

Neuro ICU Worksheet

Pt:	Age/sx:	MRN:	DOA:	Room:
PROBLEM LIST	MEDS	Start on	End on	CC: Allergies:
1				HPI:
2				
3				
4				
5				
6				PMH/PSH Fam/Soc/PTA meds/ROS
7				
8				
9				
10	HSQ			Lines Placed Removed
11	Pepcid			central IJ fem SC
12	SSI q L M H			NG OG Dobhoff gtube
13				Foley
14				trach
15				JP
Contact				EVD VPS
				Art line
Code status				

Neuro

MRI _____ MRA/carUS _____

EEG _____ LP / / Prot Glu RBC WBC Gr Cx

Pulm

CV

Echo / / EF: %

EKG _____

Renal Baseline Cr _____

Endo A1c TSH LDL

ID

UA Nitr LE Bact Bld cx Sputum cx Ur cx c diff

UA Nitr LE Bact Bld cx Sputum cx Ur cx c diff

GI Tprot Alb AlkPhos ALT AST Tbili BM record:

Diet _____

Heme Fe Ferritin TIBC %sat Haptog LDH INR PTT

LED / /14:

LED / /14:

/ Tm HR BP / RR O2 I/O/Nd/Nt + / - / / o/n events:

Neuro	<input type="checkbox"/>	<input type="checkbox"/>
Pulm	<input type="checkbox"/>	<input type="checkbox"/>
CV	<input type="checkbox"/>	<input type="checkbox"/>
ID	<input type="checkbox"/>	<input type="checkbox"/>
ren	<input type="checkbox"/>	<input type="checkbox"/>
GI	<input type="checkbox"/>	<input type="checkbox"/>
Endo BS	<input type="checkbox"/>	<input type="checkbox"/>
Heme	<input type="checkbox"/>	<input type="checkbox"/>

CV: Pulm: Ext:

MS:

CNs:

EVD o/p ml: ICP: CPP: Prot: Gluc RBC: WBC: gstn: CTH:

Vent mode: RR: FIO2: PEEP: TV: pH: pCO2: pO2: HCO3: CXR: