

Charting / Documentation Guide

Nursing documentation should be clear, timely, accurate, reflective of observations, permanent and legible. This is a guide and not a complete list. Always follow policies in place at your facility.

Medicare Documentation • Must reflect need/reason for skilled care • Must reflect Standard of Care • Describe intervention(s) • Describe resident's response to intervention(s) • Daily evaluation of progress or lack of progress • Resident response to skilled therapy • ADL function • Changes in condition • Change Care Plan ASAP after change in condition • Notification to MD and family	Anticoagulant Therapy Medicare Documentation • Must reflect need/reason for skilled care • Daily vital signs • Monitor for bleeding, bruises • Monitor lab values: Be sure PT/INR drawn per physician order and reported to MD • Monitor sudden dyspnea, chest pain, temp or color change in extremities	Fracture Hip Medicare Documentation • Must reflect need/reason for skilled care • Daily vital signs including pain • ADL ability/assistance needed (use MDS Language) • Monitor incision site • Indicate resident's response to therapy: pain, fatigue, etc.
Respiratory/Pneumonia Medicare Documentation • Must reflect need/reason for skilled care • Daily vital signs • Daily and PRN O₂ sat level • Daily and PRN lung sounds • SOB with exertion, when sitting at rest or when lying flat • Resident's response to interventions and skilled therapy • Progress or lack of progress • Change in condition • Change Care Plan ASAP after condition change • Notification to MD and family	ADLs • How does resident perform? – Bed mobility – Transfers – Ambulation – Dressing – Eating – Toileting and personal hygiene • How much staff support is needed? – Independent – Set up help only – One person – Two + person physical assist – Activity does not occur • Document support needed for ADLs over all shifts • Which interventions used to compensate for ADL deficit: i.e., walker, w/c, cane?	Behavior Assessment/Documentation • Date/Time • Location • Specific behavior • Who is around? • Any triggering event (loud noises, new staff, providing care)? • How do symptoms interfere with ADLs? • How does it interfere with care? • Rule out: hunger, toileting needs, pain, boredom, medication changes • If has respiratory diagnosis – O₂ sat level • Non-medication intervention – resident response • Medication intervention if needed – document response • Medication changes if applicable and result of change
Bladder and Bowel • Indicate status: always continent, occasionally incontinent, frequently incontinent, always incontinent • Indicate if has catheter (indwelling or condom, intermittent), urinary ostomy, or no urine output • Toileting program in progress or attempted and outcome • Constipation? Which interventions used, and results?	Change in Condition Requiring a New Intervention • Time/Date • Change that has occurred i.e., weight loss, pressure ulcer, cognition, overall deterioration • Which ADLs are affected? • Which intervention applied? • Response to intervention? • Was MD or family notified?	Dialysis Assess/Documentation Prior to Leaving • Date/Time • Observation of shunt • Assessment of skin • Meal consumption: Indicate if food sent with resident. • Fluid consumption • If edema noted, how much? (Write note for Dialysis team.)

Long Term Care Charting Guidelines

AN Whitehead



Long Term Care Charting Guidelines:

Whispering the Secrets of Language: An Emotional Quest through **Long Term Care Charting Guidelines**

In a digitally-driven earth wherever displays reign supreme and quick conversation drowns out the subtleties of language, the profound strategies and emotional subtleties concealed within words often move unheard. However, nestled within the pages of **Long Term Care Charting Guidelines** a interesting literary prize pulsing with organic feelings, lies an exceptional journey waiting to be undertaken. Published by an experienced wordsmith, that charming opus attracts visitors on an introspective trip, delicately unraveling the veiled truths and profound impact resonating within the very fabric of every word. Within the emotional depths of the emotional review, we will embark upon a genuine exploration of the book is core styles, dissect its captivating publishing design, and fail to the strong resonance it evokes strong within the recesses of readers hearts.

<https://staging.conocer.cide.edu/public/publication/HomePages/Greenlee%20Emt%20Bending%20Guide%20Sheets.pdf>

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