

BLS Chart Review

Call # _____

Reviewer (circle one) BLS / ALS / County

	Yes	No	N/A
Complete vital signs charted?			
Are vitals within normal limits?			
Are abnormal vitals mentioned/addressed?			
Are Allergies documented?			
Is pertinent Medical History Documented?			
Are Medications documented?			
If indicated, is glucose documented in Flow?			
If given, are medications documented correctly?			
If performed, are procedures documented correctly?			
is an appropriate physical exam documented?			
Is the narrative adequate/appropriate?			
Were only Skagit County approved abbreviations used?			
Are Primary and Secondary Impressions Appropriate?			
Are ALS indicators present or an ALS assessment indicated?			
If indicated, was an ALS assessment performed?			
Was an ALS assessment indicated, but NOT AVAILABLE?			
is overall care/documentation appropriate?			
This chart should be reviewed by Agency Supervisor			
This chart should be reviewed by the MPD			

Reviewer Feedback/Comments:

Version 1.23
Date Last Reviewed 2-4-16

Implementation Date: N/A
Approved by Dr. Russell