS). P= Rousable only by pain (conduct GCS). U= Unresponsive</p>														
<p>Initials: HS AT AT TD TD GB GB RH RH LS LS</p>														

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<p>EXPOSURE</p> <p>Temperature (°C): 36.5, 36.5, 36.5, 36.5, 36.5, 36.5, 36.5, 36.5, 36.5, 36.5, 36.5, 36.5, 36.5, 38.5</p>																																																																									
<p>Pain</p> <p>Assess pain level at rest and with movement. Enter R for at rest, M for movement</p> <table border="1"> <tr> <td>Severe (7-10)</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> </tr> <tr> <td>Moderate (4-6)</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> </tr> <tr> <td>Mild (1-3)</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> </tr> <tr> <td>Nil</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> <td>/</td> </tr> </table>														Severe (7-10)	/	/	/	/	/	/	/	/	/	/	/	/	/	/	Moderate (4-6)	/	/	/	/	/	/	/	/	/	/	/	/	/	/	Mild (1-3)	/	/	/	/	/	/	/	/	/	/	/	/	/	/	Nil	/	/	/	/	/	/	/	/	/	/	/	/	/	/
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<p>Blood Glucose</p> <p>Date: _____ Time: _____ BGL: _____</p>																																																																									
<p>Bowels</p> <p>Date: _____</p>																																																																									
<p>Weight</p> <p>Date: _____ <input type="checkbox"/> Daily</p>																																																																									
<p>Urinalysis</p> <p>Date: _____ Time: _____ SG: _____ pH: _____ Leuk: _____ Blood: _____ Nitrite: _____ Ketones: _____ Bilirubin: _____ U/Bil: _____ Protein: _____ Glucose: _____</p>																																																																									



Holes punched as per AS2828.1:2012
 BINDING MARGIN - NO WRITING