



IMMEDIATE POST-ENDOSCOPY RECORD

KEY

LEVEL OF RESPONSE: A= alert, S=sleeping, L=lethargic, D= disoriented

VOID/CATHETER: P=catheter patent and draining, + =pt voided, O=problems requiring further documentation

AMBULATION: += pt ambulated. Pt's activity tolerance & any problems should be documented in the comments

TIME										COMMENTS
BLOOD PRESSURE										
TEMPERATURE										
PULSE										
RESPIRATION										
LEVEL OF RESPONSE										
VOID/CATHETER										
AMBULATION										

Vital signs to be done Q 15 mins x 2, Q 30 mins x 2, Then as ordered.

Assessment to be done Q 30mins x 2. Assessment to include above items and may also include breath sounds, heart sounds, bowel sounds, ability to TCDB. These items will be documented on either in the comment section or the pt chart.

CRITERIA FOR DISCHARGE AFTER AMBULATORY SURGERY:

1. Oriented to person, place, and time
2. Stable vital signs
3. Able to walk without dizziness
4. Able to take oral fluids without nausea/vomiting
5. Able to void
6. Dressing dry with no visible drainage or bleeding
7. Able to cough
8. Absence of respiratory distress
9. Pain controlled by analgesia

signature of nurse

Meets Criteria: ___Yes ___No

Time of Discharge _____