

ED Advanced Allergic Reaction/Anaphylaxis [1625]

General

Nursing

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ED bedside monitoring STAT, Continuous

Vital Signs

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

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

Respiratory Medications

ipratropium-albuterol (DUO-NEB) 0.5-2.5 mg/mL nebulizer solution 3 mL, inhalation, every 6 hours PRN, wheezing
Aerosol Delivery Device:

Medications

dexamethasone (DECADRON) IV 10 mg, intravenous, once, For 1 Doses

methylPREDNISolone sodium succinate (Solu-MEDROL) injection 125 mg, intravenous, once, For 1 Doses

diphenhydrAMINE (BENADRYL) injection 25 mg, intravenous, once, For 1 Doses

EPINEPHrine (ADRENALIN) 0.3 mg injection 0.3 mg, subcutaneous, once, For 1 Doses

famotidine (PEPCID) injection 20 mg, intravenous, once, For 1 Doses

terbutaline (BRETHINE) injection 0.25 mg, subcutaneous, once, For 1 Doses

magnesium sulfate IV 2 gm 2 g, intravenous, once, For 1 Doses

VTE

Labs

Laboratory - STAT

CBC with differential STAT For 1 Occurrences

Basic metabolic panel STAT For 1 Occurrences

Comprehensive metabolic panel STAT For 1 Occurrences

Urinalysis screen and microscopy, with reflex to culture STAT For 1 Occurrences
Specimen Source: Urine
Specimen Site:

Blood gas, arterial STAT For 1 Occurrences

Laboratory - STAT

CBC with differential STAT For 1 Occurrences

Basic metabolic panel STAT For 1 Occurrences

Comprehensive metabolic panel STAT For 1 Occurrences

Urinalysis STAT For 1 Occurrences

<input type="checkbox"/> Urine culture	Once For 1 Occurrences, Urine
<input type="checkbox"/> Blood gas, arterial	STAT For 1 Occurrences

Laboratory - STAT

<input type="checkbox"/> CBC with differential	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"/> Urine Culture and Urinalysis	"And" Linked Panel
<input type="checkbox"/> Urine culture	Once For 1 Occurrences, Urine
<input type="checkbox"/> Urinalysis	STAT For 1 Occurrences
<input type="checkbox"/> Blood gas, arterial	STAT For 1 Occurrences

Pregnancy Labs

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

Cardiology

ECG

<input type="checkbox"/> ECG 12 lead	STAT, Once Clinical Indications: Interpreting Physician: To be performed by ED staff - Show immediately to MD
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Imaging

Diagnostics - X-Ray

<input type="checkbox"/> Chest 1 Vw Portable	STAT, 1 time imaging For 1
<input type="checkbox"/> Chest 2 Vw	STAT, 1 time imaging For 1
<input type="checkbox"/> Neck Soft Tissue	STAT, 1 time imaging For 1

Other Studies

Respiratory

Respiratory Therapy

<input type="checkbox"/> Oxygen therapy	STAT, Continuous Device 1: Nasal Cannula Rate in liters per minute: 2 lpm Rate in tenths of a liter per minute: O2 %: Titrate to keep O2 Sat Above: 92% Indications for O2 therapy:
<input type="checkbox"/> Consult to Respiratory Therapy	Reason for Consult? To manage oxygen saturation and airway

Rehab

Consults

For Physician Consult orders use sidebar

Additional Orders