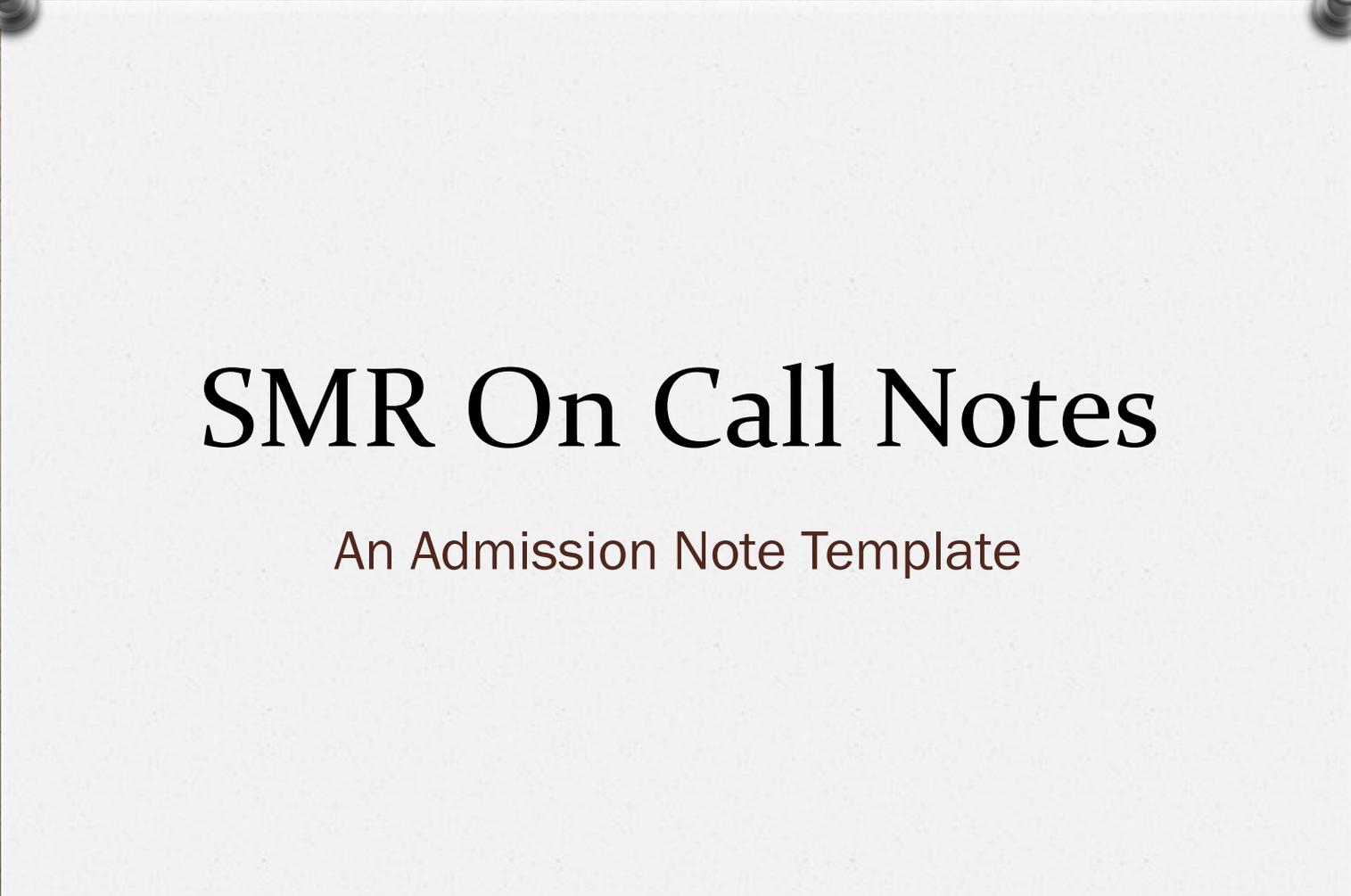


SMR On Call Notes

Created by P. Raut, PGY-2 IM Ottawa.

Draft 1

Updated April 2012



SMR On Call Notes

An Admission Note Template

Admission Note Template

o Identification

o Allergies

- o What medications is this patient allergic to?
- o What is their allergy to it?

o Physicians

- o Who is this patient's family doctor?
- o What other specialists follow this patient?
- o Are there any upcoming appointments?

o Social History

o ADLs/IADLs

o Medications

- o Group your medications into categories (cardiovascular meds, puffers, antibiotics, etc.) and, depending on your staff, you may wish to present them in your past medical history section (eg. atrial fibrillation on warfarin x 7 years).

o Past Medical & Surgical History

o History of Present Illness

o Review of Systems

- o When presenting your admission to your senior or staff, organize your review of systems into "cardiovascular", "respiratory", "gastrointestinal", "infectious", "constitutional" categories and only name pertinent positives.
- o Before proceeding to presenting your findings on physical examination, you can ask your staff if they want to any other information. This keeps your presentation concise and your admission note is thorough.

o Course in Hospital

- o What medications have been given?
- o How much IV fluids have been administered?

o Examination in ER

- o Note any pertinent positive or negative findings as well as any changes from your own examination.

o Examination on Admission

o Investigations

- o Bloodwork
- o EKG
- o Imaging

o Impression

- o What's the big picture? How do all of this patient's medical conditions contribute to his/her chief complaint?

o Plan

- o What are the acute/chronic issues that need to be addressed during this admission in order of importance?
 - o What is the cause?
 - o What is the consequence?
 - o How will you investigate and manage this?
- o Start writing your admission orders while waiting to review with your senior resident.
- o If your senior has already submitted the admission slip, complete the HPI section in the eDischarge summary while waiting to review.

Organizing your information

o PMHx

o Diabetes Mellitus

- o Type I or II? How many years?
- o Followed by Dr. X
- o **Microvascular complications**
 - o Retinopathy?
 - o Last eye exam?
 - o Nephropathy?
 - o Proteinuria?
 - o Last urine ACR?
 - o CKD? ESRD? HD?
 - o Neuropathy?
 - o Tonofilament testing?
 - o Gastroparesis?
- o **Macrovascular complications**
 - o ACS?
 - o CVA?
 - o PVD?
- o Other complications
 - o Diabetic foot care/ulcers?
 - o Other Infections?
 - o Cataracts?
 - o GDM/Pregnancy complications?

o Associated conditions

- o Hypertension - target < 130/80
- o Dyslipidemia
- o Obesity
- o Etc.

o Plan

o Diabetic Ketoacidosis

- o Precipitated by:
- o Current management
- o Ongoing investigations
- o Medications being held
- o Follow-up investigations or consults?

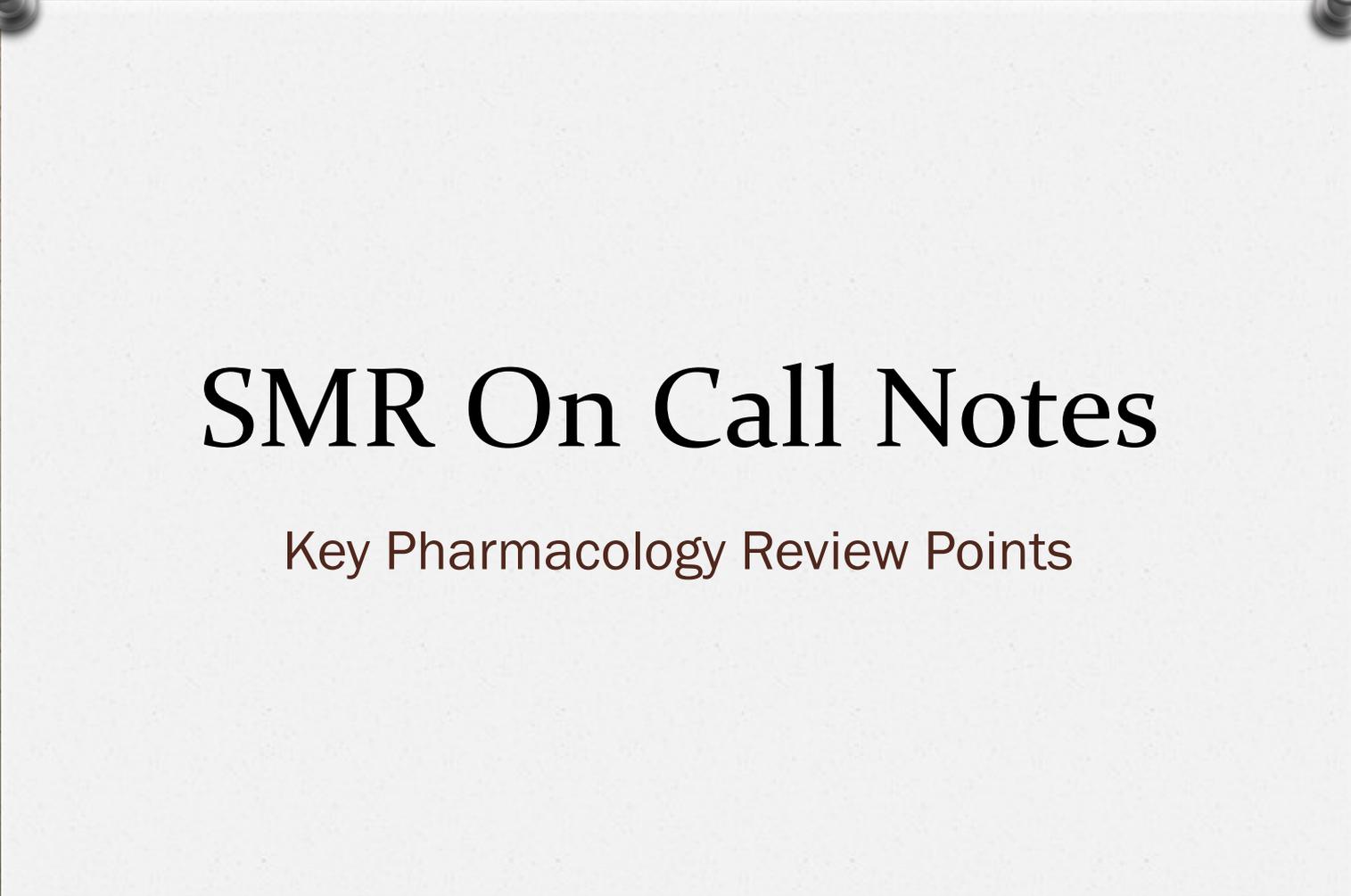


SMR On Call Notes

Admission Orders Template

ADMIT VITALS AND PHYSICAL EXAM

- o **Admit to**
 - o MEA? MEB? MEC? AMA?
- o **Diagnosis**
- o **MD**
- o **Isolation**
 - o Contact? Droplet? Airborne?
- o **Telemetry**
 - o Parameters?
- o **Vital signs**
 - o VSR is usually qshift
 - o Do you need neurovitals?
- o **IV access and IV fluids**
 - o NS lock IV if euvoletic and DAT
 - o Will patient be NPO and need maintenance?
 - o Is patient hypotensive and need central line?
- o **Therapists and allied health consults**
 - o PT? OT? Dietician? SLP? SW?
- o **Allergies**
 - o What kind of reaction did they have?
- o **Labs**
 - o What daily bloodwork do you need?
 - o What bloodwork do you repeat tonight?
- o **Studies**
 - o Did you fill out requisitions for CT scan? U/S?
- o **Activity** - Usually as tolerated. Fall risk?
- o **Nursing orders** – eg. Notify MD if SBP < 90
- o **Diet**
 - o Cardiac? Diabetic?
 - o NPO for procedure?
 - o Full fluids? Minced?
- o **Peptic ulcer prophylaxis**
- o **Heparin/VTE prophylaxis**
 - o Is your patient ambulating?
- o **Yank Foley catheter** if not needed
- o **Skin care**
- o **Incentive spirometry?**
- o **Calcium/Vit. D/bisphosphonate**
 - o If steroid use/osteoporosis/#
- o **ACEi/ASA** if Hx of CAD?
- o **Lipid panel**
- o **ECG**
- o **X-Rays** – eg. PA & lateral CXR if indicated.
- o **Advanced directives/Goals of Care/Category Status**
- o **Medication Reconciliation**
 - o Parameters for BP meds?



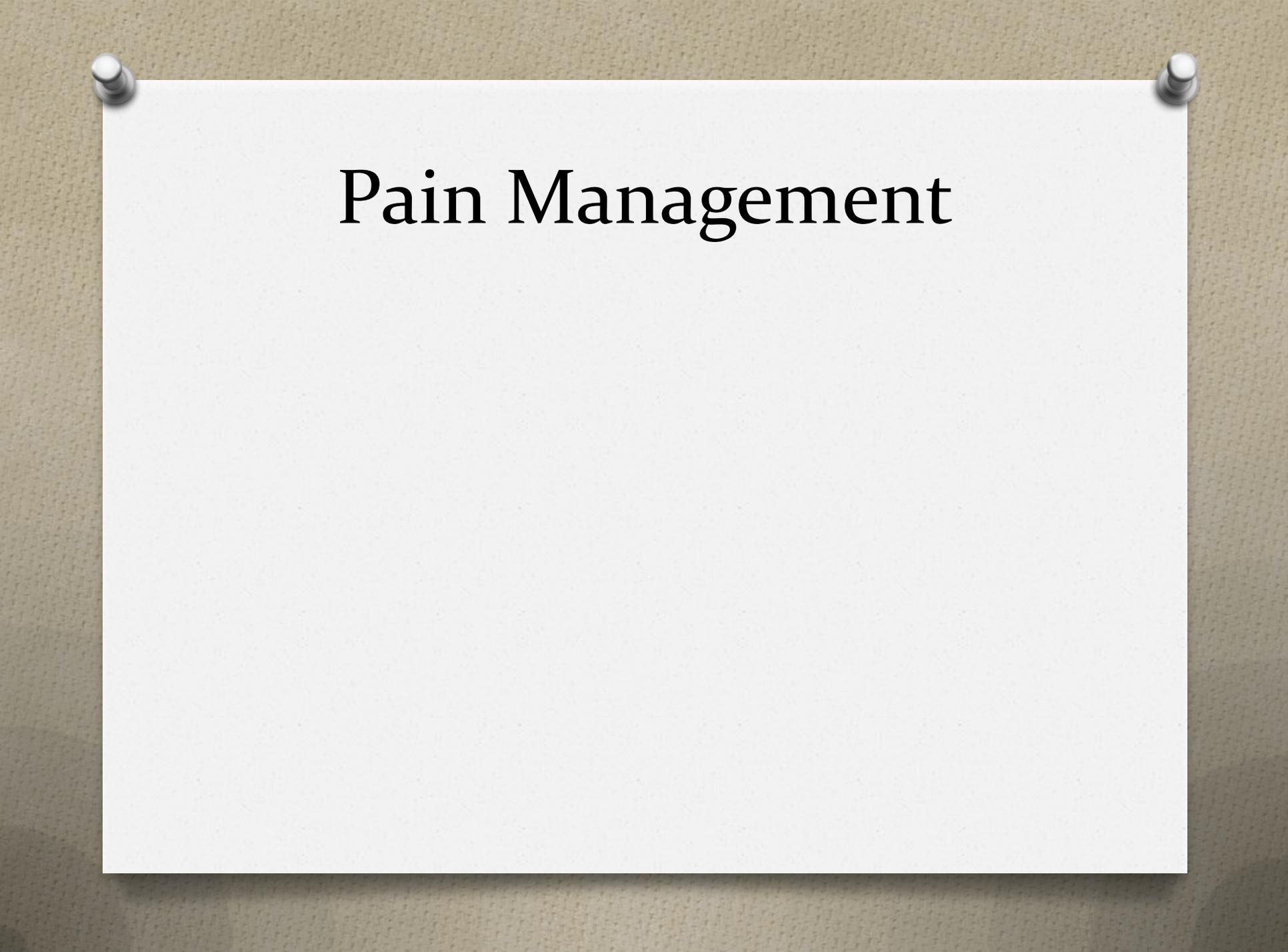
SMR On Call Notes

Key Pharmacology Review Points

Antibiotics

- o Allergies?
- o What organisms?
- o What infectious process?
- o Who is your host?
 - o Immunocompromised?
- o Renal Function?
 - o Do you need to adjust dose and frequency?
- o Do you need to measure levels?
 - o Vancomycin? Gentamicin?
- o Will you prescribe PO or IV antibiotics?
- o Duration of antibiotics?
- o Did you draw cultures before starting antibiotics?

Antihypertensive Agents



Pain Management

Palliative Care

- o Pain Management
- o Dyspnea
- o Management of secretions
- o Private room

Reference

- o Harrison's Manual of Medicine