

**OKLAOMA DEPARTMENT OF CORRECTIONS  
RN/LPN CHRONIC CLINIC NOTE**

**Examination Type:**  Follow-up  Lab Results  Compliance

**CC:**  Asthma  CAD/ASVD  COPD  Diabetes  HIV  HTN  HCV/Liver  Seizure

Cancer Type: \_\_\_\_\_  Other: \_\_\_\_\_

**Severity Classification:**  Mild  Moderate  Severe

**Allergies/side effects:** \_\_\_\_\_

Current Medication	Current Medication	Current Medication	Current Medication

**Compliance with treatment plan:**  Yes  No If "No" Explain \_\_\_\_\_

**Objective Data:** (VS)

Temp \_\_\_\_\_ Pulse \_\_\_\_\_ Resp. \_\_\_\_\_ BP. \_\_\_\_\_ Wt. \_\_\_\_\_ O2 sats. \_\_\_\_\_ (RA/O2) FSBS \_\_\_\_\_

**Current Labs:** \_\_\_\_\_

**Physical Examination:**

LOC: \_\_\_\_\_ Orientation: \_\_\_\_\_ Pupil Size/Reaction: \_\_\_\_\_

Specific Pain  Yes  No If "Yes" Describe: \_\_\_\_\_

Skin color/temp. \_\_\_\_\_ Edema: \_\_\_\_\_

Skin turgor:  Normal  Poor  Severe tenting Capillary Refill:  Brisk - < 2 seconds  Sluggish - > 2 seconds

Chest pain:  Yes  No If "Yes" Describe: \_\_\_\_\_ Heart rhythm \_\_\_\_\_

Lungs sounds: \_\_\_\_\_ Respirations: \_\_\_\_\_ Oxygen use:  Yes  No Liters: \_\_\_\_\_

Cough:  Yes  No Results:  Productive  Non-productive

Abdomen soft:  Yes  No Tender:  Yes  No Bowel sounds: \_\_\_\_\_

Constipation  Yes  No Diarrhea  Yes

Nausea / vomiting:  Yes  No If yes, describe: \_\_\_\_\_

Urinary symptoms:  Yes  No If yes, describe \_\_\_\_\_

Other: \_\_\_\_\_

**Appearance:**  No distress  Mild distress  Moderate distress  Severe distress

**Assessment/Nursing Diagnosis:** \_\_\_\_\_

**Plan/Interventions:** (See "Physician Orders" for laboratory, medication(s), treatment orders and follow-up plan)

**Education:**  Diet  Medication/Medication Adherence  Exercise  Disease process  
 Risks and benefits  Goals  Signs and symptoms to report  Treatment options  
 Other: \_\_\_\_\_

**RN/LPN Signature/Credentials:** \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

**Health Care Provider Signature/Credentials:** \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Inmate Name  
(Last, First)

ODOC #