

Fluid Balance

FLUID RESTRICTION: _____

ABDOMINAL GIRTH: _____

Intake								Output							
TIME START	Solution/Drug/Flow Rate	Amount Start	Volume Infused	Initial	Time	Oral	Tube	Time	Urine	Tube	BR=BATHROOM	INC=INCONTINENT			
Subtotals															
Combined Total															
24-hour Balance =															

STANDARD VOLUMES

Soup bowls 180 mL
 Insulated mug 180 mL
 Creamer 15 mL

Styrofoam Cup 180 mL
 White reusable/Styrofoam water jug 420 mL
 Dessert (ice cream/sherbet/jello) 120 mL
 Popsicle 75 mL

Tetrapack juice/milk 235 mL
 Preportioned juice/milk 120 mL
 Pop cans 335 mL

IV THERAPY / CVC ASSESSMENTS AND PROCEDURES

PERIPHERAL IV BASIC CARE & ASSESSMENT	Site 1 (see key) Location: _____	Site 2 (see key) Location: _____
Time:		
Site: ✓ = Free of pain, redness, heat, swelling, drainage or blanching		
Dressing: ✓ = Dry & intact		
IV Tubing: ✓ = Intact & infusing as per NCS H/U = Hook up Cap = Cap off		
Δ = Routine change (Continuous Δ IV tubing Q72 hrs Intermittent Δ IV tubing Q24 hrs)		
Saline lock: ✓ = Flushed as per NCS (Minimum: Once per shift)		
D/C = Discontinued / Removal (Refer to key for Reason)		
Initials:		

CVC ASSESSMENT	Site 1 (see key) Type: _____ Location: _____	Site 2 (see key) Type: _____ Location: _____
Time:		
Site: ✓ = Free of pain, redness, heat, swelling, drainage or blanching		
Dressing: ✓ = Dry & intact		
IV Tubing: ✓ = Intact & infusing as per NCS H/U = Hook up Cap = Cap off		
Initials:		

CVC PROCEDURES (Special)				
Time:				
Type / Location of CVC (See Key) INS = Insertion (Refer to Procedure Note)				
IV Tubing (Identify tubing type-see key) Δ = Routine Change (Continuous Δ IV tubing Q72 hrs Intermittent Δ IV tubing Q24 hrs)				
CVC Flush (if multi-lumen, identify lumen) ✓ = Flushed as per NCS				
Dressing: Δ = Routine Change				
BW = Blood work CC = PPC Cap changes D/C = Discontinued / Removal TS = CVC tip sent for culture HN = Huber Needle (gauge & length)				
Initials:				

IV START				
Time:				
# of attempts:				
Gauge # or ML (midline)				
Location (see key)				
Initials:				

KEY:
 * = COMPLICATION/COMMENT
 See ID Progress Notes

Location: **R** = Right **L** = Left
 H = Hand **UA** = Upper arm
 FA = Forearm
 ACF = Antecubital fossa
 BAS = Basilic
 CEPH = Cephalic
 GR = Groin

D/C REASON

- 1 = Routine (at 72 hours)
- 2 = Treatment complete / Patient discharge
- 3 = Accidental or by patient
- 4 = Complication e.g. pain, redness, heat, swelling, drainage (Details in ID Progress Notes)

IV TUBING TYPE: (for CVC only)

G = Gravity **A** = Alaris
B = Blood **T** = TPN
P = PCA

CVC TYPES:

Percutaneous Catheters
JUG = Jugular
SUB = Subclavian
FEM = Femoral
HDC = Hemodialysis
PICC = Peripherally inserted central catheter

Tunnelled CVC Catheters
GRO = Groshong
HICK = Hickman
Implanted CVC
IVAD = Implanted VAD (port/dome)
PICC = Peripherally inserted central catheter

LUMENS:

BR = Brown
WH = White
BL = Blue
RD = Red

SL = Single Lumen
DL = Double Lumen
TL = Triple Lumen