

Name  
MRN  
DOB

Patient Label

Patient Identification

VCU Health System  
MCV Hospitals and Physicians  
Richmond, Virginia 23298

Neurology  
Inpatient Progress Note

Date \_\_\_/\_\_\_/\_\_\_

Floor

NSICU

ICU

Teaching Physician  
Key Findings

Chief Complaint:

Interval History:

Medications:  see Med Rec form  
changes:

IVs and rate

Lines/Tubes & day inserted

I/Os

IV line  
Central Line  
NGT  
PEG

Vital Signs: BP \_\_\_/\_\_\_/\_\_\_ P \_\_\_ RR \_\_\_ Temp \_\_\_ Tmax \_\_\_  
O<sub>2</sub> sat \_\_\_ Weight \_\_\_

◆General Appearance:  NL  Overweight  Underweight Abnl:

Neck: ◆Carotids:  NL Abnl:  Thyromegaly

Lungs:  NL Abnl  Wheezes  Rhonchi  Rales

◆CV:  NL Abnl  Murmur  Rub/ Gallop  Arrhythmia

Abd:  NL Abnl  Bowel Sounds  Tenderness  Distended

◆PVS:  NL Abnl  Edema  Cyanosis  Clubbing  Pulses

Other:

Neurological:  Awake, Alert  Lethargic  Obtunded  Stuporous  Coma

◆Mental Status  ◆Oriented p p t  ◆Memory NL  ◆A/C NL  ◆FK NL

Abnl:

◆Speech  Language NL Abnl:

◆Optic Fundi  NL Abnl:

◆CN: NL  ◆2  ◆3 4 6  ◆5  ◆7  ◆8  ◆9  ◆10  ◆11  ◆12

Abnl:

Dysphagia:  Present  Absent

◆Motor: Strength  NL Abnl:

Tone  NL Abnl:

Pronator drift  R  L

◆Sensory:  NL Abnl:

Parietal/ Extinction  NL Abnl:

◆DTR:  NL Abnl:

◆Toes:  NL Abnl:

◆Coordination:  NL Abnl:

◆Gait:  NL Abnl:

