Section: Division of Nursing

PROTOCOL

Index: 7010.108b Page: 1 of 2

Issue Date: August 8, 2008

HACKETTSTOWN REGIONAL MEDICAL CENTER

Originator: B. Carey, RN, MPA

E. Fitzgerald, RN, CCRN, BSN

ER (Scope)

TITLE: Exception to Protocol for Discharge

PURPOSE: To delineate when a repeat set of vital signs is not necessary on a patient in the Emergency Department

prior to discharge.

SUPPORTIVE DATA: If patient is discharged within 1 hour of admission to the Emergency Department with stable vital signs

upon initial presentation.

EQUIPMENT LIST: 1. Triage sheet

2. Nurse's notes

CONTENT: PROCEDURE STEPS: KEY POINTS:

Discharge Vital Signs

Patients who have been present in the Emergency Department for < 1 hour and who presented initially with stable vital signs and a level 4 or 5 triage status do not need a repeat set of vital signs prior to discharge. Patients with a level 4 or 5 triage status are non-urgent and considered to be stable patients.

Normal Vital signs by age

Adult vital signs		
Pulse	60 to 100 beats per minute	
Blood pressure	90 to 140 mmHg (systolic) 60 to 90 mmHg (diastolic)	
Respirations	12 to 20 breaths per minute	
Child vital signs (age 1 to 8 years)		
Pulse	80 to 100 beats per minute	
Blood pressure	80 to 110 mmHg systolic	
Respirations	15 to 30 breaths per minute	

Infant vital signs (age 1 to 12 months)	
Pulse	100 to 140 beats per minute
Blood pressure	70 to 95 mmHg systolic
Respirations	25 to 50 breaths per minute

Neonatal vital signs (full-term, ≤28 days)	
Pulse	120 to 160 beats per minute
Blood pressure	>60 mmHg systolic
Respirations	40 to 60 breaths per minute

References:

The Risk Manager's Desk Reference, Barbara J. Youngberg, Published by Jones & Bartlett Publishers, 1998, pg. 301 EMSresource.net - Compiled using Emergency Care and Transportation of the Sick and Injured, EMS Field Guide and Journal of Emergency Medical Services.