

# HENVISNING VED LUFTVEISINFEKSJON

Dr: \_\_\_\_\_  
HPR NR.: \_\_\_\_\_  
Arbeidssted: \_\_\_\_\_

Personnummer: \_\_\_\_\_  
Etternavn: \_\_\_\_\_  
Fornavn: \_\_\_\_\_  
Mobilnummer: \_\_\_\_\_

Mann  Kvinne

**Vaksinasjonsstatus:**  Sesonginfluenza  Pneumovax  Prevanar

**Alvorlige allergiske reaksjoner:** \_\_\_\_\_ **Cave:** \_\_\_\_\_

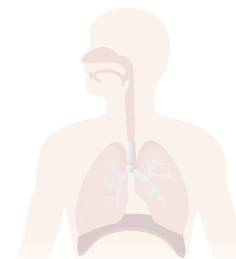
**Røyker:**  Ja  Nei **Kjernejournal sjekket for kritisk info:**  Ja  Nei

## Relevante sykdommer:

KOLS:  Ja  Nei  
Annen lungesykdom:  Ja  Nei Hvilken: \_\_\_\_\_  
Hjertesvikt:  Ja  Nei  
Annen hjertesykdom:  Ja  Nei Hvilken: \_\_\_\_\_  
Diabetes Mellitus:  Ja  Nei  
Nyresvikt:  Ja  Nei  
Nedsatt immunforsvar:  Ja  Nei Hvilken: \_\_\_\_\_  
Annet: \_\_\_\_\_

## Aktuelt:

Dato for første forkjølelssymptom: \_\_\_\_/\_\_\_\_/2020



**Funn:** BT: \_\_\_\_ / Puls: \_\_\_\_ Temp: \_\_\_\_ RF: \_\_\_\_ CRP: \_\_\_\_ saO2: \_\_\_\_ % EKG: \_\_\_\_\_

**Se bakside for utregning:** CFS (1-9): \_\_\_\_ qSOFA (1-3): \_\_\_\_ NEWS (0-20): \_\_\_\_

**Utenlandsreise:**  Ja  Nei

Dersom ja, hvor: \_\_\_\_\_

Hjemreisedato: \_\_\_\_/\_\_\_\_/2020

Nasofarynksprøve indikasjon: \_\_\_\_\_

Tatt dato: \_\_\_\_/\_\_\_\_/2020

**SARS - Covid - 2: Positiv**  **Negativ**

Ikke analysert enda

Positiv for andre virus: \_\_\_\_\_

## Legemidler i bruk:

Bruker immundepende legemidler:  Ja  Nei

Dersom ja, hvilken: \_\_\_\_\_

## Ved innleggelse:

- Meld pasient til sekretær ved Akuttsenteret. **Tlf: 33 37 83 22**  
- Vurder behov for å konferere med vakthavende.

Ved direkte henvisning til radiologisk-avdeling ring **Tlf: 33 34 20 00**

*Meld ifra om pasienten har luftveisinfeksjon! **Utstyr isåfall pasienten med munnbind.***

### Clinical Frailty Scale

 <p><b>1 Very Fit</b> – People who are robust, active, energetic and motivated. These people commonly exercise regularly. They are among the fittest for their age.</p>	 <p><b>7 Severely Frail</b> – Completely dependent for personal care, from whatever cause (physical or cognitive). Even so, they seem stable and not at high risk of dying (within ~ 6 months).</p>
 <p><b>2 Well</b> – People who have no active disease symptoms but are less fit than category 1. Often, they exercise or are very active occasionally, e.g. seasonally.</p>	 <p><b>8 Very Severely Frail</b> – Completely dependent, approaching the end of life. Typically, they could not recover even from a minor illness.</p>
 <p><b>3 Managing Well</b> – People whose medical problems are well controlled, but are not regularly active beyond routine walking.</p>	 <p><b>9 Terminally Ill</b> – Approaching the end of life. This category applies to people with a life expectancy &lt;6 months, who are not otherwise evidently frail.</p>
 <p><b>4 Vulnerable</b> – While not dependent on others for daily help, often symptoms limit activities. A common complaint is being “slowed up”, and/or being tired during the day.</p>	
 <p><b>5 Mildly Frail</b> – These people often have more evident slowing, and need help in high order IADLs (finances, transportation, heavy housework, medications). Typically, mild frailty progressively impairs shopping and walking outside alone, meal preparation and housework.</p>	<p><b>Scoring frailty in people with dementia</b></p> <p>The degree of frailty corresponds to the degree of dementia. Common <b>symptoms in mild dementia</b> include forgetting the details of a recent event, though still remembering the event itself, repeating the same question/story and social withdrawal.</p> <p>In <b>moderate dementia</b>, recent memory is very impaired, even though they seemingly can remember their past life events well. They can do personal care with prompting.</p> <p>In <b>severe dementia</b>, they cannot do personal care without help.</p>
 <p><b>6 Moderately Frail</b> – People need help with all outside activities and with keeping house. Inside, they often have problems with stairs and need help with bathing and might need minimal assistance (cuing, standby) with dressing.</p>	

qSOFA		poeng
Systolisk blodtrykk	<100	1
Respirasjonsfrekvens	>22	1
Glasgow Coma Score	<15	1

Ambulanse / sykepleier					
Klokkeslett					
<b>A+B</b>	≥25			<b>3</b>	
Respirasjonsfrekvens	21-24			<b>2</b>	
	18-20				
	15-17			<b>0</b>	
	12-14				
	9-11			<b>1</b>	
	≤8			<b>3</b>	
<b>A+B</b>	≥96			<b>0</b>	
SpO <sub>2</sub> Skala 1	94-95			<b>1</b>	
	92-93			<b>2</b>	
	≤91			<b>3</b>	
SpO <sub>2</sub> Skala 2*	≥97 m/O <sub>2</sub>			<b>3</b>	
Bruk skala 2 dersom målområde er	95-96 m/O <sub>2</sub>			<b>2</b>	
	93-94 m/O <sub>2</sub>			<b>1</b>	
88-92%, f.eks. ved hyperkapnisk respirasjonssvikt eller habituell hypoventilasjon	≥93 romluft			<b>0</b>	
	88-92				
	86-87			<b>1</b>	
	84-85			<b>2</b>	
	≤83			<b>3</b>	
Luft eller oksygen?	Luft			<b>0</b>	
	O <sub>2</sub> L/min			<b>2</b>	
	Adm. måte			<b>0</b>	
<b>C</b>	≥220			<b>3</b>	
Blodtrykk, mmHg	201-219				
	181-200				
	161-180			<b>0</b>	
Score kun systolisk BT	141-160				
	121-140				
▽	111-120				
⊙ Noninvasivt	101-110			<b>1</b>	
△	91-100			<b>2</b>	
V Manuelt	81-90				
	71-80				
	61-70			<b>3</b>	
	51-60				
	≤50				
<b>C</b>	≥131			<b>3</b>	
Hjertefrekvens	121-130			<b>2</b>	
	111-120				
• Puls	101-110			<b>1</b>	
	91-100				
	81-90				
	71-80			<b>0</b>	
	61-70				
	51-60				
	41-50			<b>1</b>	
	31-40			<b>3</b>	
	≤30				
<b>D</b>	Alert			<b>0</b>	
	Bevissthet	Confusion			
		Verbal			<b>3</b>
		Pain			
	Unresponsive				
<b>E</b>	≥39,1°			<b>2</b>	
	38,1-39,0°			<b>1</b>	
	37,1-38,0°			<b>0</b>	
	36,1-37,0°				
	35,1-36,0°			<b>1</b>	
	≤35,0°			<b>3</b>	
<b>↔ Total NEWS</b>					