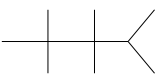

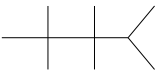
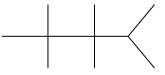
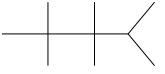
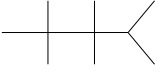




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<b>Rm:</b> <b>Nurse:</b> <b>Name:</b>	<b>O/N</b>	T HR SBP DBP <b>Consults</b> RR SpO <sub>2</sub> Wt	<b>I</b> PO IV B <b>O</b> U NG PR <b>N</b>	<b>PE</b>  Ca: Mg: PO <sub>4</sub> : N L M E B	<input type="checkbox"/> <b>Note</b>	<input type="checkbox"/>
<b>Rm:</b> <b>Nurse:</b> <b>Name:</b>	<b>O/N</b>	T HR SBP DBP <b>Consults</b> RR SpO <sub>2</sub> Wt	<b>I</b> PO IV B <b>O</b> U NG PR <b>N</b>	<b>PE</b>  Ca: Mg: PO <sub>4</sub> : N L M E B	<input type="checkbox"/> <b>Note</b>	<input type="checkbox"/>
<b>Rm:</b> <b>Nurse:</b> <b>Name:</b>	<b>O/N</b>	T HR SBP DBP <b>Consults</b> RR SpO <sub>2</sub> Wt	<b>I</b> PO IV B <b>O</b> U NG PR <b>N</b>	<b>PE</b>  Ca: Mg: PO <sub>4</sub> : N L M E B	<input type="checkbox"/> <b>Note</b>	<input type="checkbox"/>
<b>Rm:</b> <b>Nurse:</b> <b>Name:</b>	<b>O/N</b>	T HR SBP DBP <b>Consults</b> RR SpO <sub>2</sub> Wt	<b>I</b> PO IV B <b>O</b> U NG PR <b>N</b>	<b>PE</b>  Ca: Mg: PO <sub>4</sub> : N L M E B	<input type="checkbox"/> <b>Note</b>	<input type="checkbox"/>
<b>Rm:</b> <b>Nurse:</b> <b>Name:</b>	<b>O/N</b>	T HR SBP DBP <b>Consults</b> RR SpO <sub>2</sub> Wt	<b>I</b> PO IV B <b>O</b> U NG PR <b>N</b>	<b>PE</b>  Ca: Mg: PO <sub>4</sub> : N L M E B	<input type="checkbox"/> <b>Note</b>	<input type="checkbox"/>
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<b>Rm:</b> <b>Nurse:</b> <b>Name:</b>	<b>O/N</b>	T HR SBP DBP <b>Consults</b> RR SpO <sub>2</sub> Wt	<b>I</b> PO IV B <b>O</b> U NG PR <b>N</b>	<b>PE</b>  Ca: Mg: PO <sub>4</sub> : N L M E B	<input type="checkbox"/> <b>Note</b>	<input type="checkbox"/>