**Optiflowbehandling Pat.id:**

Ordinatör:

Målvärde för patienten (Rekommenderade värden för patienter med KOL 88-92, övriga patienter 92-96 %):

Saturation: Ev. maxflöde:

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| **Datum** | **Kl** | **Flöde** | **Syrgas** | **Tempinst.** | **Sat.** | **Andn.frekv** | **Sign** |
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OBS! Dokumentet skall skannas in efter vårdtillfället 