

PLACE LABEL HERE.
IF LABEL NOT AVAILABLE, WRITE IN PT NAME & MR#



1000000

CRITICAL CARE SYSTEMS ASSESSMENT — BURN CENTER

DATE: _____ TIME: _____

NEUROLOGICAL: Anesthetized Sedated but arousable Awake Alert Lethargic Obtunded Comatose

Oriented: x1 x2 x3 Disoriented: occ / freq / totally Follows commands Yes _____% time / No

Perria Other _____ Protective Reflexes: None / Cough / Gag / Blink Strong / Weak Restraints: UE LE none

Movement: R UE none / purposeful / nonpurposefulR LE none / purposeful / nonpurposeful

L UE none / purposeful / nonpurposefulL LE none / purposeful / nonpurposeful

Strength: R UE str / mod / weak L UE str / mod / weak R LE str / mod / weak L LE str / mod / weak

Sensation: R UE impact / impaired L UE intact / impaired R LE intact / impaired L LE intact / impaired

Comments: _____

PAIN ASSESSMENT: Is the patient currently having pain? Yes / No If yes, complete below:

Patient able to communicate? Yes / No Pain inferred by nonverbals / alteration in vital signs

Location/radiation of pain: _____ Pain rating: _____

Associated signs/symptoms/behaviors: _____

Onset/duration: _____ Any aggravating or alleviating factors? _____

Intervention planned/performed: _____ Patient's pain goal: _____

(Note any side effects, changes in pain quality/rating, and si/sx/behaviors on flow sheet as appropriate.)

RESPIRATORY: ETT # / _____ / _____ cm @ _____ FT _____ NC _____ Room Air _____ Trach # _____

Ventilator: _____ FI02 _____ IMV _____ PEEP _____ CPAP _____ AC _____ PS _____ PIP _____

Spontaneous Respirations: None Shallow Deep Unlabored Symmetrical / Asymmetrical

Breath Sounds: Right Clear Bases Decreased Rales Rhonchi Wheezes

Left Clear Bases Decreased Rales Rhonchi Wheezes

Airway: Sx / Sputum none / small / mod / large thin / thick / frothy clear / white / yellow / tan / bloody / carbonaceous

Cough: Productive / Non productive Pleural Tube: Rx _____ Lx _____ Pleur-Evac -20 cm Sx / Str Drain

Drainage: Serosanguinous / Serous / None Air Leak: Yes / No

Comments: _____

CARDIOVASCULAR:

NSR SBrdy STach AFib AFlutter Paced Other _____

PVC Unifocal / Multi-focal rare / occ / freq PAC / PNC: rare / occ / freq

S1S2: Clear Distant Muffled S3 S4 Rub Murmur Click Other _____

Skin: R UE warm / cool / cold dry / clammy / diaph pale / pink / cyan cap refill _____ sec edema _____ - _____

L UE warm / cool / cold dry / clammy / diaph pale / pink / cyan cap refill _____ sec edema _____ - _____

R LE warm / cool / cold dry / clammy / diaph pale / pink / cyan cap refill _____ sec edema _____ - _____

L LE warm / cool / cold dry / clammy / diaph pale / pink / cyan cap refill _____ sec edema _____ - _____

Edema: Face/Neck Extremities _____ General _____

Pulses (0-4+) Radial R _____ L _____ DP R _____ L _____ PT R _____ L _____

Comments: See CCFS for vital signs, hemodynamic profiles, and lab results _____

