

TIPS FOR WRITING A GREAT NURSING NOTE



Great nursing notes provide a detailed legal record of a patient's status, treatment, responses, and outcomes.

Characteristic	Incorrect	Correct
Factual	✗ Patient seems like they are in pain.	✓ Patient grimaced and moaned when their leg was touched.
Accurate	✗ There was a large amount of drainage.	✓ There was 150 mL of serosanguineous drainage.
Complete	✗ Patient was taught how to check their blood sugar.	✓ Patient was able to return-demonstrate how to check their blood sugar.
Current	✗ Patient had a temperature after breakfast.	✓ Patient had a temperature of 39.1°C (102.4°F) at 0900.
Organized	✗ Patient had altered mental status, stomach pain, and could not recall their name.	✓ Patient had altered mental status with inability to recall their name and complained of dull stomach pain.
Professional	✗ Patient uncooperative and would not take meds.	✓ Patient refused 0900 meds.



- ✓ Be sure to document on the correct patient, and under your own name and login.
- ✓ Document as soon as possible. Don't wait until the end of the shift.
- ✓ Report and document missed or late entries immediately.
- ✓ Document the issue, what you did about it, and the patient's response.
- ✓ Document only what you see, hear, touch, smell, and do—avoid opinions.
- ✓ Document often enough and with enough detail to tell the entire story.
- ✓ Document all communications—include names, titles, time, statements, and actions taken.

NOTES

