

Merced College
Vocational Nursing Program

Student Worksheet Patient Assessment

Student: _____ Instructor: _____
 Date: _____ Unit Assigned/Room #: _____ Team Leader: _____
 Patient Initials: _____ DOB: _____ Age: _____ Doctor: _____
 PFN #: _____ Date of Admission: _____ Drug Allergies: _____
 Language Spoken: _____ Food Allergies: _____
 Code Status: _____ UNMET BHNs: _____

1. Diagnosis/Surgery:

2. Symptoms Causing Admission:

3. Add'l Diagnosis:

4. History of Patient:

☞☞ Patient Drug Administration Record ☞☞	
1.	11.
2.	12.
3.	13.
4.	14.
5.	15.
6.	16.
7.	17.
8.	18.
9.	19.
10.	20.

!!What Should I Do Before Giving These Drugs!!

Vital Signs _____ Blood Pressure _____ Apical Pulse _____ Check Labs _____
 Weight _____ Blood Sugar _____ Antidotes _____ Nutritional Considerations _____
 PT able to Swallow Meds _____ Crush Meds _____ Do Anything Else?? _____

👉👉 My Patient Will Need 👈👈

Personal Hygiene: Bath Type: Bed, Partial, Shower, Self
Linen Change: Partial, Complete
Perineal Care: Self, Assist
Shave
Skin Care
Heel Protectors
Ted Hose
Sitz Bath

Nutrition: NPO, Tube, Regular, Special
Assist/Self Feed

Fluids: Ice, Limit, Force, I&O, Other _____

Elimination: BRP, BSC, Enema, Harris Flush, Foley, Other _____

Activity: Up & About Ad Lib, Up-in-Chair, Ambulate with Assist, Trapeze on Bed,
Turn q 2 Hrs, Cough and Deep Breath, Incentive Spirometer, ROM

Safety: Bedrails up, Restraints, Fall Risk

Wound: Location: _____

IV Therapy: Heplock, IV, Solution _____
Site _____

AV Shunt: Location _____
Dressing _____
Thrill _____ Palpable _____ Not Palpable _____
Bruit _____ Audible _____ Not Audible _____

👉👉 HOW OFTEN ASSESSED 👈👈

Blood Pressure _____
TPR _____
Weight _____
Blood Sugar _____

😊😊😊 ADD'L INFORMATION 😊😊😊