THORACIC SURGERY PROGRESS NOTE

**Reason for visit:** {Blank single:19197::"Post-Operative Care", "Pneumothorax", "Pleural Effusion", "****"}

**POD:** {NUMBERS 0-10:25173}

**Procedure:** ***

**ASSESSMENT:**

1. {Blank single:19197::"Lung Nodule","Mediastinal Mass","Post-operative pain","DVT Prophylaxis","Drains","****"}

2. {Blank single:19197::"Lung Nodule","Mediastinal Mass","Post-operative pain","DVT Prophylaxis","Drains","****"}

3. {Blank single:19197::"Lung Nodule","Mediastinal Mass","Post-operative pain","DVT Prophylaxis","Drains","****"}


**PLAN:**

1. ***

2. ***

3. ***

4. ***

5. ***

<table>
<thead>
<tr>
<th>PROBLEM LIST:</th>
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<td>@PROB@</td>
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**Subjective:** I examined the patient and reviewed the chart and medications.

**Interim events:** ***.

The patient reports *** and ***

**Objective:**

@VITALS@

**Physical Exam:**

- **General:** ***
- **Respiratory:** ***
- **Cardiovascular:** ***
- **Abdomen:** ***
- **Incisions:** ***
- **Extremities:** ***
- **Neuropsychiatric:** ***
Chest tubes: {yes:21565}
   *** ml in 24 hours; currently on {CHEST TUBE SEAL:24789}.
   Air Leak: {AIRLEAK:24787}.
   Removed on: ***

Urinary catheter: {yes:21565}
   Removed on: ***
   Indwelling urethral catheter use continues to be indicated for the following reason(s):
   {FOLEY CATH NECESSITY:24785::"Not Applicable"}

**Diagnostic studies:**
@LAST24LAB@

**Pain Assessment:**
Has your pain been controlled well enough for you to participate in your plan of care?
{yes no:314532::"no"}

**Respiratory Protocol:**
Daily IS maximum volume: ***
Has the patient been evaluated & treated by respiratory therapy in last 24 hrs: {yes no:314532::"no"}

**Electronically signed by:** @MECREDA, @TD@ @NOW@

@LOCATION@