


Epilepsy Center of Excellence

NORTHWEST



**NURSING
SEIZURE
ASSESSMENT
NOTE**



ZZAQA,PATIENT E (OUTPATIENT)
000-00-8861 Nov 05,1937 (73)

Visit Not Selected
Provider: FLAHERTY,JOHN P

CBOC MV WILLOW / Guza-Wells,Diana J

Flag

VistaWeb

Remote Data



Last 100 Signed Notes (Total: 417)

All signed notes

Neurology Telephone Contact Note

Templates

Shared Templates

- + Patient Data Objects
 - Code Status, Surrogate Decision-Maker
 - Immunizations/PPD
 - Ment Hlth screens (Audit-C, Depression, PTSD)
 - Med Reconciliation Template (Admission)
 - Med Reconciliation Pt List (Rt Click to Print)
 - Med Reconciliation for PSA's (Rt Click to Print)
 - Medication Reconciliation Template (Clinic)
 - Patient Education Assessment
 - Patient Education Provided
 - Procedure Note
 - CII RX for VA Pharmacy (Rt Click to Print)
 - RX Form to Fill Non-VA Med at Outside Pharmacy (Rt Click)
 - PHYSICIAN DISCHARGE PROGRESS NOTE TEMPLATE
 - Document OUTSIDE LAB RESULTS
- + Student Scribe Template
- + CARE COORDINATION HOME TELEHEALTH
- + CHAPLAIN
- + CLINICAL PATHWAYS
- + DIABETES
- + DISCHARGE SUMMARY
- + EMERGENCY ROOM
- + EMPLOYEE HEALTH
- + GERIATRICS & EXTENDED CARE
- + GIMC
- + HBPC
- + HIMS ADMINISTRATION
- + INTERVENTIONAL RADIOLOGY
- + MEDICINE

Encounter

New Note



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- [-] GIMC
- [-] HBPC
- [-] HIMS ADMINISTRATION
- [-] INTERVENTIONAL RADIOLOGY
- [-] **MEDICINE**
- [-] Mobile Electronic Documentation

Encounter

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Neurology Telephone Contact Note

Templates

- + HBPC
- + HIMS ADMINISTRATION
- + INTERVENTIONAL RADIOLOGY
- + MEDICINE
 - Ambulance Transfer Summary
 - Coumadin Clinic F/U
 - HIV Pre & Post - Test Counseling Templates
 - Infection Control Patient Educ Topics
 - Med Consult
 - Med H&P
 - Medicine ICU Daily Progress Note
 - Medicine Ward Daily Progress Note
- + CARDIOLOGY
- + CHAPLAIN
- + CCHT
- + DERMATOLOGY
- + ENDOCRINOLOGY
- + GASTROENTEROLOGY
- + INFECTIOUS DISEASE
- + MICU/CCU
- + **NEUROLOGY**
- + ONCOLOGY
- + PULMONARY
- + PROCEDURE
- + RADONC
- + RENAL
- + RESPIRATORY THERAPY
- + RHEUMATOLOGY
- + SMOKING CESSATION
- + Mobile Electronic Documentation

Encounter

New Note

Last 100 Signed Notes (Total: 417)

- All signed notes
- Neurology Telephone Contact Note**

Templates

- HBPC
- HIMS ADMINISTRATION
- INTERVENTIONAL RADIOLOGY
- MEDICINE
 - Ambulance Transfer Summary
 - Coumadin Clinic F/U
 - HIV Pre & Post - Test Counseling Templates
 - Infection Control Patient Educ Topics
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 - Medicine ICU Daily Progress Note
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- CARDIOLOGY
- CHAPLAIN
- CCHT
- DERMATOLOGY
- ENDOCRINOLOGY
- GASTROENTEROLOGY
- INFECTIOUS DISEASE
- MICU/CCU
- NEUROLOGY
 - NURSING SEIZURE ASSESSMENT NOTE**
 - Neuro Exam
- ONCOLOGY
- PULMONARY
- PROCEDURE
- RADONC
- RENAL
- RESPIRATORY THERAPY
- RHEUMATOLOGY

Encounter

New Note



ZZAQA, PATIENT E (OUTPATIENT)
000-00-8861 Nov 05, 1937 (73)

49685 Jul 07, 11 11:55
Provider: FLAHERTY, JOHN P

CBOC MV WILLOW / Guza-Wells, Diana J

Flag

VistaWeb

Remote Data



All signed notes

Templates

- HBPC
- HIMS ADMINISTRATION
- INTERVENTIONAL RADIOLOGY
- MEDICINE
 - Ambulance Transfer Summary
 - Coumadin Clinic F/U
 - HIV Pre & Post - Test Counselor
 - Infection Control Patient Educ
 - Med Consult
 - Med H&P
 - Medicine ICU Daily Progress N
 - Medicine Ward Daily Progress
- CARDIOLOGY
- CHAPLAIN
- CCHT
- DERMATOLOGY
- ENDOCRINOLOGY
- GASTROENTEROLOGY
- INFECTIOUS DISEASE
- MICU/CCU
- NEUROLOGY
 - NURSING SEIZURE ASSE
 - Neuro Exam
- ONCOLOGY
- PULMONARY
- PROCEDURE
- RADONC
- RENAL
- RESPIRATORY THERAPY
- RHEUMATOLOGY

Progress Note Properties

Progress Note Title: NURSING SEIZURE ASSESSMENT NOTE

OK

- NURSING SEIZURE ASSESSMENT NOTE
- NURSING SHIFT ASSESSMENT TEMPLATE
- NURSING SUICIDE RISK ASSESSMENT
- NURSING SUMMARY OF DEATH NOTE
- NURSING TRANSFER SUMMARY TEMPLATE
- NUTRITION <DIABETES NUTRITION NOTE>
- NUTRITION <HBPC NUTRITION CARE INITIAL EVALUATION TEMP

Cancel

Date/Time of Note: Jul 7, 2011@11:55

Author: Flaherty, John P - LPN

Encounter

New Note

SEIZURE ASSESSMENT

Date/time of seizure: (MM/DD/YYYY @ HHMM)

* [Empty text input field]

Duration of seizure: (X min X sec)

* [Empty text input field]

Aura:

- Yes (describe):
- No

During-seizure description:

* [Empty text input field]

Are there EEG electrodes on patient?

- Yes
- No

Orientation:

During seizure:

Person:

- Yes
- No

Place:

- Yes
- No

Date:

Visit Info

Finish

Cancel

SEIZURE ASSESSMENT

Date/time of seizure:
Duration of seizure:
During-seizure description:

<No encounter information entered>

* Indicates a Required Field

Date:

- Yes
- No

Name object correctly:

- Yes
- No

Follows simple commands:

- Yes
- No

Give patient word(s) to remember:

- Yes
- No

After seizure:

Person:

- Yes
- No

Place:

- Yes
- No

Date:

- Yes

Visit Info

Finish

Cancel

SEIZURE ASSESSMENT

Date/time of seizure:

Duration of seizure:

During-seizure description:

<No encounter information entered>

* Indicates a Required Field

Date:

Yes

No

Name object correctly:

Yes

No

Follows simple commands:

Yes

No

Names word(s) correctly:

Yes

No

Nursing Observations:

Apneic?

Yes

No

Cyanotic?

Yes

No

Bladder incontinence?

Yes

No

Visit Info

Finish

Cancel

SEIZURE ASSESSMENT

Date/time of seizure:

Duration of seizure:

During-seizure description:

<No encounter information entered>

Bowel incontinence?

- Yes
- No

Injury?

- Yes
- No

Vital Signs (after seizure):

Blood pressure:

Pulse:

Respiration:

Pulse Oximetry: (Pulse ox values are only in the note and can't be sent to VITALS package -- document this one ALSO on the CPRS GU Cover Sheet)

*

Physician notified?

- Yes
- No

Medication administration?

- Yes
- No

Additional Comments:

SEIZURE ASSESSMENT

Date/time of seizure:

Duration of seizure:

During-seizure description:

<No encounter information entered>

* Indicates a Required Field

