

# University of South Alabama Student Notes – THIS IS NOT PART OF THE MEDICAL RECORD

Patient Name:	Therapy/Frequency	Medication	CPT Position	Cough	Sputum	Color	Auscultation	Education	No therapy
_____	Aerosol _____	2.5mg Albuterol	Upright	Good	Lg amt	Bloody	Absent R L	Taught: _____	Refused: _____
Date _____ Rm # _____	MDI ___ Puffs ___	0.5mg Atrovent	Semifowlers	Fair	Mod amt	Brown	Clear R L	_____	Patient _____
Time _____	CPT _____	1.25mg Xopenex	Trendelenburg	Poor	Sm amt	Clear	Crackles R L	Patient _____	Family _____
HR Pre/Post _____	Flutter _____	0.63mg Xopenex	Supine	None	None	Green	Diminished R L	Other _____	Held _____
RR Pre/Post _____	IPPB _____	Advair _____	Prone	Suction	_____	Tan	Rales R L	_____	_____
PEFR Pre/Post _____	I.S. Volume _____	Azmacort	_____	Oral	Frothy	White	Rhonchi R L	Understood _____	Patient not available: _____
Oxygen _____	Suction _____	Combivent	Right side	NT	Thin	Yellow	Wheeze R L	Yes No _____	_____
Circle In Use Standby	Trach Care _____	Symbicort _____	Left side	_____	Thick	_____	_____	_____	_____
SpO <sub>2</sub> _____	_____	_____	Both	_____	_____	_____	_____	_____	_____

Comments: \_\_\_\_\_ Student \_\_\_\_\_

\*\*\*\*\*

Patient Name:	Therapy/Frequency	Medication	CPT Position	Cough	Sputum	Color	Auscultation	Education	No therapy
_____	Aerosol _____	2.5mg Albuterol	Upright	Good	Lg amt	Bloody	Absent R L	Taught: _____	Refused: _____
Date _____ Rm # _____	MDI ___ Puffs ___	0.5mg Atrovent	Semifowlers	Fair	Mod amt	Brown	Clear R L	_____	Patient _____
Time _____	CPT _____	1.25mg Xopenex	Trendelenburg	Poor	Sm amt	Clear	Crackles R L	Patient _____	Family _____
HR Pre/Post _____	Flutter _____	0.63mg Xopenex	Supine	None	None	Green	Diminished R L	Other _____	Held _____
RR Pre/Post _____	IPPB _____	Advair _____	Prone	Suction	_____	Tan	Rales R L	_____	_____
PEFR Pre/Post _____	I.S. Volume _____	Azmacort	_____	Oral	Frothy	White	Rhonchi R L	Understood _____	Patient not available: _____
Oxygen _____	Suction _____	Combivent	Right side	NT	Thin	Yellow	Wheeze R L	Yes No _____	_____
Circle In Use Standby	Trach Care _____	Symbicort _____	Left side	_____	Thick	_____	_____	_____	_____
SpO <sub>2</sub> _____	_____	_____	Both	_____	_____	_____	_____	_____	_____

Comments: \_\_\_\_\_ Student \_\_\_\_\_

\*\*\*\*\*

Patient Name:	Therapy/Frequency	Medication	CPT Position	Cough	Sputum	Color	Auscultation	Education	No therapy
_____	Aerosol _____	2.5mg Albuterol	Upright	Good	Lg amt	Bloody	Absent R L	Taught: _____	Refused: _____
Date _____ Rm # _____	MDI ___ Puffs ___	0.5mg Atrovent	Semifowlers	Fair	Mod amt	Brown	Clear R L	_____	Patient _____
Time _____	CPT _____	1.25mg Xopenex	Trendelenburg	Poor	Sm amt	Clear	Crackles R L	Patient _____	Family _____
HR Pre/Post _____	Flutter _____	0.63mg Xopenex	Supine	None	None	Green	Diminished R L	Other _____	Held _____
RR Pre/Post _____	IPPB _____	Advair _____	Prone	Suction	_____	Tan	Rales R L	_____	_____
PEFR Pre/Post _____	I.S. Volume _____	Azmacort	_____	Oral	Frothy	White	Rhonchi R L	Understood _____	Patient not available: _____
Oxygen _____	Suction _____	Combivent	Right side	NT	Thin	Yellow	Wheeze R L	Yes No _____	_____
Circle In Use Standby	Trach Care _____	Symbicort _____	Left side	_____	Thick	_____	_____	_____	_____
SpO <sub>2</sub> _____	_____	_____	Both	_____	_____	_____	_____	_____	_____

Comments: \_\_\_\_\_ Student \_\_\_\_\_

\*\*\*\*\*

Patient Name:	Therapy/Frequency	Medication	CPT Position	Cough	Sputum	Color	Auscultation	Education	No therapy
_____	Aerosol _____	2.5mg Albuterol	Upright	Good	Lg amt	Bloody	Absent R L	Taught: _____	Refused: _____
Date _____ Rm # _____	MDI ___ Puffs ___	0.5mg Atrovent	Semifowlers	Fair	Mod amt	Brown	Clear R L	_____	Patient _____
Time _____	CPT _____	1.25mg Xopenex	Trendelenburg	Poor	Sm amt	Clear	Crackles R L	Patient _____	Family _____
HR Pre/Post _____	Flutter _____	0.63mg Xopenex	Supine	None	None	Green	Diminished R L	Other _____	Held _____
RR Pre/Post _____	IPPB _____	Advair _____	Prone	Suction	_____	Tan	Rales R L	_____	_____
PEFR Pre/Post _____	I.S. Volume _____	Azmacort	_____	Oral	Frothy	White	Rhonchi R L	Understood _____	Patient not available: _____
Oxygen _____	Suction _____	Combivent	Right side	NT	Thin	Yellow	Wheeze R L	Yes No _____	_____
Circle In Use Standby	Trach Care _____	Symbicort _____	Left side	_____	Thick	_____	_____	_____	_____
SpO <sub>2</sub> _____	_____	_____	Both	_____	_____	_____	_____	_____	_____

Comments: \_\_\_\_\_ Student \_\_\_\_\_