

General

Admission (Single Response)

(X) Admit to inpatient	Diagnosis: Admitting Physician: Level of Care: Patient Condition: Bed request comments: Certification: I certify that based on my best clinical judgment and the patient's condition as documented in the HP and progress notes, I expect that the patient will need hospital services for two or more midnights.
------------------------	--

Nursing

Vital Signs

[X] Vital signs - every hour	Routine, Every hour Notify Coordinator if Systolic BP is LESS than 90 mmHg or GREATER than 180 mmHg
------------------------------	--

Nursing

[X] Intake and output	Routine, Every shift Monitor hourly output
[X] Nasogastric tube maintenance	Routine, Until discontinued, Starting S Tube Care Orders:
[X] Suctioning	Routine, As needed Route: Endotracheal
[X] Nursing communication	Routine, Until discontinued, Starting S Arterial Line to Pressure Monitoring
[X] Nursing communication	Routine, Until discontinued, Starting S CVP to Pressure Monitoring
[X] Nursing communication	Routine, Until discontinued, Starting S Maintain body temp at 96 - 99 degrees Fahrenheit. Utilize Hyper/Hypothermia Blanket if needed.
[X] Nursing communication	Routine, Until discontinued, Starting S ACLS Protocol
[X] Nursing communication	Routine, Until discontinued, Starting S Increase FiO2 to 100% then after 30 mins, draw ABGs. Then decrease FiO2 to 40% and after 30 mins, draw ABGs.

Notify

[X] Notify Coordinator if Systolic BP is LESS than 90 mmHg or GREATER than 180 mmHg	Routine, Once
---	---------------

IV Fluids

Medications

Initiate with the following prior to starting a drip:

[X] levothyroxine (SYNTHROID) in sodium chloride 0.9 % IV Push	20 mcg, intravenous, for 2 Minutes, once, For 1 Doses
[X] hydrocortisone IV 100 mg ONCE followed by 50 mg IV every 6 hours	"Followed by" Linked Panel
[X] hydrocortisone sodium succinate (Solu-CORTEF) injection	intravenous, once, For 1 Doses
[X] hydrocortisone sodium succinate (Solu-CORTEF) injection	50 mg, intravenous, every 6 hours, Starting H+6 Hours

<input checked="" type="checkbox"/> dextrose 50% injection	intravenous, once, For 1 Doses Give 1 amp of Dextrose 50%
<input checked="" type="checkbox"/> insulin regular (HumuLIN,NovoLIN) IV syringe	10 Units, intravenous, every 5 min, For 2 Doses Give 10 units IV Push x 2 doses to equal 20 unit total administered.
IV Drips	
<input checked="" type="checkbox"/> levothyroxine (SYNTHROID, LEVOTHROID) 200 mcg in sodium chloride 0.45 % 500 mL IVPB	200 mcg, intravenous, at 50 mL/hr, continuous 50 mL/hr rate delivers 20 mcg/hr of levothyroxine. Maximum 24 hr dose is approximately 400 mcg.
<input checked="" type="checkbox"/> vasopressin (PITRESSIN) injection	1 Units, intravenous, once, For 1 Doses Give 1 units bolus before starting infusion.
<input checked="" type="checkbox"/> vasopressin (PITRESSIN) 0.4 Units/mL in sodium chloride 0.9 % 100 mL infusion	0.0083-0.033 Units/min, intravenous, continuous Titrate drip to maintain Urine Output GREATER than or EQUAL to 50 mL/hr and LESS than 300 mL/hr. If Urine Output is GREATER than or EQUAL to 50 mL/hr and Sodium Level is GREATER than 140, continue drip. If Urine Output is LESS than 50 mL/hr and Sodium Level is LESS than or EQUAL to 135, titrate down or stop drip. Notify Medical Director if Vasopressin Drip rate is GREATER than *** Units/min for 2 hours.
<input checked="" type="checkbox"/> insulin regular 1 unit/mL infusion	intravenous, continuous Order and draw Hemoglobin A1c before starting drip as available at hospital.
<input type="checkbox"/> DOPamine (INTROPIN) infusion	2-20 mcg/kg/min, intravenous, titrated
<input type="checkbox"/> norEPInephrine (LEVOPHED) infusion	4-50 mcg/min, intravenous, titrated
<input type="checkbox"/> phenylephrine (NEO-SYNEPHRINE) in sodium chloride 0.9 % 250 mL infusion	5-150 mcg/min, intravenous, titrated

VTE

Labs

Labs STAT

<input type="checkbox"/> Type and screen	STAT For 1 Occurrences
<input type="checkbox"/> ABO	Once
<input type="checkbox"/> CBC with platelet and differential	STAT For 1 Occurrences
<input type="checkbox"/> Partial thromboplastin time	STAT For 1 Occurrences
<input type="checkbox"/> Prothrombin time with INR	STAT For 1 Occurrences
<input type="checkbox"/> Sodium level	STAT For 1 Occurrences
<input type="checkbox"/> Calcium level	STAT For 1 Occurrences
<input type="checkbox"/> Glucose level	STAT For 1 Occurrences
<input type="checkbox"/> Phosphorus level	STAT For 1 Occurrences
<input type="checkbox"/> Magnesium level	STAT For 1 Occurrences
<input type="checkbox"/> Total bilirubin	STAT For 1 Occurrences
<input type="checkbox"/> LDH	STAT For 1 Occurrences
<input type="checkbox"/> BUN level	STAT For 1 Occurrences
<input type="checkbox"/> Protein, total	STAT For 1 Occurrences
<input type="checkbox"/> Fibrinogen	STAT For 1 Occurrences
<input type="checkbox"/> D-dimer, quantitative	STAT For 1 Occurrences
<input type="checkbox"/> Creatine kinase, total (CPK)	STAT For 1 Occurrences
<input type="checkbox"/> Creatinine level	STAT For 1 Occurrences
<input type="checkbox"/> Arterial blood gas	STAT For 1 Occurrences
<input type="checkbox"/> Potassium level	STAT For 1 Occurrences
<input type="checkbox"/> CO2 level	STAT For 1 Occurrences
<input type="checkbox"/> Amylase level	STAT For 1 Occurrences
<input type="checkbox"/> ALT (SGPT)	STAT For 1 Occurrences
<input type="checkbox"/> AST (SGOT)	STAT For 1 Occurrences
<input type="checkbox"/> Alkaline phosphatase	STAT For 1 Occurrences
<input type="checkbox"/> Albumin level	STAT For 1 Occurrences
<input type="checkbox"/> GGT	STAT For 1 Occurrences

<input type="checkbox"/> Troponin	STAT For 1 Occurrences
<input type="checkbox"/> Lipase level	STAT For 1 Occurrences
<input type="checkbox"/> Urinalysis, automated with microscopy	Once

Labs Repeating

<input type="checkbox"/> CBC with differential	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Partial thromboplastin time	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Prothrombin time with INR	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Sodium level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Calcium level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Glucose level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Phosphorus level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Magnesium level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Total bilirubin	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> LDH	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> BUN level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Protein, total	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Fibrinogen	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> D-dimer, quantitative	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Creatine kinase, total (CPK)	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Creatinine level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Arterial blood gas	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Potassium level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> CO2 level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Amylase level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> ALT (SGPT)	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> AST (SGOT)	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Alkaline phosphatase	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Albumin level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> GGT	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Troponin	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.
<input type="checkbox"/> Lipase level	Every 6 hours For 2 Occurrences Draw 6 hours after initial lab draw.

Microbiology

		"And" Linked Panel
[X] Blood culture x 2		
<input checked="" type="checkbox"/> Blood Culture (Aerobic & Anaerobic)		Once, Blood Collect before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, please call the lab for assistance; an IV line should NEVER be used.
<input checked="" type="checkbox"/> Blood Culture (Aerobic & Anaerobic)		Once, Blood Collect before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, please call the lab for assistance; an IV line should NEVER be used.
<input checked="" type="checkbox"/> Urinalysis screen and microscopy, with reflex to culture		Once Specimen Source: Urine Specimen Site:
<input checked="" type="checkbox"/> Sputum culture		Once, Sputum
<input checked="" type="checkbox"/> Gram stain only		Once

Cardiology

Cardiology

<input checked="" type="checkbox"/> ECG 12 lead		Routine, Once Clinical Indications: Rate/Rhythm Interpreting Physician:
<input type="checkbox"/> Echocardiogram 2d limited		Routine, 1 time imaging Perform at bedside only.

Imaging

Diagnostic X-ray

<input checked="" type="checkbox"/> XR Chest 1 Vw		STAT, 1 time imaging For 1
---	--	----------------------------

Respiratory

Respiratory

<input type="checkbox"/> Oxygen therapy		Routine, Continuous Device 1: Titrate to keep O2 Sat Above: Other (Specify) Specify titration to keep O2 Sat (%) Above: 100 Indications for O2 therapy: 4 to 6 liters per minute
<input type="checkbox"/> Mechanical ventilation		Routine Mechanical Ventilation: Vent Management Strategies: Vent Management Strategies: Vent Management Strategies: Vent Management Strategies:

Consults

Consult Physician

<input type="checkbox"/> Consult Intensive Care		Reason for Consult? For Bronchoscopy and bronchial washing of transplant organ donor Patient/Clinical information communicated?
<input type="checkbox"/> Consult Pulmonary/Crit Care		Reason for Consult? For Bronchoscopy and bronchial washing of transplant organ donor Patient/Clinical information communicated?