

Room: _____ Name: _____

Code Status: _____ Allergies: _____

DX:

Mental Status:

VS: 8A 12P 16

BS:Bfast Lunch: Din:

Neuro:

Resp:

Cardiac:

Mus/Skel:

GI / GU:

Skin:

Labs/Tests/Spec:

New Orders

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New Orders

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