Vitals, GCS, Four Score, Second Insults

Patient Identification I	nformation				
Date (Vitals.DVDate) (dd-mmm-yyyy) To print blank form					
					<u>Click here</u>
This needs to be (Vitals.DVTimepoint) DV		saved for the record t	o save	9.	
Day 1	типеропп				
Day 2 Day 3					
Day 4					
Day 5					
Day 7					
Day 10 Day 14					
☐ Day 21					
☐ Day 28					
Vitals					
Highest Blood Press	ure	(Vitals.DVSBP) Systolic	: /	(Vitals.DVDBP) Diastolic	(Vitals.DVSBPHighTime) Time
Lowest Blood Pressi	uro	(Vitala DVSBBI aux) Svet	tolio	(Vitala DVDRDI aux) Diactolia	A COLL DVODDI TO N
Lowest Blood Pressi	uie	(Vitals.DVSBPLow) Syst	tolic	(Vitals.DVDBPLow) Diastolic	(Vitals.DVSBPLowTime)
(and a National Course			7	(15) 1 7 11 15 15 16 16	(4.1.1.7.1.2.2.2.1.1.7.1.)
(Vitals.) Highest Oxyg (pulse oximetry)	gen saturation	(Vitals.DVSpO2)		(Vitals.DailyVitalsID) %	(Vitals.DVSpO2HighTime)
(Vitals.) Lowest Oxyg	en saturation	(Vitals.DVSpO2Low)		%	(Vitals.DVSpO2LowTime)
(pulse oximetry) Highest Heart Rate		(Vitals.DVHR)		(Vitals.) beats per min	(Vitals.DVHRHighTime)
Lowest Heart Rate		(Vitals.DVHRLow)		(Vitals.) beats per min	(Vitals.DVHRLowTime)
T		Not done			
Temperature (Vitals.E	DV IempNotDone) Not done			
(Vitals DVTempl ocation)	Where was te	mperature measured?	,		
External-axillary	Where was te	imperature measureu :			
External-skin Core- rectal					
Core-rectal					
Core- oesophagea	ıl				
Core- tympanic Core- nasopharyn	<				
J,					
Lowest temperature:	(Vitals.DV		(Vitals. F	DVTempUnitLow) C (Vitals.DVTempLowTime) Time
	(Vitals DV	TempLowC)	Г		
Highest temperature	•	Temp)		DVTempUnitHigh) C (Vitals.DVTempHighTime) Time
	6		F		
Brain temperature at		TempHighC)	(Vitals.	DVTempBrainUnit) C (Vitals.DVTempBrainNotDone) Not
time of highest body	(,	F		done
temp:	(Vitals.DV	TempBrainC)			
Brain temperature at	t the (Vitals.DV	'BrainTempFLow)			Vitals.DVBrainTempLowNotDone) Not
time of lowest body t	temp		F	L	Done
	(Vitals.DV	BrainTempCLow)			
Blood Gas					
Analysis Lowest PaO2	(Vitals DVI owe	estPaO2NotDone)	(\/itala	s DVI owestPaO2kPa\	(Vitals.DVLowestPaO2Unit) kPa
20,000,1 002	done		,		mmHg
FiO2 at time of	(Vitale DVEiO2	AtLowPaO2NotDone)		s.DVLowestPaO2)	%
sampling:	Not done	ALLOWI BOZINOLDONE)	(vitals	s.DVFiO2AtLowPaO2)	70
Lowest PaO2/FiO2			(Vitals	s.DVLowestPaO2OverLowestFi	O2)
Highest PaO2:	(Vitals.DVHighe Not done	estPaO2NotDone)	(Vitals	s.DVHighestPaO2kPa)	(Vitals.DVHighestPaO2Unit) kPa mmHg
			(Vitals	s.DVHighestPaO2)	
FiO2 at time of sampling:	(Vitals.DVFiO2.	AtHighPaO2NotDone)	(Vitals	s.DVFiO2AtHighPaO2)	%
Highest PaO2/FiO2			(Vitals	s.DVHighestPaO2OverHighestF	iiO2)
Lowest oxygen	•	dOxySatLowNotDone)	(Vitals	s.DVBloodOxySatLow)	%
saturation: Highest oxygen	Not Done (Vitals DVBlood	dOxySatHidhNotDone\	(\/itala	s.DVBloodOxySatHigh)	%
saturation: Not Done					1
Lowest PaCO2:	(Vitals.DVLowe Not done	estPaCO2NotDone)	(Vitals	s.DVLowestPaCO2kPa)	(Vitals.DVLowestPaCO2Unit) kPa mmHg
			(Vitals	s.DVLowestPaCO2)	
Highest PaCO2:	(Vitals.DVHighe	estPaCO2NotDone)	(Vitals	s.DVHighestPaCO2kPa)	(Vitals.DVHighestPaCO2Unit)

Not done		kPa _mmHg	
l	(Vitals.DVHighestPat		
done	(Vitals.DVLowestpH)		
Highest pH: (Vitals.DVHighestpHNotDone) Not done	(Vitals.DVHighestpH)		
(Vitals.DailyVitalsID) GCS and Pupils			
Please score the best and worst GCS and Pupillary reactivunder worst:	ity for this day, if t	ne best is the same as worst record one entr	у
Worst GCS	Eye opening	(Vitals.DVGCSWorstEyes) 1-None	
(Vitals.DailyGCSTime) Time of worst GCS		2-To pain 3-To speech 4-Spontaneously	
(Vitals.DVAssmtConditionsWorst) Assessment conditions: No sedation or paralysis Paralyzed		Untestable (swollen) Untestable (Other) Unknown	
☐ Sedated ☐ Temporary stop of sedation/paralysis	Motor:	(Vitals.DVGCSWorstMotor) 1-None 2-Abnormal extension	
Reversal of sedation/paralysis Active reversal (pharmacologic) of sedation/paralysis Other		3-Abnormal flexion 4-Normal flexion/withdrawal 5-Localizes to pain	
(Vitals.DVChangeInOneDayWorst) Change over past 24 hours: ☐ No change		6-Obeys command Untestable (Deep sedation/paralyzed) Untestable (Other)	
☐ Improving ☐ Episode of deterioration ☐ Sustained deterioration	Verbal:	Unknown (Vitals.DVGCSWorstVerbal) 1-None	
Fluctuating		2- Incomprehensible sound 3-Inappropriate words	
(Vitals.DVChangeCauseWorst) Cause of change: Mainly intracranial Mainly extracranial Both to an equal extent		□ 4-Confused □ 5-Oriented □ Untestable (Tracheotomy/endotracheal t □ Untestable (Other)	ube)
Unknown	Caara	Unknown	
	Score	(Vitals.DVGCSWorstScore)	
Reactivity: Size: (Negative) (Sluggish) (Brisk)		ntestable Reactiv	gative) ggish)
(Vitals.) Best GCS Worst GCS same as best GCS? (Vitals.DVGCSBest) \(\bigcap \text{No} \)	Yes		
(Vitals.DVGCSBestTime) Time of best GCS	(Vitals	DVGCSEves) Eve opening:	
(Vitals.DVAssmtConditions) Assessment Conditions: No sedation or paralysis	☐ 1-N ☐ 2-1	lone o pain	
Paralyzed Sedated		o speech Spontaneously	
☐ Temporary stop of sedation/paralysis	☐ Un	testable (swollen)	
Reversal of sedation/paralysis Active reversal (pharmacologic) of sedation/paralysis		testable (Other) known	
Other		DVGCSMotor) Motor:	
(Vitals.DVChangeInOneDay) Change over past 24 hours: No change	□ 1-N □ 2- <i>F</i>	one Ibnormal extension	
☐ Improving		Abnormal flexion Normal flexion/withdrawal	
Episode of deterioration Sustained deterioration		ocalizes to pain	
Fluctuating		Obeys command testable (Deep sedation/paralyzed)	
(Vitals.DVGCSBestChangeCause) Cause of change: Mainly intracranial	Un	testable (Other)	
Mainly extracranial Both to an equal extent		known DVGCSVerbal) Verbal :	
Unknown	<u></u> 1-N	lone	
		ncomprehensible sound nappropriate words	
	_ 4-0	Confused	
		Oriented testable (Tracheotomy/endotracheal tube)	
		testable (Other)	
		known DVGCSScore) Best GCS Score	
(Vitals.DailyVitalsID) Best Pupils			
Left eye:		Right eye:	
(Vitals.DVPupilReactivityLghtLftEyeResIt) (Vitals.DVPupilLftEyeMeaReactivity: Size:			
5125.			ntRtEyeResIt) (Vitals.DVPupilRtEyeMeasr) Size:
- (Negative) -+ (Sluggish)	asr) (Vitals.DVPupilLf Untestable Unknown	(Vitals_DVPUpliReactivityLgr Reactivity: - (Negative) + (Sluggish)	tRtEyeResit) (Vitals.DVPupilRtEyeMeasr) Size:

Four Score	
_	
Eye response:	(Vitals.DVFourScoreEye) Eyelids open or opened tracking or blinking to command
	Eyelids open but not tracking
	Eyelids closed but opens to loud voice Eyelids closed but opens to pain
	Eyelids remain closed with pain
	Unknown
Motor response	(Vitals.DVFourScoreMotor) Thumbs up, fist, or peace sign to command
•	☐ Localizing to pain
	Flexion response to pain
	☐ Extensor posturing
	No response to pain or generalized myoclonus status epilepticus
	Unknown
Brainstem reflexes:	(Vitals.DVFourScoreBraintstem) Pupil and corneal reflexes present
	One pupil wide and fixed
	Pupil or corneal reflexes absent Pupil and corneal reflexes absent
	Absent pupil, corneal, and cough reflex
	Unknown
Respiration:	(Vitals.DVFourScoreRespiration) Not intubated, regular breathing pattern
	Not intubated, Cheyne- Stokes breathing pattern
	☐ Not intubated, irregular breathing pattern
	☐ Breathes above ventilator rate
	☐ Breathes at ventilator rate or apnea
	Unknown
FOUR Score Sum:	(Vitals.DVFourScoreTotal)
Intracranial Sec	ond Insults
Seizures (Vitals.Host	ComplEventSeizures) No
Silent s	eizure activity (only electrical, no clinical manifestation)
☐ Single	episode, short duration
□ Partial/	Focal
☐ Genera	lized
☐ Status	epilepticus
☐ Unknov	vn
Systemic Second	Insults
Observation Factorisation	
Hypoxic Episode:	(Vitals.HosComplEventHypoxia) No
Hypoxic Episode:	☐ Single episode, short duration
нурохіс Episode:	Single episode, short duration Multiple episodes or prolonged duration
	Single episode, short duration Multiple episodes or prolonged duration Unknown
Hypotensive Episode:	Single episode, short duration Multiple episodes or prolonged duration Unknown e: (Vitals.HosComplEventHypotension) No
	Single episode, short duration Multiple episodes or prolonged duration Unknown (Vitals.HosComplEventHypotension) No Single episode, short duration
	Single episode, short duration Multiple episodes or prolonged duration Unknown (Vitals.HosComplEventHypotension) No Single episode, short duration Multiple episodes or prolonged duration
Hypotensive Episod	Single episode, short duration Multiple episodes or prolonged duration Unknown (Vitals.HosComplEventHypotension) No Single episode, short duration Multiple episodes or prolonged duration Unknown
Hypotensive Episod	Single episode, short duration Multiple episodes or prolonged duration Unknown (Vitals.HosComplEventHypotension) No Single episode, short duration Multiple episodes or prolonged duration Unknown Dia: (Vitals.HosComplEventHypocapnia) No
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Hypotensive Episod Inadvertent hypocal	Single episode, short duration Multiple episodes or prolonged duration Unknown (Vitals.HosComplEventHypotension) No Single episode, short duration Multiple episodes or prolonged duration Unknown conia: (Vitals.HosComplEventHypocapnia) No Single episode, short duration Multiple episode, short duration Multiple episode or prolonged duration Unknown
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Hypotensive Episod Inadvertent hypocal	Single episode, short duration Multiple episodes or prolonged duration Unknown
Hypotensive Episod Inadvertent hypocal Neuroworsening Neuroworsening?	Single episode, short duration Multiple episodes or prolonged duration Unknown e: (Vitals.HosComplEventHypotension) No Single episode, short duration Multiple episodes or prolonged duration Unknown onia: (Vitals.HosComplEventHypocapnia) No Single episode, short duration Multiple episode, short duration Multiple episodes or prolonged duration Unknown * Vitals.HospSecondInsultsNeuroWorse) No
Hypotensive Episod Inadvertent hypocal Neuroworsening Neuroworsening? (Single episode, short duration Multiple episodes or prolonged duration Unknown Wittals-HosComplEventHypotension No Single episode, short duration Multiple episodes or prolonged duration Unknown Unknown Wittals-HosComplEventHypocapnia No Single episode, short duration Multiple episodes or prolonged duration Multiple episodes or prolonged duration Unknown Wittals-HospSecondInsultsNeuroWorse No Yes Unknown Unknown Unknown Unknown Wittals-HospSecondInsultsNeuroWorseYes Please describe: Decrease in motor score >= 2 points
Hypotensive Episod Inadvertent hypocal Neuroworsening?	Single episode, short duration Multiple episodes or prolonged duration Unknown e: (Vitals.HosComplEventHypotension) No Single episode, short duration Multiple episodes or prolonged duration Unknown pnia: (Vitals.HosComplEventHypocapnia) No Single episode, short duration Multiple episodes or prolonged duration Unknown * * Vitals.HospSecondInsultsNeuroWorse) No Yes Unknown Decrease in motor score ➤= 2 points Development of pupillary abnormalities
Hypotensive Episod Inadvertent hypocal Neuroworsening? (Single episode, short duration Multiple episodes or prolonged duration Unknown Witals.HosComplEventHypotension) No Single episode, short duration Multiple episodes or prolonged duration Unknown Dria: (Vitals.HosComplEventHypocapnia) No Single episode, short duration Multiple episode, short duration Multiple episodes or prolonged duration Unknown Witals.HospSecondInsultsNeuroWorse) No Yes Unknown Vitals.HospSecondInsultsNeuroWorseYes) Please describe: Decrease in motor score >= 2 points Development of pupillary abnormalities Other neurological and/or CT deterioration
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Hypotensive Episod Inadvertent hypocal Neuroworsening Neuroworsening? (Single episode, short duration Multiple episodes or prolonged duration Unknown Wittals.HosComplEventHypotension No Single episode, short duration Multiple episodes or prolonged duration Unknown Unknown No Single episode, short duration Multiple episodes or prolonged duration Unknown Unknown No Wittals.HosComplEventHypocapnia No Wittals.HospSecondInsultsNeuroWorse No Yes Unknown Unknown Vitals.HospSecondInsultsNeuroWorseYes Please describe: Decrease in motor score >= 2 points Development of pupillary abnormalities Other neurological and/or CT deterioration Vitals.HospSecondInsultsNeuroWorseAction Action taken: None
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Hypotensive Episod Inadvertent hypocal Neuroworsening? (Single episode, short duration Multiple episodes or prolonged duration Unknown (Vitals.HosComplEventHypotension) No Single episode, short duration Multiple episodes or prolonged duration Unknown Dria: (Vitals.HosComplEventHypocapnia) No Single episode, short duration Multiple episode, short duration Multiple episodes or prolonged duration Unknown Witals.HospSecondInsultsNeuroWorse) No Yes Unknown Vitals.HospSecondInsultsNeuroWorseYes) Please describe: Decrease in motor score >= 2 points Development of pupillary abnormalities Other neurological and/or CT deterioration Vitals.HospSecondInsultsNeuroWorseAction) Action taken: None Unscheduled CT scan Change in medical therapy
Hypotensive Episod Inadvertent hypocal Neuroworsening? (Single episode, short duration Multiple episodes or prolonged duration Unknown (Vitals.HosComplEventHypotension) No Single episode, short duration Multiple episodes or prolonged duration Unknown Unknown Single episode, short duration Multiple episodes or prolonged duration Multiple episodes or prolonged duration Multiple episodes or prolonged duration Unknown * Vitals.HospSecondInsultsNeuroWorse) No Yes Unknown Vitals.HospSecondInsultsNeuroWorseYes) Please describe: Decrease in motor score >= 2 points Development of pupillary abnormalities Other neurological and/or CT deterioration Vitals.HospSecondInsultsNeuroWorseAction) Action taken: None Unscheduled CT scan
Hypotensive Episod Inadvertent hypocal Neuroworsening? (Single episode, short duration Multiple episodes or prolonged duration Unknown
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Neuroworsening?	Single episode, short duration Multiple episodes or prolonged duration Unknown Wittisk HosComplEventHypotension No Single episode, short duration Multiple episodes or prolonged duration Unknown Dria: (Vitals HosComplEventHypocapnia) No Single episode, short duration Multiple episodes or prolonged duration Multiple episodes or prolonged duration Unknown Wittisk HospSecondInsultsNeuroWorse No Yes Unknown Vitals HospSecondInsultsNeuroWorseYes Please describe: Decrease in motor score >= 2 points Development of pupillary abnormalities Other neurological and/or CT deterioration Vitals HospSecondInsultsNeuroWorseAction Action taken: None Unscheduled CT scan Change in medical therapy Surgical intervention defined as: crease in the Glasgow Coma Scale motor score ≥ 2 points (compared with the previous examination)
Neuroworsening? (Single episode, short duration Multiple episodes or prolonged duration Unknown (Vitals.HosComplEventHypotension) No Single episode, short duration Multiple episodes or prolonged duration Unknown Dria: (Vitals.HosComplEventHypocapnia) No Single episode, short duration Unknown Multiple episode, short duration Multiple episodes or prolonged duration Unknown Witals.HospSecondInsultsNeuroWorse) No Yes Unknown Vitals.HospSecondInsultsNeuroWorseYes) Please describe: Decrease in motor score >= 2 points Development of pupillary abnormalities Other neurological and/or CT deterioration Vitals.HospSecondInsultsNeuroWorseAction) Action taken: None Unscheduled CT scan Change in medical therapy Surgical intervention defined as: crease in the Glasgow Coma Scale motor score ≥ 2 points (compared with the previous examination) llary reactivity, development of pupillary asymmetry ≥ 2 mm.
Neuroworsening? (Single episode, short duration Multiple episodes or prolonged duration Unknown Wittisk HosComplEventHypotension No Single episode, short duration Multiple episodes or prolonged duration Unknown Dria: (Vitals HosComplEventHypocapnia) No Single episode, short duration Multiple episodes or prolonged duration Multiple episodes or prolonged duration Unknown Wittisk HospSecondInsultsNeuroWorse No Yes Unknown Vitals HospSecondInsultsNeuroWorseYes Please describe: Decrease in motor score >= 2 points Development of pupillary abnormalities Other neurological and/or CT deterioration Vitals HospSecondInsultsNeuroWorseAction Action taken: None Unscheduled CT scan Change in medical therapy Surgical intervention defined as: crease in the Glasgow Coma Scale motor score ≥ 2 points (compared with the previous examination)