

Master Flowsheet

1° Caretaker: _____

Shift: 7am-7pm 7pm-7am

Date: _____

2° Caretaker: _____

Vent settings: Mode _____ Min RR _____ FIO2 _____ PEEP _____ PS _____		Tube feed type: _____	
Vte (ml) _____ Peak Flow (l/min) _____ PIP (cm H2O) _____ leak(l/min) _____		Min Vent (l/min) _____ Shift Total Input: _____ Output: _____	
Vital signs (Q4H + PRN)	Temp (°F)	Respiratory	O2 flow (Liters/min)
	HR (bpm)		Mouth suction (✓)
	BP (mm Hg)		MIE
	RR (breaths/min)		Blow (✓)
	O2 sat (%)		Cuff pressure (mm Hg)
Intake	O2 flow (Liters/min)	Output	Urine (ml)
	Mouth suction (✓)		Specific gravity
	MIE		BM
Respiratory	Blow (✓)	Skin	Turn/Reposition (Q2H)
	Cuff pressure (mm Hg)		Skin
Intake	Tube feed (ml)	Neuro	Hygiene
	Free water (ml)		L.O.C.
Output	Water w/ meds (ml)	Sleep	Mood
	Urine (ml)		Fall asleep (✓)
Skin	Urine (ml)		Wake up (✓)
	Specific gravity		
Neuro	BM	Notes	
	Turn/Reposition (Q2H)		
Sleep	Skin		
	Hygiene		
Notes	L.O.C.		
	Mood		
	Fall asleep (✓)		
	Wake up (✓)		

MIE: Clear (C), Yellow (Y), Green (G), Bloody (B), Small/Med/Lg (1,2,3)
 BM: Hard (H), Soft (S), Liquid (L), Small/Med/Lg (1/2/3)
 Level of Consciousness (LOC): Interactive (I), Confused (C), Lethargic (L), Unresponsive (U)
 Mood: Upbeat (U), Neutral (N), Anxious (A), Depressed (D)

Turn/Reposition (minimum Q2H): pillow under right side (R), pillow under left side (L)
 Skin: Intact (I), Open/Broken (O), Erythematous (E), Non-blanching (N), Bleeding (B), Wet/Oozing (W)
 → Document location and any skin treatment (e.g. ointment, cream) in Notes
 Hygiene: Bath (B), Hair wash (H), Shave (S)