SOAP Notes

Patient Name: _____ Age: ____ Date: __/__/__

Subjective:

Objective:

Time				
L.O.C				
H.R.				
R.R.				
S.C.T.M.				
B.P.	/	/	/	/
Pupils				
Temp.				

Symptoms _____

Allergies _____

Medications _____

Pertinent History _____

Last In & Out _____

Events _____

Assessment:

Onset _____

Provokes _____

Palliates _____

Quality _____

Radition _____

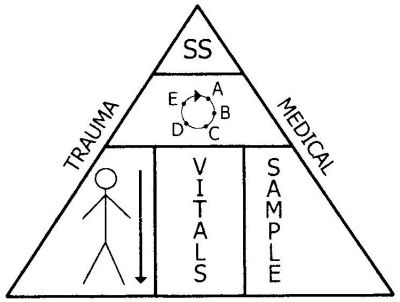
Severity _____

Time _____

Plan:

Anticipated Problems:

CASCADIA
PREPAREDNESS SOLUTIONS



Vital Signs

Airway
Look in Mouth & Clear Obstructions

Breathing
Look, Listen & Feel

Circulation
Assess Pulse, Bleeding, & Shock

Disability
Stabilize Spine Unless PT has no MOI

Environment/Expose
Assess & Treat Environmental Hazards
Expose & Asess Serious Wounds

Time
Time of VS Observations

Level of Consciousness (LOC)
A+O x 1,2,3 or 4; Verbal (V); Pain (P); Unresponsive (U)

Heart Rate (HR)
Beats per Minute, Rhythm & Quality (i.e. Regular & Strong)

Respiration Rate (RR)
Breaths per Minute, Rhythm & Quality (i.e. Regular & Unlabored)

Skin Color, Temperature & Moisture (SCTM)
PWD = Pink, Warm & Dry

Blood Pressure (BP)
Systolic / Diastolic - Palpated, Ausculated or Estimated

Pupils
Pupils are Equal, Round, & Reactive to Light (PERRL)

Temperature (T°)
Body Temperature in F.

BP Estimates
Pulse

Carotid	50+ Systolic
Femoral	60+ Systolic
Brachial	70+ Systolic
Radial	80+ Systolic
Pedal	90+ Systolic

SAMPLE History
Symptoms
Allergies
Medications/Drugs/Alcohol
Pertinent Medical History
Last Intake/Output & Qty.
Events Leading to Incident

Chief Complaint (CC)
Onset - "What brought it on?"
Provokes/Palliates - "Hurts/helps?"
Quality - "What kind of pain?"
Radiation/Region/Referred - "Where?"
Severity - Scale of 1-10
Time - "How long?"

Don't Forget:
- Lung Sounds
- CSM's
- Down to Skin on all Pain
- Release Spine (A+Ox4, CSMx4 & No CS Pain)