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| Niue Flag adjust | NIUE SHIP REGISTRY10 Anson Road #25-15, International Plaza, Singapore 079903Tel: +65 6226-2001 Email:info@niueship.comWebsite: <https://niueship.com> |
| CREW MEDICAL RECORD (Form CMR)*-Confidential Document-***Case Number:**       |
| **CREW MEDICAL RECORD (for Injury / illness etc.)** |
| Vessel Name | Voyage Number | Cabin / Crew Number |
| Status[ ]  Passenger [ ] Crew [ ] Other :  | Name (Last, First, Middle) | Nationality |
| Address | Birth Date | Passport / ID Number |
| Home Phone Number | Date | Time |
| **HISTORY PRESENT ILLNESS / INJURY** | **VITAL SIGNS** |
| Age: | Gender:  | CC: | Blood Pressure: | Pulse: | Temperature (F/C): |
| **PAST HISTORY** | **MEDICATION** |
| (CAD, MI, HTN, CHF, Arthritis, DM, CVA, PUD, TAH etc) | (Type, Quantity, Time) |
| **ALLERGIES** | **LMP** | **TETANUS** |
|  |  |  |
| **MEDICAL TESTS** | **MEDICAL TREATMENTS**  |
| [ ]  BHCG | [ ]  Electrolytes | [ ]  ABG FIO2:      % | [ ]  dT 0.5cc IM | [ ]          |
| [ ]  Bun | [ ]  Glucose | [ ]  Amylase / Lipase | [ ]  IV Type / Rate:       | [ ]         |
| [ ]  CBC | [ ]  KUB | [ ]  CPK and CPK-MB | [ ]  Monitor / Tele | [ ]         |
| [ ]  Creatinine | [ ]  Platelets | [ ]  Flat / Erect Abdomen | [ ]  Inhaler Treatment | [ ]         |
| [ ]  CXR | [ ]  PT / PTT | [ ]  Liver Profile | [ ]  Hypertet 250 UI IM | [ ]         |
| [ ]  EKG | [ ]  Troponin | [ ]  Urine / Dipstick | [ ]  02 | [ ]         |
| [ ]          | [ ]  Pulse Oximetry | [ ]         |
| **PHYSICAL EXAM** | **GENERAL** |
| BP: | P: | RR: | TEMP: | PULSE OXY: | Well developed, nourished, in         distress.[ ]  Yes [ ]  No |
| **HEENT** | **NECK** |
| Head atraumatic. PERRL EOM’s intake. Nystagmus. Anicteric. Sharp discs. Throat clear. TM’s clear.Mucosa: [ ]  Moist [ ]  Dry [ ]  Pink [ ]  Pale | Supple. Kernigs. Brudzinski. JVD. Stridor. |
| **CHEST** | **CV** |
| Clear breath sounds. Normal expansion. No wheezing, rales. | PMII 4th ICS MCL. No gallop, murmurs. Regular rhythm |
| **ABD** | **GU / GYN** |
| Non-distended: | Bowel sounds:  | Soft. Tenderness: | Flank Pain:[ ]  L [ ]  R [ ]  None | Hernias[ ]  L [ ]  R [ ]  None |
| Rovsing. Rebound. Guarding. Organomegaly:  | Hemmocult Stool:**[ ]** Pos [ ]  Neg Color:         | Normal Genitalia. Testes Descended / Tender |
| **EXT** | **NEURO** |
| Cyanosis. Clubbing. Edema. Deformities:  | Patient is alert, attentive, cooperative. Oriented to person, situation, place and time. DTR’s symmetric.Goal-oriented conversation. Clear speech. Coordinates well. Moves face and all four extremities symmetrically. |

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| **SKIN** | **EKG** |
| Good turgor, no rashes. Diaphoretic, warm, dry. | Rhythm: | Rate: | Impression: |
| **LAB RESULTS** | **X-RAY** |
| GluBunCrKNaCO2CLHctHgBWBC

|  |  |  |
| --- | --- | --- |
| ACCUCHECK:  |  | PULSE OXYMETRY:  |

 |  |
| **INTERPRETATION** |
| pH | O2 | CO2 | FIO2% |
| Amy / Lipase | CK/MB/Troponin | Other |
| U/A |
| **TELEMEDICAL ADVICE RECEIVED** |
|  |
| **FINAL DIAGNOSIS** | **INSTRUCTIONS / REFERRAL** |
| **MAY RETURN TO DUTY:**  | **[ ]** Return ASAP if worsening in your condition. |
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| **PHYSICIAN SIGNATURE:** |  |  | **DATE:** |  |
|  |  |  |  |
| **PATIENT SIGNATURE:** |  | **(IN RECEIPT OF DISCHARGE INSTRUCTIONS)** |

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