Demographics Admit Date:
FIN: MR#
Name: Age: Room:
Race: Gender:
Ht: Wt: IBW: DW:

CC/HPI:

PMH:
PSH:

Fam/Soc Hx:
Tobacco: EtOH: Rec:

Allergies:

Current Meds:

Interactions:

Past Meds:

Drips:

Micro:

XR/Scans:

Date: **Labs** **Follow Up:**

VS:

Ca	Mg	PO_4	TG	AST/ALT	T/D bili

PE:

New Cx: Segs:
Bands:

Date: **Labs** **Follow Up:**

VS:

Ca	Mg	PO_4	TG	AST/ALT	T/D bili

PE:

New Cx: Segs:
Bands:

Date: **Labs** **Follow Up:**

VS:

Ca	Mg	PO_4	TG	AST/ALT	T/D bili

PE:

New Cx: Segs:
Bands:

Date: **Labs** **Follow Up:**

VS:

Ca	Mg	PO_4	TG	AST/ALT	T/D bili

PE:

New Cx: Segs:
Bands:

Date: **Labs** **Follow Up:**

VS:

Ca	Mg	PO_4	TG	AST/ALT	T/D bili

PE:

New Cx: Segs:
Bands: