

| VITAL SIGNS CHART | | | | | | | | | | PATIENT DETAILS | | | | | | | | | | |
|-------------------|-------------------------|---------------------|---------------------------------------|--|-------------------|--|--|--|--|-----------------|--|--|--|--|---------------|--|--|--|--|--|
| Hospital | | | | | Medical Record No | | | | | Name | | | | | Date of Birth | | | | | |
| Ward | | | | | Name | | | | | Date of Birth | | | | | | | | | | |
| Specialist | | | | | Date of Birth | | | | | | | | | | | | | | | |
| DATE | | | | | | | | | | | | | | | | | | | | |
| TIME | | | | | | | | | | | | | | | | | | | | |
| TEMPERATURE °C | 41 | | | | | | | | | | | | | | | | | | | |
| | 40 | | | | | | | | | | | | | | | | | | | |
| | 39 | | | | | | | | | | | | | | | | | | | |
| | 38 | | | | | | | | | | | | | | | | | | | |
| | 37 | | | | | | | | | | | | | | | | | | | |
| | 36 | | | | | | | | | | | | | | | | | | | |
| | 35 | | | | | | | | | | | | | | | | | | | |
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| | 220 | | | | | | | | | | | | | | | | | | | |
| | 210 | | | | | | | | | | | | | | | | | | | |
| 200 | | | | | | | | | | | | | | | | | | | | |
| 190 | | | | | | | | | | | | | | | | | | | | |
| 180 | | | | | | | | | | | | | | | | | | | | |
| 170 | | | | | | | | | | | | | | | | | | | | |
| 160 | | | | | | | | | | | | | | | | | | | | |
| 150 | | | | | | | | | | | | | | | | | | | | |
| 140 | | | | | | | | | | | | | | | | | | | | |
| 130 | | | | | | | | | | | | | | | | | | | | |
| 120 | | | | | | | | | | | | | | | | | | | | |
| 110 | | | | | | | | | | | | | | | | | | | | |
| 100 | | | | | | | | | | | | | | | | | | | | |
| 90 | | | | | | | | | | | | | | | | | | | | |
| 80 | | | | | | | | | | | | | | | | | | | | |
| 70 | | | | | | | | | | | | | | | | | | | | |
| 60 | | | | | | | | | | | | | | | | | | | | |
| 50 | | | | | | | | | | | | | | | | | | | | |
| 40 | | | | | | | | | | | | | | | | | | | | |
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| PULSE | 150 | | | | | | | | | | | | | | | | | | | |
| | 140 | | | | | | | | | | | | | | | | | | | |
| | 130 | | | | | | | | | | | | | | | | | | | |
| | 120 | | | | | | | | | | | | | | | | | | | |
| | 110 | | | | | | | | | | | | | | | | | | | |
| | 100 | | | | | | | | | | | | | | | | | | | |
| | 90 | | | | | | | | | | | | | | | | | | | |
| | 80 | | | | | | | | | | | | | | | | | | | |
| | 70 | | | | | | | | | | | | | | | | | | | |
| | 60 | | | | | | | | | | | | | | | | | | | |
| 50 | | | | | | | | | | | | | | | | | | | | |
| 40 | | | | | | | | | | | | | | | | | | | | |
| RESPIRATIONS | 35 | | | | | | | | | | | | | | | | | | | |
| | 30 | | | | | | | | | | | | | | | | | | | |
| | 25 | | | | | | | | | | | | | | | | | | | |
| | 20 | | | | | | | | | | | | | | | | | | | |
| | 15 | | | | | | | | | | | | | | | | | | | |
| | 10 | | | | | | | | | | | | | | | | | | | |
| | SpO ₂ | | | | | | | | | | | | | | | | | | | |
| | O ₂ - litres | | | | | | | | | | | | | | | | | | | |
| | Urine El. | | | | | | | | | | | | | | | | | | | |
| | Bowel El. | | | | | | | | | | | | | | | | | | | |
| Pain | | | | | | | | | | | | | | | | | | | | |
| NURSE | | | | | | | | | | | | | | | | | | | | |
| Evaluation | normal VS | check VS in 10 mins | abnormal VS, inform doctor NOW | | | | | | | | | | | | | | | | | |