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HIGH RISK POSTPARTUM RECORD
SIDE I

PATIENT IDENTIFICATION

DELIVERY:	DATE / TIME:	SEX:	WT:	BR:	BT:
COMMENTS:					

VITAL SIGNS						POSTPARTUM ASSESSMENT					INIT.	COMMENT
Date / Milit Time	B.P.	PULSE	Temp. / RESP.	Reflex / Clonus RIGHT	Reflex / Clonus LEFT	LOC	FUNDUS	LOCHIA	PAD CHGD	PERINEUM / ABD INCISION	INITIALS	

INITIALS	SIGNATURE / TITLE		INITIALS	SIGNATURE / TITLE

PART OF THE MEDICAL RECORD

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HIGH RISK POSTPARTUM
SIDE I

PATIENT IDENTIFICATION

INTAKE								OUTPUT		ALLERGIES		
Date / Milit Time	MAINLINE IV		MAINLINE IV		PIGGYBACK IV		P.O.	Vol. / Total	Initials			
	TYPE	AMT	TYPE	AMT	TYPE	AMT						
										SINGLE DOSE MEDS (Drug - Route - Site)	Date / Milit Time	Initials
										SCHEDULED MEDICATIONS		
										DRUG / ROUTE FREQUENCY	Milit Date / Time / Init'ls	
										MAGNESIUM LEVEL DRAWN	Result / Milit Time	
12^0 TOTALS												

PART OF THE MEDICAL RECORD

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HIGH RISK POSTPARTUM
SIDE I

PATIENT IDENTIFICATION

Date / Milit Time	NURSING NOTES	Date / Milit Time	NURSING NOTES

PART OF THE MEDICAL RECORD

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SIDE I

PATIENT IDENTIFICATION

DELIVERY:	DATE / TIME:	SEX:	WT:	BR:	BT:
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VITAL SIGNS						POSTPARTUM ASSESSMENT					INIT.	COMMENT
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INITIALS	SIGNATURE / TITLE		INITIALS	SIGNATURE / TITLE

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Your Hospital's Logo Here

HIGH RISK POSTPARTUM
SIDE I

PATIENT IDENTIFICATION

INTAKE								OUTPUT		ALLERGIES		
Date / Milit Time	MAINLINE IV		MAINLINE IV		PIGGYBACK IV		P.O.	Vol. / Total	Initials			
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										MAGNESIUM LEVEL DRAWN	Result / Milit Time	
12⁰ TOTALS												

PART OF THE MEDICAL RECORD

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HIGH RISK POSTPARTUM
SIDE II

PATIENT IDENTIFICATION

Date / Milit Time	NURSING NOTES	Date / Milit Time	NURSING NOTES

PART OF THE MEDICAL RECORD