

EMERGENCY – INDIVIDUAL NEEDS ASSESSMENT AND NOTES (CONCURRENT)



DATE: _____ TIME: _____

DIAGNOSIS: _____

PROCEDURE: _____

DETERMINERS	D	E	N	DATE	TIME	NOTES
Level 1 – Resuscitation (mins ÷ 6 x # of cg)						
Level 2 – Emergent	6	6	6			
Level 3 – Urgent	4	4	4			
Level 4 – Less Urgent	2	2	2			
Level 5 – Non Urgent	1	1	1			
Initial Assessment	1	1	1			
Hygiene/skin/oral	3	3	3			
Undress/Dress	1	1	1			
Mobility: Restricted/Assist	3	3	3			
NPO/Feeding	1	1	1			
Assessment: 1-3x	1	1	1			
q½h-q1h	2	2	2			
q15m-constant	6	6	6			
Intake and Output	1	1	1			
Medication(s)	1	1	1			
IV/Blood Products	3	3	3			
Respiratory Treatment	1	1	1			
Suctioning	2	2	2			
Tubes	1	1	1			
Skin/Wound	2	2	2			
Specimen Collection	1	1	1			
Special Procedures	3	3	3			
Teaching (patient/significant other)	1	1	1			
Safety Measures	1	1	1			
Emotional (patient/significant other)	1	1	1			
Behavioural Management (pt/sig other)	3	3	3			
Communication Difficulties	1	1	1			
Preop Preparation	1	1	1			
Admit/Transfer	1	1	1			
Death	1	1	1			
Transport (minutes ÷ 6)						
Telephone Contact (minutes ÷ 6)						

Category	Points	Total Points	Date/Time of Separation	ID
1	1-7			
2	8-14			
3	15-21			
4	22-28			
5	29-35			
6	35 or more			

