EMERGENCY DEPARTMENT · UP TO 8 PATIENTS

ED Patient Tracker

DATE _____ SHIFT ☐ Day ☐ Night UNIT _____

ASSIGNMENT

ESI 1 to 5. Tick when sent and when done.

ROOM	PT / AGE / SEX	CHIEF COMPLAINT	ESI	ALLERGIES	LABS	IMAGING	MEDS	REASSESS	PLAN / PENDING	DISPO
					☐ Sent ☐ Done	☐ Sent ☐ Done	☐ Sent ☐ Done			☐ Admit ☐ DC ☐ Transfer
					☐ Sent ☐ Done	☐ Sent ☐ Done	☐ Sent ☐ Done			☐ Admit ☐ DC ☐ Transfer
					☐ Sent ☐ Done	☐ Sent ☐ Done	☐ Sent ☐ Done			☐ Admit ☐ DC ☐ Transfer
					☐ Sent ☐ Done	☐ Sent ☐ Done	☐ Sent ☐ Done			☐ Admit ☐ DC ☐ Transfer
					☐ Sent ☐ Done	☐ Sent ☐ Done	☐ Sent ☐ Done			☐ Admit ☐ DC ☐ Transfer
					☐ Sent ☐ Done	☐ Sent ☐ Done	☐ Sent ☐ Done			☐ Admit ☐ DC ☐ Transfer
					☐ Sent ☐ Done	☐ Sent ☐ Done	☐ Sent ☐ Done			☐ Admit ☐ DC ☐ Transfer
					☐ Sent ☐ Done	☐ Sent ☐ Done	☐ Sent ☐ Done			☐ Admit ☐ DC ☐ Transfer

CRITICAL RESULTS LOG

TIME	ROOM	CRITICAL RESULT	PROVIDER NOTIFIED	TIME

TO DO

- ☐
- ☐
- ☐
- ☐
- ☐

FOR HANDOVER

Keep identifiers to the minimum your unit allows. Never take this sheet off the unit. Shred it at the end of your shift.

Free printable from **theaitoolplaybook.com**