

ED Advanced Trauma/Bites/Extremity Pain [1619]

General

Nursing

Vital Signs

Vital signs - T/P/R/BP STAT, Per unit protocol

Nursing

Insert peripheral IV STAT, Once
Leave saline lock in place for ETOH detox patient.

Morgan Lens Eye Irrigation 1000 mL normal Saline STAT, Until discontinued, Starting S

Provide suture tray to patient bedside STAT, Once For 1 Occurrences

Diet

NPO Diet effective now, Starting S
NPO:
Pre-Operative fasting options:

IV Fluids

Peripheral IV Access

Initiate and maintain IV

Insert peripheral IV Routine, Once

sodium chloride 0.9 % flush 10 mL, intravenous, every 12 hours scheduled

sodium chloride 0.9 % flush 10 mL, intravenous, PRN, line care

IV Fluids

sodium chloride 0.9 % bolus 1000 mL 1,000 mL, intravenous, for 30 Minutes, once, For 1 Doses

sodium chloride 0.9 % bolus 500 mL 500 mL, intravenous, for 15 Minutes, once, For 1 Doses

sodium chloride 0.9 % infusion - 100 mL/hr 100 mL/hr, intravenous, continuous

Medications

Immunizations

diphtheria/tetanus Toxoid injection - Adult 0.5 mL, intramuscular, once, For 1 Doses

diphtheria/pertussis/tetanus (TDAP, ADACEL) injection - Adult 0.5 mL, intramuscular, once, For 1 Doses

rabies immune globulin (PF) (IMOGAM) 150 unit/mL injection 20 Units/kg, intramuscular, once, For 1 Doses
Infiltrate site; remainder IM to buttock

rabies vaccine, human diploid (PF) (IMOVAX) 2.5 unit injection 1 mL, intramuscular, once, For 1 Doses

tetanus immune globulin (PF) (HYPERTET S/D) 250 unit injection 500 Units, intramuscular, once, For 1 Doses

Pain

HYDROmorphone (DILAUDID) injection 1 mg, intravenous, once PRN, severe pain (score 7-10), pain augmentation, For 1 Doses
Monitor and record pain scores and respiratory status.

morphine injection 4 mg, intravenous, once, For 1 Doses
Monitor and record pain scores and respiratory status

diazepam (VALIUM) tablet 5 mg, oral, once PRN, anxiety, For 1 Doses
Indication:

HYDROcodone-acetaminophen (NORCO) 7.5-325 mg per tablet 1 tablet, oral, once PRN, moderate pain (score 4-6), pain, For 1 Doses
Monitor and record pain scores and respiratory status.
Maximum of 3 grams of acetaminophen per day

Antiemetics

[X] ondansetron (ZOFTRAN) IV or Oral	"Or" Linked Panel
[X] ondansetron ODT (ZOFTRAN-ODT) disintegrating tablet	4 mg, oral, once PRN, nausea, vomiting, For 1 Doses Give if patient is able to tolerate oral medication.
[X] ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, once PRN, nausea, vomiting, For 1 Doses Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
[X] promethazine (PHENERGAN) IV or Oral or Rectal	"Or" Linked Panel
[X] promethazine (PHENERGAN) 12.5 mg IV	12.5 mg, intravenous, once PRN, nausea, vomiting, For 1 Doses Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral or rectal medication OR if a faster onset of action is required.
[X] promethazine (PHENERGAN) tablet	12.5 mg, oral, once PRN, nausea, vomiting, For 1 Doses Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.
[X] promethazine (PHENERGAN) suppository	12.5 mg, rectal, once PRN, nausea, vomiting, For 1 Doses Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.

Antiemetics

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[X] ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, once PRN, nausea, vomiting, For 1 Doses Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
[X] promethazine (PHENERGAN) IV or Oral or Rectal	"Or" Linked Panel
[X] promethazine (PHENERGAN) 12.5 mg in sodium chloride 0.9 % 0.9 % 20 mL for Alaris pump syringe option	12.5 mg, intravenous, every 6 hours PRN, nausea, vomiting Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral or rectal medication OR if a faster onset of action is required.
[X] promethazine (PHENERGAN) tablet	12.5 mg, oral, every 6 hours PRN, nausea, vomiting Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.
[X] promethazine (PHENERGAN) suppository	12.5 mg, rectal, every 6 hours PRN, nausea, vomiting Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.

Antiemetics

[X] ondansetron (ZOFTRAN) IV or Oral	"Or" Linked Panel
[X] ondansetron ODT (ZOFTRAN-ODT) disintegrating tablet	4 mg, oral, once PRN, nausea, vomiting, For 1 Doses Give if patient is able to tolerate oral medication.
[X] ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, once PRN, nausea, vomiting, For 1 Doses Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
[X] promethazine (PHENERGAN) IVPB or Oral or Rectal	"Or" Linked Panel
[X] promethazine (PHENERGAN) 25 mg in sodium chloride 0.9 % 50 mL IVPB	12.5 mg, intravenous, for 30 Minutes, once PRN, nausea, vomiting, For 1 Doses Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral or rectal medication OR if a faster onset of action is required.
[X] promethazine (PHENERGAN) tablet	12.5 mg, oral, once PRN, nausea, vomiting, For 1 Doses Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.
[X] promethazine (PHENERGAN) suppository	12.5 mg, rectal, once PRN, nausea, vomiting, For 1 Doses Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.

Anesthetics

<input type="checkbox"/> lidocaine (XYLOCAINE) 5 mg/mL (0.5 %) injection	10 mL, injection, once, For 1 Doses
<input type="checkbox"/> lidocaine (XYLOCAINE) 20 mg/mL (2 %) injection	10 mL, injection, once, For 1 Doses
<input type="checkbox"/> lidocaine-epinephrine (PF) (XYLOCAINE W/EPI) 2 %-1:200000 injection	10 mg, injection, once, For 1 Doses

Antibiotics

URL:

"<http://cid.oxfordjournals.org/content/early/2014/06/14/cid.ciu296.full.pdf+html>"

<input type="checkbox"/> Intravenous Antibiotics for Bites	
<input type="checkbox"/> ampicillin-sulbactam (UNASYN) IV	1.5 g, intravenous, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> azithromycin (ZITHROMAX) IV	500 mg, intravenous, for 60 Minutes, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> ceftiofloxacin (MEFOXIN) IV	1 g, intravenous, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> ceftriaxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> cefuroxime (ZINACEF) IV	1 g, intravenous, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> ciprofloxacin (CIPRO) IV	500 mg, intravenous, for 60 Minutes, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> clindamycin (CLEOCIN) IV	600 mg, intravenous, for 30 Minutes, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> ertapenem (INVanz) IV	intravenous, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> meropenem (MERREM) IV	intravenous, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	750 mg, intravenous, daily Reason for Therapy:
<input type="checkbox"/> metronidazole (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> moxifloxacin (AVELOX) IV	400 mg, intravenous, for 60 Minutes, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> trimethoprim-sulfamethoxazole (BACTRIM-SEPTRA) IV	5 mg/kg/day, intravenous, for 2 Hours, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> vancomycin (VANCOCIN) IV	intravenous, once, For 1 Doses Type of Therapy:
<input type="checkbox"/> Oral Antibiotics for Bites	
<input type="checkbox"/> amoxicillin-pot clavulanate (AUGMENTIN) 875-125 mg per tablet	1 tablet, oral, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> cefuroxime (CEFTIN) tablet	500 mg, oral, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> ciprofloxacin HCl (CIPRO) tablet	500 mg, oral, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> clindamycin (CLEOCIN) capsule	300 mg, oral, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> doxycycline (VIBRA-TABS) tablet	100 mg, oral, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> levofloxacin (LEVAQUIN) tablet	750 mg, oral, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> metroNIDAZOLE (FLAGYL) tablet	250 mg, oral, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> moxifloxacin (AVELOX) tablet	400 mg, oral, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> penicillin v potassium (VEETID) tablet	500 mg, oral, once, For 1 Doses Reason for Therapy:
<input type="checkbox"/> sulfamethoxazole-trimethoprim (BACTRIM DS) 800-160 mg tablet	1 tablet, oral, once, For 1 Doses Reason for Therapy:

Ophthalmic

<input type="checkbox"/> sodium chloride (NS) 0.9 % irrigation solution	1,000 mL, irrigation, once, For 1 Doses
<input type="checkbox"/> tetracaine HCl (PF) 0.5 % ophthalmic solution	2 drop, once, For 1 Doses
<input type="checkbox"/> fluorescein ophthalmic strip	1 strip, once, For 1 Doses

VTE

Labs

Laboratory STAT

<input type="checkbox"/> CBC with platelet and differential	STAT For 1 Occurrences
<input type="checkbox"/> Prothrombin time panel I-STAT	STAT For 1 Occurrences
<input type="checkbox"/> Partial thromboplastin time	STAT For 1 Occurrences
<input type="checkbox"/> D-dimer	STAT For 1 Occurrences
<input type="checkbox"/> Basic metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/> Comprehensive metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/> Alcohol level, blood	STAT For 1 Occurrences
<input type="checkbox"/> Urinalysis screen and microscopy, with reflex to culture	STAT For 1 Occurrences Specimen Source: Urine Specimen Site:

Laboratory STAT

<input type="checkbox"/> CBC with differential	STAT For 1 Occurrences
<input type="checkbox"/> Prothrombin time with INR	STAT For 1 Occurrences
<input type="checkbox"/> Partial thromboplastin time	STAT For 1 Occurrences
<input type="checkbox"/> D-dimer	STAT For 1 Occurrences
<input type="checkbox"/> Basic metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/> Comprehensive metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/> Alcohol level, blood	STAT For 1 Occurrences
<input type="checkbox"/> Urinalysis screen and microscopy, with reflex to culture	STAT For 1 Occurrences Specimen Source: Urine Specimen Site:

Laboratory - STAT

<input type="checkbox"/> CBC with platelet and differential	STAT For 1 Occurrences
<input type="checkbox"/> Prothrombin time panel I-STAT	STAT For 1 Occurrences
<input type="checkbox"/> Partial thromboplastin time	STAT For 1 Occurrences
<input type="checkbox"/> D-dimer	STAT For 1 Occurrences
<input type="checkbox"/> Basic metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/> Comprehensive metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/> Alcohol level, blood	STAT For 1 Occurrences
<input type="checkbox"/> Urinalysis	STAT For 1 Occurrences
<input type="checkbox"/> Urine culture	STAT For 1 Occurrences, Urine

Pregnancy Kirby

<input type="checkbox"/> hCG qualitative, urine	STAT For 1 Occurrences
<input type="checkbox"/> hCG QUANTitative, serum	STAT For 1 Occurrences

Pregnancy

<input type="checkbox"/> hCG QUALitative, urine	STAT For 1 Occurrences
<input type="checkbox"/> hCG QUANTitative, serum	STAT For 1 Occurrences

Microbiology (Single Response)

<input type="checkbox"/> Aerobic culture	Once For 1 Occurrences, Wound Wound
<input type="checkbox"/> Anaerobic culture	Once For 1 Occurrences, Wound Wound

Cardiology

Cardiology

<input type="checkbox"/> ECG 12 lead	STAT, Once For 1 Occurrences Clinical Indications: Interpreting Physician: Pre-Op Clearance
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Imaging

Diagnostic CT

<input type="checkbox"/> CT Head Wo Contrast -Trauma	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> CT Maxillofacial Wo Contrast -Trauma	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> CT Cervical Spine Wo Contrast -Trauma	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> CT Chest W Contrast - Trauma	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Abdomen Pelvis W Contrast (Omnipaque) for Trauma	"And" Linked Panel

For those with iodine allergies, please order the panel with Read-Cat (barium sulfate).

<input type="checkbox"/> CT Abdomen Pelvis W Contrast	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> iohexol (OMNIPAQUE) 300 mg iodine/mL oral solution	30 mL, oral, once, For 1 Doses
<input type="checkbox"/> CT Chest W Abdomen W Pelvis W Contrast (Omnipaque) for Trauma	"And" Linked Panel

For those with iodine allergies, please order the panel with Read-Cat (barium sulfate).

<input type="checkbox"/> CT Chest W Contrast Abdomen W Contrast Pelvis W Contrast Trauma	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> iohexol (OMNIPAQUE) 300 mg iodine/mL oral solution	30 mL, oral, once

<input type="checkbox"/> CT Lumbar Spine Wo Contrast- Trauma	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> CT Thoracic Spine Wo Contrast- Trauma	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> CTA Chest W Wo Contrast	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> CT Maxillofacial W Contrast	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> CT Maxillofacial W Wo Contrast	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Orbits W Contrast	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Orbits Wo Contrast	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Orbits W Wo Contrast	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Upper Extremity W Contrast Bilateral	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Upper Extremity W Contrast Left	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Upper Extremity W Contrast Rt	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Upper Extremity Wo Contrast Bilateral	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Upper Extremity Wo Left	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Upper Extremity Wo Right	STAT, 1 time imaging For 1
<input type="checkbox"/> CTA Abdominal Aorta And Bilateral Iliofemoral Runoff W Wo Contrast	STAT, 1 time imaging For 1

<input type="checkbox"/> CT Abdomen Pelvis W Contrast	STAT, 1 time imaging For 1 With IV only Contrast
<input type="checkbox"/> CT Lumbar Spine Wo Contrast	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Lower Extremity W Contrast Bilateral	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Lower Extremity W Contrast Left	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Lower Extremity W Contrast Right	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Lower Extremity Wo Contrast Bilateral	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Lower Extremity Wo Contrast Left	STAT, 1 time imaging For 1
<input type="checkbox"/> CT Lower Extremity Wo Contrast Right	STAT, 1 time imaging For 1

Diagnostics X-Ray Chest

<input type="checkbox"/> Chest 1 Vw Portable	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> Cervical Spine 2 Or 3 Vw	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> Lumbar Spine Complete 4+ Vw	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> Thoracic Spine 3 Vw	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/> Lumbar Spine 2 Or 3 Vw	STAT, 1 time imaging For 1 Occurrences

<input type="checkbox"/>	Sacrum And Coccyx	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Shoulder 2+ Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Clavicle Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Clavicle Right	STAT, 1 time imaging For 1 Occurrences

Diagnostics X-Ray Arms

<input type="checkbox"/>	Humerus Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Humerus Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Elbow 2 Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Elbow 2 Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Elbow 3+ Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Elbow 3+ Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Forearm 2 Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Forearm 2 Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Wrist 2 Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Wrist 2 Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Wrist 3+ Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Wrist 3+ Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Hand 2 Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Hand 2 Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Hand 3+ Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Hand 3+ Vw Right	STAT, 1 time imaging For 1 Occurrences

Diagnostics X-Ray Legs

<input type="checkbox"/>	Pelvis 1 Or 2 Vw	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Tibia Fibula 2 Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Legs Bilateral	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	XR Hip 2-3 View Left	STAT, 1 time imaging For 1
<input type="checkbox"/>	XR Hip 2-3 View Right	STAT, 1 time imaging For 1
<input type="checkbox"/>	Femur 2 Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Femur 2 Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Knee 1 Or 2 Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Knee 1 Or 2 Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Knee 4+ Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Knee 4+ Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Ankle 2 Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Ankle 2 Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Ankle 3+ Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Ankle 3+ Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Foot 2 Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Foot 2 Vw Right	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Foot 3+ Vw Left	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	Foot 3+ Vw Right	STAT, 1 time imaging For 1 Occurrences

Diagnostics US

<input type="checkbox"/>	USPV Venous Lower Extremity Bilateral	STAT, 1 time imaging For 1 Occurrences
<input type="checkbox"/>	USPV Venous Upper Extremity Bilat	STAT, 1 time imaging For 1 Occurrences

Type and Crossmatch Order Set

Type and Crossmatch

<input type="checkbox"/>	Type and screen	Once For 1 Occurrences
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Blood Products

<input type="checkbox"/>	Red Blood Cells	
<input type="checkbox"/>	Prepare RBC	STAT Transfusion Indications: Transfusion date:

<input type="checkbox"/> Transfuse RBC	STAT Transfusion duration per unit (hrs):
<input type="checkbox"/> Platelets	
<input type="checkbox"/> Prepare platelet pheresis	STAT Transfusion Indications: Transfusion date:
<input type="checkbox"/> Transfuse platelets	STAT Transfusion duration per unit (hrs):
<input type="checkbox"/> Fresh Frozen Plasma	
<input type="checkbox"/> Prepare fresh frozen plasma	STAT Transfusion Indications: Transfusion date:
<input type="checkbox"/> Transfuse fresh frozen plasma	STAT Transfusion duration per unit (hrs):
<input type="checkbox"/> Cryoprecipitate	
<input type="checkbox"/> Prepare cryoprecipitate	STAT Transfusion Indications: Transfusion date:
<input type="checkbox"/> Transfuse cryoprecipitate	STAT Transfusion duration per unit (hrs):

IV Fluids

<input type="checkbox"/> sodium chloride 0.9 % infusion	250 mL, intravenous, at 30 mL/hr, continuous Administer with blood
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Medications

<input type="checkbox"/> acetaminophen (TYLENOL) tablet	oral, once, For 1 Doses
<input type="checkbox"/> diphenhydrAMINE (BENADRYL) tablet	25 mg, oral, once, For 1 Doses
<input type="checkbox"/> diphenhydrAMINE (BENADRYL) injection	25 mg, intravenous, once, For 1 Doses
<input type="checkbox"/> hydrocortisone sodium succinate (Solu-CORTEF) IV	intravenous, every 6 hours
<input type="checkbox"/> furosemide (LASIX) injection	intravenous, once, For 1 Doses
<input type="checkbox"/> furosemide (LASIX) tablet	oral, once, For 1 Doses
<input type="checkbox"/> Famotidine (PEPCID) IV/PO	"Or" Linked Panel
<input type="checkbox"/> famotidine (PEPCID) tablet	20 mg, oral, 2 times daily May crush and give per nasogastric tube if needed. Give the tablet if the patient can tolerate oral medication.
<input type="checkbox"/> famotidine (PEPCID) injection	20 mg, intravenous, 2 times daily Use injection if patient cannot tolerate oral medication or requires a faster onset of action.
<input type="checkbox"/> fexofenadine (ALLEGRA) tablet	180 mg, oral, daily

Other Studies

Respiratory

Rehab

Consults

For Physician Consult orders use sidebar

Additional Orders