

Swing Bed Admission Checklist

Physician Admission Orders

Noted by Nurse

Signed by Physician

Initial Nursing History and Assessment

Admission Nursing Note

Q Shift Nursing Note including vital signs for first 120 hours

TB screening documentation

(TB skin test or chest x-ray whichever is specified by physician)

Therapy(ies) Order

Notification of Therapy(ies) documented

Weight and Height recorded

Vital Signs flow sheet

ADL flow sheet

Allergy Label

Inventory List

Admission labels on all forms