

Student's Name: _____

Lincoln Memorial University

Pt's initials: _____

Date of Interview: _____

Care Plan

Pt's admitting diagnosis(es): _____

Pt's admission date: _____

Must Submit Drug Cards

Assessment

Nursing diagnoses (Include Rt and AEB)
*Remember: Objective and Subjective data

(O)

(S)

Nursing Diagnosis (Psych):

Behavioral Outcomes

Short Term

Long Term

**Nursing Interventions
and Scientific Rationales**

Evaluation