

Room# \_\_\_\_\_ 6: \_\_\_\_\_  
\_\_\_\_\_ 7: \_\_\_\_\_  
 Print Strip \_\_\_\_\_ 8: \_\_\_\_\_  
 Assess \_\_\_\_\_ 9: \_\_\_\_\_  
     Focused \_\_\_\_\_ 10: \_\_\_\_\_  
 Safety \_\_\_\_\_ 11: \_\_\_\_\_  
 Pain \_\_\_\_\_ 12: \_\_\_\_\_  
 Routine \_\_\_\_\_ 1: \_\_\_\_\_  
 Hygiene \_\_\_\_\_ 2: \_\_\_\_\_  
     CHG \_\_\_\_\_ 3: \_\_\_\_\_  
     Foley \_\_\_\_\_ 4: \_\_\_\_\_  
 Lines/Drains \_\_\_\_\_ 5: \_\_\_\_\_  
 Teach \_\_\_\_\_ 6: \_\_\_\_\_  
 POC \_\_\_\_\_ Intake \_\_\_\_\_  
 AM Note \_\_\_\_\_ Output \_\_\_\_\_  
 PM Note \_\_\_\_\_

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