

# Checklist Ward Routine

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## Visit

- Dressing change and inspection of wounds, suture traction
- Blood drawing
- Check mobilisation and ability to be discharged.
- Adjustment of medication, especially painkillers and thrombosis prophylaxis
- In elderly patients monitor GFR, urine volume, presence of oedema, dehydration.

## Preoperative

- Operations registered?
- Informed consent forms present? Informed consent possible (opiates, patient under care, children)?
- Imaging (e.g. planning images for endoprotheses)
- Erythrocyte concentrates necessary/crossmatched?
- Lab? Coagulation?
- In case of fracture; Swelling?
- Surgery Side marked?

## New admissions

- Brief history:
  - Accident sequence, pain quality and intensity, sensitivity, blood circulation, immobilisation
  - Pre-existing conditions, especially DVT, embolism, myocardial infarction, stroke, diabetes mellitus, cancers
  - Regular medication, especially anticoagulation and ASA
  - Allergies, intolerances
  - Home care
- Involve social services if necessary (clarify care after dismissal).
- Register Physiotherapy/Lab Control

## Further

- Always remember documentation!
- Labs requested and viewed.
- Imaging requested and new images viewed and discussed if necessary.
- Microbiological results checked and antibiotic treatment started/adjusted if necessary.
- Examinations (ECGs, consults, post-op instructions) requested and viewed.
- Physio-, occupational therapy registered
- Rehab applications written.
- Ward round.

## Dismissal

- Prepare dismissal/transfer
  - Resources
  - Medication/ Prescriptions
  - Transport etc.
  - Sufficient care at home? Social services if necessary
- Dismissal letter

## Surgeries

- Check surgical plan, education and allergy status.
- View clinical findings, X-rays, pre-surgery reports.
- Visit patient pre- and postoperatively (check pDMS).
- Know surgical approach, instruments.
- Prepare surgery report.