

General

Admission or Observation (Single Response) (Selection Required)

Do not use Outpatient Observation Services Under General Supervision order for patients who are receiving Outpatient TRIAGE services.

Admit to L&D

Admitting Physician:
Diagnosis:
Level of Care: Antepartum
Bed request comments:
Scheduling/ADT

Outpatient observation services under general supervision

Diagnosis:
Admitting Physician:
Patient Condition:
Bed request comments:
Scheduling/ADT

Admission or Observation (Single Response)

Patient has active status order on file

Admit to L&D

Admitting Physician:
Diagnosis:
Level of Care: Antepartum
Bed request comments:
Scheduling/ADT

Outpatient observation services under general supervision

Diagnosis:
Admitting Physician:
Patient Condition:
Bed request comments:
Scheduling/ADT

Code Status

Full code

Code Status decision reached by: Patient by means of Oral Directive

DNR (Do Not Resuscitate) (Selection Required)

DNR (Do Not Resuscitate)

Does patient have decision-making capacity?
L&D Pre-Delivery

Consult to Palliative Care Service

Priority:
Reason for Consult?
Order?

Name of referring provider:
Enter call back number:

Consult to Social Work

Reason for Consult:
L&D Pre-Delivery

Modified Code

Does patient have decision-making capacity?
Modified Code restrictions:
L&D Pre-Delivery

Treatment Restrictions

Treatment Restriction decision reached by:
Specify Treatment Restrictions:
L&D Pre-Delivery

Isolation

Airborne isolation status

Airborne isolation status

Details

Mycobacterium tuberculosis by PCR - If you suspect Tuberculosis, please order this test for rapid diagnostics.

Once, Sputum, L&D Pre-Delivery

Contact isolation status

Details

<input type="checkbox"/> Droplet isolation status	Details
<input type="checkbox"/> Enteric isolation status	Details
Precautions	
<input type="checkbox"/> Aspiration precautions	L&D Pre-Delivery
<input type="checkbox"/> Fall precautions	Increased observation level needed: On Admission and every 8 hours, L&D Pre-Delivery
<input type="checkbox"/> Latex precautions	L&D Pre-Delivery
<input type="checkbox"/> Seizure precautions	Increased observation level needed: L&D Pre-Delivery

Common Present on Admission Diagnosis

<input type="checkbox"/> Acidosis	L&D Pre-Delivery
<input type="checkbox"/> Acute Post-Hemorrhagic Anemia	L&D Pre-Delivery
<input type="checkbox"/> Acute Renal Failure	L&D Pre-Delivery
<input type="checkbox"/> Acute Respiratory Failure	L&D Pre-Delivery
<input type="checkbox"/> Acute Thromboembolism of Deep Veins of Lower Extremities	L&D Pre-Delivery
<input type="checkbox"/> Anemia	L&D Pre-Delivery
<input type="checkbox"/> Bacteremia	L&D Pre-Delivery
<input type="checkbox"/> Bipolar disorder, unspecified	L&D Pre-Delivery
<input type="checkbox"/> Cardiac Arrest	L&D Pre-Delivery
<input type="checkbox"/> Cardiac Dysrhythmia	L&D Pre-Delivery
<input type="checkbox"/> Cardiogenic Shock	L&D Pre-Delivery
<input type="checkbox"/> Decubitus Ulcer	L&D Pre-Delivery
<input type="checkbox"/> Dementia in Conditions Classified Elsewhere	L&D Pre-Delivery
<input type="checkbox"/> Disorder of Liver	L&D Pre-Delivery
<input type="checkbox"/> Electrolyte and Fluid Disorder	L&D Pre-Delivery
<input type="checkbox"/> Intestinal Infection due to Clostridium Difficile	L&D Pre-Delivery
<input type="checkbox"/> Methicillin Resistant Staphylococcus Aureus Infection	L&D Pre-Delivery
<input type="checkbox"/> Obstructive Chronic Bronchitis with Exacerbation	L&D Pre-Delivery
<input type="checkbox"/> Other Alteration of Consciousness	L&D Pre-Delivery
<input type="checkbox"/> Other and Unspecified Coagulation Defects	L&D Pre-Delivery
<input type="checkbox"/> Other Pulmonary Embolism and Infarction	L&D Pre-Delivery
<input type="checkbox"/> Phlebitis and Thrombophlebitis	L&D Pre-Delivery
<input type="checkbox"/> Protein-calorie Malnutrition	L&D Pre-Delivery
<input type="checkbox"/> Psychosis, unspecified psychosis type	L&D Pre-Delivery
<input type="checkbox"/> Schizophrenia Disorder	L&D Pre-Delivery
<input type="checkbox"/> Sepsis	L&D Pre-Delivery
<input type="checkbox"/> Septic Shock	L&D Pre-Delivery
<input type="checkbox"/> Septicemia	L&D Pre-Delivery
<input type="checkbox"/> Type II or Unspecified Type Diabetes Mellitus with Mention of Complication, Not Stated as Uncontrolled	L&D Pre-Delivery
<input type="checkbox"/> Urinary Tract Infection, Site Not Specified	L&D Pre-Delivery
<input type="checkbox"/> Present on Admission-History of preterm premature rupture of membranes	L&D Pre-Delivery

Nursing

Activity

<input type="checkbox"/> Strict bed rest	Routine, Until discontinued, Starting S, L&D Pre-Delivery
<input type="checkbox"/> Bed rest with bathroom privileges	Routine, Until discontinued, Starting S Bathroom Privileges: with bathroom privileges L&D Pre-Delivery
<input type="checkbox"/> Bed rest with bathroom privileges	Routine, Until discontinued, Starting S Bathroom Privileges: with bathroom privileges Privileges for bowel movement only, L&D Pre-Delivery
<input type="checkbox"/> Activity as tolerated	Routine, Until discontinued, Starting S Specify: Activity as tolerated L&D Pre-Delivery

[] Patient may shower	Routine, Daily Specify: Additional modifier: L&D Pre-Delivery
Vital Signs	
[] Vital signs	Routine, Every 4 hours, L&D Pre-Delivery
[] Vital signs	Routine, Every 8 hours, L&D Pre-Delivery
[] Measure blood pressure	Routine, Every 15 min Serial blood pressures every 15 minutes x *** then every *** hours, L&D Pre-Delivery
Nursing Care	
[] Daily weights	Routine, Daily, L&D Pre-Delivery
[] Toileting - Bedside commode	Routine, Until discontinued, Starting S Specify: Bedside commode Additional modifier: L&D Pre-Delivery
[] Intake and output	Routine, Every 8 hours, L&D Pre-Delivery
[] Strict intake and output	Routine, Every hour, L&D Pre-Delivery
[] Insert and maintain Foley	
[] Insert Foley catheter	Routine, Once Type: Size: Urinometer needed: L&D Pre-Delivery
[] Foley Catheter Care	Routine, Until discontinued, Starting S Orders: Maintain L&D Pre-Delivery
[] Sterile vaginal exam	Routine, Once, L&D Pre-Delivery
[] Monitor fetal heart tones	Routine, Every shift Type: For 1 hour every shift, L&D Pre-Delivery
[] Monitor fetal heart tones	Routine, Daily Type: Every day with Doppler, L&D Pre-Delivery
[] Monitor fetal heart tones	Routine, Continuous Type: Continuous L&D Pre-Delivery
[] Fetal nonstress test	Routine, Every shift, L&D Pre-Delivery
[] Tocometry	Routine, Until discontinued, Starting S Type: Continuous L&D Pre-Delivery
Diet	
[] NPO	Diet effective now, Starting S NPO: Pre-Operative fasting options: L&D Pre-Delivery
[] NPO with ice chips	Diet effective now, Starting S NPO: Except Ice chips Pre-Operative fasting options: 1/2 cup per hour, L&D Pre-Delivery
[] Diet - Clear liquids	Diet effective now, Starting S Diet(s): Clear Liquids Advance Diet as Tolerated? Liquid Consistency: Fluid Restriction: Foods to Avoid: L&D Pre-Delivery

Diet - Regular

Diet effective now, Starting S
Diet(s): Regular
Advance Diet as Tolerated?
Liquid Consistency:
Fluid Restriction:
Foods to Avoid:
L&D Pre-Delivery

Consent

Complete Consent Form

Routine, Once
Consent For: Delivery
Procedure: Vaginal delivery of fetus and placenta with possible cesarean section, possible episiotomy, possible use of vacuum/forceps, and possible use of blood products.
Diagnosis/Condition:
Physician:
L&D Pre-Delivery

IV Fluids

Maintenance IV Fluids

<input checked="" type="checkbox"/> lactated ringers bolus	intravenous, once, For 1 Doses, L&D Pre-Delivery
<input checked="" type="checkbox"/> lactated Ringer's infusion	125 mL/hr, intravenous, continuous, L&D Pre-Delivery
<input type="checkbox"/> dextrose 5 % and lactated Ringer's infusion	125 mL/hr, intravenous, continuous, L&D Pre-Delivery
<input type="checkbox"/> sodium chloride 0.45 % infusion	125 mL/hr, intravenous, continuous, L&D Pre-Delivery

Peripheral IV Access

<input checked="" type="checkbox"/> Initiate and maintain IV	
<input checked="" type="checkbox"/> Insert peripheral IV	Routine, Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> sodium chloride 0.9 % flush	10 mL, intravenous, every 12 hours scheduled, L&D Pre-Delivery if IV is saline locked
<input checked="" type="checkbox"/> sodium chloride 0.9 % flush	10 mL, intravenous, PRN, line care, L&D Pre-Delivery

Medications

Medications

<input type="checkbox"/> betamethasone acet & sod phos (CELESTONE) injection	12 mg, intramuscular, every 24 hours, For 2 Doses, L&D Pre-Delivery
<input type="checkbox"/> multivitamin prenatal	1 tablet, oral, daily, L&D Pre-Delivery
<input type="checkbox"/> ferrous sulfate tablet	325 mg, oral, daily, L&D Pre-Delivery

Antibiotics

Please select the appropriate indication(s):

<input type="checkbox"/> Asymptomatic Bacteriuria or Acute Cystitis (Single Response)	
<input type="checkbox"/> nitrofurantoin (MACRODANTIN) capsule - USE ONLY DURING SECOND OR THIRD TRIMESTER	100 mg, oral, 2 times daily, L&D Pre-Delivery USE ONLY DURING SECOND OR THIRD TRIMESTER. Reason for Therapy: Bacterial Infection Suspected Indication: Uro/Genital
<input type="checkbox"/> cefuroxime (CEFTIN) tablet	500 mg, oral, every 12 hours Reason for Therapy: Bacterial Infection Suspected Indication: Uro/Genital
<input type="checkbox"/> fosfomycin (MONUROL) packet	3 g, oral, once, For 1 Doses, L&D Pre-Delivery Reason for Therapy: Bacterial Infection Documented Indication: Uro/Genital Indication: Uro/Genital
<input type="checkbox"/> cefpodoxime (VANTIN) tablet	100 mg, oral, every 12 hours, L&D Pre-Delivery Reason for Therapy: Bacterial Infection Documented Indication: Uro/Genital
<input type="checkbox"/> Acute Pyelonephritis (Single Response)	

Does your patient have a SEVERE penicillin or cephalosporin allergy ?

<input type="checkbox"/> No (Single Response)	
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, every 24 hours, L&D Pre-Delivery Reason for Therapy: Bacterial Infection Documented Indication: Uro/Genital
<input type="checkbox"/> ceFEPime (MAXIPIIME) IV	1 g, intravenous, every 8 hours, L&D Pre-Delivery Reason for Therapy: Bacterial Infection Documented Indication: Uro/Genital
<input type="checkbox"/> If history of multi-drug resistant infection, severe pyelonephritis with an impaired immune system and/or incomplete urinary drainage (Single Response)	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) IV	3.375 g, intravenous, every 6 hours, L&D Pre-Delivery Reason for Therapy: Bacterial Infection Suspected Indication: Uro/Genital
<input type="checkbox"/> meropenem (MERREM) IV	500 mg, intravenous, every 6 hours, L&D Pre-Delivery Reason for Therapy: Bacterial Infection Suspected Indication: Uro/Genital
<input type="checkbox"/> Yes (Single Response)	
<input type="checkbox"/> aztreonam (AZACTAM) IV	1 g, intravenous, every 8 hours, L&D Pre-Delivery Reason for Therapy: Bacterial Infection Documented Indication: Uro/Genital

Gastrointestinal Care

<input type="checkbox"/> docusate sodium (COLACE) capsule	100 mg, oral, 2 times daily, L&D Pre-Delivery
<input type="checkbox"/> sennosides-docusate sodium (SENOKOT-S) 8.6-50 mg per tablet	1 tablet, oral, nightly PRN, constipation, L&D Pre-Delivery
<input type="checkbox"/> aluminum-magnesium hydroxide (MAALOX) suspension	30 mL, oral, 3 times daily with meals, L&D Pre-Delivery
<input type="checkbox"/> calcium carbonate (TUMS) chewable tablet	500 mg, oral, 3 times daily, L&D Pre-Delivery

Tocolytic

<input type="checkbox"/> Option 1: terbutaline (BRETHINE) IV Initial Doses and Oral Maintenance Dose	"Followed by" Linked Panel
<input type="checkbox"/> Initial Doses - terbutaline (BRETHINE) injection - 1st dose	0.25 mg, subcutaneous, once, For 1 Doses, L&D Pre-Delivery Stop at second dose if effective. Hold if maternal heart rate is GREATER than 120.
<input type="checkbox"/> terbutaline (BRETHINE) injection - 2nd dose	0.25 mg, subcutaneous, once, Starting H+20 Minutes, For 1 Doses, L&D Pre-Delivery Stop at second dose if effective. Hold if maternal heart rate is GREATER than 120.
<input type="checkbox"/> terbutaline (BRETHINE) injection - 3rd dose	0.25 mg, subcutaneous, once, Starting H+40 Minutes, For 1 Doses, L&D Pre-Delivery Hold if maternal heart rate is GREATER than 120.
<input type="checkbox"/> Maintenance Dose - terbutaline (BRETHINE) tablet	5 mg, oral, every 4 hours, Starting H+41 Minutes, L&D Pre-Delivery Hold if maternal heart rate is GREATER than 120.
<input type="checkbox"/> NIFEdipine (PROCARDIA) capsule	10 mg, oral, every 4 hours PRN, high blood pressure, for Tocolysis, L&D Pre-Delivery Maximum Dose of 160 mg/day. HOLD parameters for this order: Hold Parameters requested HOLD for: Systolic BP LESS than 100 mmHg HOLD for: Contact Physician if:
<input type="checkbox"/> albuterol (PROVENTIL) nebulizer solution	2.5 mg, nebulization, every 4 hours PRN, wheezing, shortness of breath, L&D Pre-Delivery Aerosol Delivery Device:

Antihypertensives

[] methyldopa (ALDOMET) tablet	250 mg, oral, every 8 hours scheduled, L&D Pre-Delivery HOLD parameters for this order: Hold Parameters requested HOLD for: Systolic BP LESS than 100 mmHg, Heart Rate LESS than 50 bpm HOLD for: Heart Rate LESS than 50 bpm Contact Physician if:
[] labetalol (NORMODYNE) tablet	200 mg, oral, 2 times daily at 0600, 1800, L&D Pre-Delivery HOLD parameters for this order: Hold Parameters requested HOLD for: Systolic BP LESS than 100 mmHg, Heart Rate LESS than 50 bpm HOLD for: Contact Physician if: Systolic BP GREATER than or EQUAL to 160 mmHg or Diastolic BP GREATER than 100 mmHg.
[] NIFEdipine XL (PROCARDIA XL) 24 hr tablet	30 mg, oral, daily, L&D Pre-Delivery HOLD parameters for this order: Hold Parameters requested HOLD for: Systolic BP LESS than 100 mmHg HOLD for: Contact Physician if: Systolic BP GREATER than or EQUAL to 160 mmHg or Diastolic BP GREATER than 100 mmHg.

magnesium sulfate Bolus and Maintenance Options (Single Response)

DISCONTINUE INFUSION IF SYMPTOMS OF MAGNESIUM TOXICITY ARE PRESENT.

() Monitor for signs/symptoms of Magnesium Toxicity: decreased or absent DTRs, decreased or changes in level of consciousness, decreased respiratory rate, oliguria (less than 35 milliliters/hour), shortness of breath or tightness in chest	Routine, Until discontinued, Starting S, L&D Pre-Delivery
() Magnesium Level	Once After loading dose (MD to enter repeat order information), L&D Pre-Delivery
() Magnesium Level	Once (MD to enter repeat order information), L&D Pre-Delivery
() magnesium sulfate 4 gm Loading and Maintenance Infusion	

DISCONTINUE INFUSION IF SYMPTOMS OF MAGNESIUM TOXICITY ARE PRESENT.

[] Monitor for signs/symptoms of Magnesium Toxicity: decreased or absent DTRs, decreased or changes in level of consciousness, decreased respiratory rate, oliguria (less than 35 milliliters/hour), shortness of breath or tightness in chest	Routine, Until discontinued, Starting S, L&D Pre-Delivery
[] Magnesium level	Once After loading dose (MD to enter repeat order information), L&D Pre-Delivery
[] Magnesium level	Once (MD to enter repeat order information), L&D Pre-Delivery
[] magnesium sulfate 4 gm IV Loading Dose + Maintenance infusion	"Followed by" Linked Panel
[] Loading Dose - magnesium sulfate 4 grams IV bolus from bag	4 g, intravenous, for 30 Minutes, once, For 1 Doses Loading Dose - Bolus from Bag
[] Maintenance Dose - magnesium sulfate IV	intravenous, continuous, Starting H+30 Minutes, L&D Pre-Delivery

() magnesium sulfate 6 gm Loading and Maintenance
Infusion

DISCONTINUE INFUSION IF SYMPTOMS OF MAGNESIUM TOXICITY ARE PRESENT.

[] Monitor for signs/symptoms of Magnesium Toxicity: decreased or absent DTRs, decreased or changes in level of consciousness, decreased respiratory rate, oliguria (less than 30 milliliters/hour), shortness of breath or tightness in chest	Routine, Until discontinued, Starting S, L&D Pre-Delivery
[] Magnesium level	Once After loading dose (MD to enter repeat order information), L&D Pre-Delivery
[] Magnesium level	Once (MD to enter repeat order information)
[] magnesium sulfate 6 gm IV Loading Dose + Maintenance infusion	"Followed by" Linked Panel
[] Loading Dose - magnesium sulfate 6 grams IV bolus from bag	6 g, intravenous, for 30 Minutes, once, For 1 Doses Loading Dose - Bolus from Bag
[] Maintenance Dose - magnesium sulfate IV	intravenous, continuous, Starting H+30 Minutes, L&D Pre-Delivery

Medications PRN

PRN Medications

[X] PRN Antipyretics (Single Response)	
() acetaminophen (TYLENOL) tablet	oral, every 6 hours PRN, fever, For temperature GREATER than 100.3, L&D Pre-Delivery
[X] PRN Antihypertensives	
[] For blood pressure GREATER than or EQUAL to 160mmHg - labetalol (NORMODYNE) tablet	200 mg, oral, 2 times daily PRN, high blood pressure, L&D Pre-Delivery For Systolic blood pressure GREATER than or EQUAL to 160mmHg. DO NOT give incremental dosing as this will compromise fetal circulation. HOLD parameters for this order: Contact Physician if: Systolic BP GREATER than 160mmHg and Diastolic BP GREATER than 110 mmHg
[] hydrALAZINE (APRESOLINE) tablet	5 mg, oral, every 6 hours PRN, high blood pressure, L&D Pre-Delivery For blood pressure GREATER than 160 mmHg. DO NOT give incremental dosing as this will compromise fetal circulation. HOLD parameters for this order: Contact Physician if:
[X] PRN Gastrointestinal Care	
[] sennosides-docusate sodium (SENOKOT-S) 8.6-50 mg per tablet	1 tablet, oral, nightly PRN, constipation, L&D Pre-Delivery
[] docusate sodium (COLACE) capsule	100 mg, oral, 2 times daily PRN, constipation, L&D Pre-Delivery
[] alum-mag hydroxide-simeth (MAALOX MAX) 400-400-40 mg/5 mL suspension	30 mL, oral, every 3 hours PRN, indigestion, L&D Pre-Delivery

Antiemetics - HMH, HMSJ, HMW, HMSTC, HMTW Only

[X] ondansetron (ZOFTRAN) IV or Oral (Selection Required)	"Or" Linked Panel
[X] ondansetron ODT (ZOFTRAN-ODT) disintegrating tablet	4 mg, oral, every 8 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if patient is able to tolerate oral medication.
[X] ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, L&D Pre-Delivery 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, every 6 hours PRN, nausea, vomiting, L&D Pre-Delivery 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, L&D Pre-Delivery 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, L&D Pre-Delivery Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.

Antiemetics - HMSL, HMWB Only

"Or" Linked Panel	
<input checked="" type="checkbox"/> ondansetron (ZOFTRAN) IV or Oral (Selection Required)	4 mg, oral, every 8 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if patient is able to tolerate oral medication.
<input checked="" type="checkbox"/> ondansetron ODT (ZOFTRAN-ODT) disintegrating tablet	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
<input checked="" type="checkbox"/> ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, at 60 mL/hr, for 20 Minutes, every 6 hours PRN, nausea, vomiting, L&D Pre-Delivery 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.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) IV or Oral or Rectal	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) tablet	12.5 mg, rectal, every 6 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) suppository	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.

Antiemetics - HMSTJ Only

"Or" Linked Panel	
<input checked="" type="checkbox"/> ondansetron (ZOFTRAN) IV or Oral (Selection Required)	4 mg, oral, every 8 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if patient is able to tolerate oral medication.
<input checked="" type="checkbox"/> ondansetron ODT (ZOFTRAN-ODT) disintegrating tablet	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if patient is able to tolerate oral medication.
<input checked="" type="checkbox"/> ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) IVPB or Oral or Rectal	12.5 mg, intravenous, for 30 Minutes, every 6 hours PRN, nausea, vomiting, L&D Pre-Delivery 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.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) tablet	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) suppository	12.5 mg, rectal, every 6 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.

Insomnia: Zolpidem (Single Response)

(X) zolpidem (AMBIEN) tablet	5 mg, oral, nightly PRN, sleep, L&D Pre-Delivery
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VTE

DVT Risk and Prophylaxis Tool (Single Response) (Selection Required)

URL: "\appt1.pdf"

() Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis Routine, Once
No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication.
Therapy for the following:

() LOW Risk of DVT (Selection Required)

Low Risk Definition

Age less than 60 years and NO other VTE risk factors

[] Low Risk (Single Response) (Selection Required)

() Low risk of VTE

Routine, Once

Low risk: Due to low risk, no VTE prophylaxis is needed. Will encourage early ambulation

() MODERATE Risk of DVT - Surgical (Selection Required)

() Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
() HIGH Risk of DVT - Surgical (Selection Required)	
High Risk Definition	
Both pharmacologic AND mechanical prophylaxis must be addressed.	
One or more of the following medical conditions:	
Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)	
Severe fracture of hip, pelvis or leg	
Acute spinal cord injury with paresis	
Multiple major traumas	
Abdominal or pelvic surgery for CANCER	
Acute ischemic stroke	
History of PE	
<input type="checkbox"/> High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)	
() Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
() enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
() enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600, Starting S+1
() patients with CrCl LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600, Starting S+1 For Patients with CrCl LESS than 30 mL/min
() patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min
() patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min
() fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1 If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
() heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM
() heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
() warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1 Indication:
() Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
() Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
() Place/Maintain sequential compression device continuous	Routine, Continuous
() HIGH Risk of DVT - Non-Surgical (Selection Required)	

High Risk Definition

Both pharmacologic AND mechanical prophylaxis must be addressed.

One or more of the following medical conditions:

Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)
Severe fracture of hip, pelvis or leg
Acute spinal cord injury with paresis
Multiple major traumas
Abdominal or pelvic surgery for CANCER
Acute ischemic stroke
History of PE

<input type="checkbox"/> High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)	
() Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
() enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
() enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 1700, Starting S
() patients with CrCl LESS than 30 mL/min	30 mg, subcutaneous, daily at 1700, Starting S For Patients with CrCl LESS than 30 mL/min
() patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily, Starting S For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min
() patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily, Starting S For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min
() fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
() heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours
() heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
() warfarin (COUMADIN) tablet	oral, daily at 1700 Indication:
() Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
() Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
() Place/Maintain sequential compression device continuous	Routine, Continuous
() HIGH Risk of DVT - Surgical (Hip/Knee) (Selection Required)	

High Risk Definition

Both pharmacologic AND mechanical prophylaxis must be addressed.

One or more of the following medical conditions:

Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)

Severe fracture of hip, pelvis or leg

Acute spinal cord injury with paresis

Multiple major traumas

Abdominal or pelvic surgery for CANCER

Acute ischemic stroke

History of PE

High Risk (Selection Required)

High risk of VTE

Routine, Once

High Risk Pharmacological Prophylaxis - Hip or Knee

(Arthroplasty) Surgical Patient (Single Response)

(Selection Required)

() Contraindications exist for pharmacologic prophylaxis

Routine, Once

No pharmacologic VTE prophylaxis due to the following contraindication(s):

() apixaban (ELIQUIS) tablet

2.5 mg, oral, every 12 hours, Starting S+1

Indications:

() aspirin chewable tablet

162 mg, oral, daily, Starting S+1

() aspirin (ECOTRIN) enteric coated tablet

162 mg, oral, daily, Starting S+1

() enoxaparin (LOVENOX) injection (Single Response)
(Selection Required)

() enoxaparin (LOVENOX) syringe

40 mg, subcutaneous, daily at 0600, Starting S+1

() enoxaparin (LOVENOX) syringe

30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1

() enoxaparin (LOVENOX) syringe - For Patients with CrCl LESS than 30 mL/min

30 mg, subcutaneous, daily at 0600, Starting S+1

For Patients with CrCl LESS than 30 mL/min.

() enoxaparin (LOVENOX) syringe - For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min

30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1

For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min.

() enoxaparin (LOVENOX) syringe - For Patients weight between 140 kg or GREATER and CrCl GREATER than 30 mL/min

40 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1

For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min

() fondaparinux (ARIXTRA) injection

2.5 mg, subcutaneous, daily, Starting S+1

If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min

This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):

() heparin (porcine) injection

5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM

() heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)

5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM

Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.

() rivaroxaban (XARELTO) tablet for hip or knee arthroplasty planned during this admission

10 mg, oral, daily at 0600 (TIME CRITICAL), Starting S+1

To be Given on Post Op Day 1.

Indications:

() warfarin (COUMADIN) tablet

oral, daily at 1700, Starting S+1

Indication:

() Pharmacy consult to manage warfarin (COUMADIN)

STAT, Until discontinued, Starting S

Indication:

Mechanical Prophylaxis (Single Response) (Selection Required)

() Contraindications exist for mechanical prophylaxis

Routine, Once

No mechanical VTE prophylaxis due to the following contraindication(s):

() Place/Maintain sequential compression device continuous

Routine, Continuous

Labs

Hematology/Coagulation

[] CBC	Once, L&D Pre-Delivery
[] CBC with differential	Once, L&D Pre-Delivery
[] D-dimer, quantitative	Once, L&D Pre-Delivery
[] Fibrinogen	Once, L&D Pre-Delivery
[] Prothrombin time with INR	Once, L&D Pre-Delivery
[] Partial thromboplastin time	Once, L&D Pre-Delivery

Chemistry HMH

[] Bedside glucose	Routine, Once For 1 Occurrences On Admission, L&D Pre-Delivery
[] Bedside glucose	Routine, Daily Fasting, L&D Pre-Delivery
[] Bedside glucose	Routine, As directed 1 hour post prandial, L&D Pre-Delivery
[] Bedside glucose	Routine, As directed 2 hours post prandial, L&D Pre-Delivery
[] Basic metabolic panel	Once, L&D Pre-Delivery
[] Comprehensive metabolic panel	Once, L&D Pre-Delivery
[] Fetal fibronectin	Once, L&D Pre-Delivery
[] Hepatitis B surface antigen	Once, L&D Pre-Delivery
[] HIV Ag/Ab combination	Once, L&D Pre-Delivery
[] Lactate dehydrogenase, LDH	Once, L&D Pre-Delivery
[] POC Amnisure	Once, L&D Pre-Delivery
[] Syphilis total antibody	Once, L&D Pre-Delivery
[X] Type and Screen, Obstetrical Patient	Once, L&D Pre-Delivery
[] Uric acid	Once, L&D Pre-Delivery
[] Urine drugs of abuse screen	Once, L&D Pre-Delivery
[] Urinalysis with microscopic	Once Clean catch midstream, L&D Pre-Delivery
[] Urinalysis with microscopic	Once Catheter, L&D Pre-Delivery

Chemistry HMWB

[] Bedside glucose	Routine, Once For 1 Occurrences On Admission, L&D Pre-Delivery
[] Bedside glucose	Routine, Daily Fasting, L&D Pre-Delivery
[] Bedside glucose	Routine, As directed 1 hour post prandial, L&D Pre-Delivery
[] Bedside glucose	Routine, As directed 2 hours post prandial, L&D Pre-Delivery
[] Basic metabolic panel	Once, L&D Pre-Delivery
[] Comprehensive metabolic panel	Once, L&D Pre-Delivery
[] Fetal fibronectin	Once, L&D Pre-Delivery
[] Hepatitis B surface antigen	Once, L&D Pre-Delivery
[] HIV 1, 2 antibody	Once, L&D Pre-Delivery
[] Lactate dehydrogenase, LDH	Once, L&D Pre-Delivery
[] POC Amnisure	Once, L&D Pre-Delivery
[] Syphilis total antibody	Once, L&D Pre-Delivery
[X] Type and Screen, Obstetrical Patient	Once, L&D Pre-Delivery
[] Uric acid	Once, L&D Pre-Delivery
[] Urine drugs of abuse screen	Once, L&D Pre-Delivery
[] Urinalysis with microscopic	Once Clean catch midstream, L&D Pre-Delivery

<input type="checkbox"/> Urinalysis with microscopic	Once Catheter, L&D Pre-Delivery
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Chemistry HMLM HMW

<input type="checkbox"/> Bedside glucose	Routine, Once For 1 Occurrences On Admission, L&D Pre-Delivery
<input type="checkbox"/> Bedside glucose	Routine, Daily Fasting, L&D Pre-Delivery
<input type="checkbox"/> Bedside glucose	Routine, As directed 1 hour post prandial, L&D Pre-Delivery
<input type="checkbox"/> Bedside glucose	Routine, As directed 2 hours post prandial, L&D Pre-Delivery
<input type="checkbox"/> Basic metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/> Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/> Fetal fibronectin	Once, L&D Pre-Delivery
<input type="checkbox"/> Fern test	Once, Vaginal fluid, L&D Pre-Delivery
<input type="checkbox"/> Hepatitis B surface antigen	Once, L&D Pre-Delivery
<input type="checkbox"/> Rapid HIV 1 & 2	Once, L&D Pre-Delivery
<input type="checkbox"/> Lactate dehydrogenase, LDH	Once, L&D Pre-Delivery
<input type="checkbox"/> Syphilis total antibody	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> Type and Screen, Obstetrical Patient	Once, L&D Pre-Delivery
<input type="checkbox"/> Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/> Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input type="checkbox"/> Urinalysis with microscopic	Once Clean catch midstream, L&D Pre-Delivery
<input type="checkbox"/> Urinalysis with microscopic	Once Catheter, L&D Pre-Delivery

Chemistry HMSJ, HMTW

<input type="checkbox"/> Bedside glucose	Routine, Once For 1 Occurrences On Admission, L&D Pre-Delivery
<input type="checkbox"/> Bedside glucose	Routine, Daily Fasting, L&D Pre-Delivery
<input type="checkbox"/> Bedside glucose	Routine, As directed 1 hour post prandial, L&D Pre-Delivery
<input type="checkbox"/> Bedside glucose	Routine, As directed 2 hours post prandial, L&D Pre-Delivery
<input type="checkbox"/> Basic metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/> Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/> Fetal fibronectin	Once, L&D Pre-Delivery
<input type="checkbox"/> Fern test	Once, Vaginal fluid, L&D Pre-Delivery
<input type="checkbox"/> Hepatitis B surface antigen	Once, L&D Pre-Delivery
<input type="checkbox"/> HIV 1, 2 antibody	Once, L&D Pre-Delivery
<input type="checkbox"/> Lactate dehydrogenase, LDH	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> Type and Screen, Obstetrical Patient	Once, L&D Pre-Delivery
<input type="checkbox"/> Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/> Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input type="checkbox"/> Urinalysis with microscopic	Once Clean catch midstream, L&D Pre-Delivery
<input type="checkbox"/> Urinalysis with microscopic	Once Catheter, L&D Pre-Delivery

Chemistry - HMSTJ

<input type="checkbox"/> Bedside glucose	Routine, Once For 1 Occurrences On Admission, L&D Pre-Delivery
<input type="checkbox"/> Bedside glucose	Routine, Daily Fasting, L&D Pre-Delivery
<input type="checkbox"/> Bedside glucose	Routine, As directed 1 hour post prandial, L&D Pre-Delivery

[] Bedside glucose	Routine, As directed 2 hours post prandial, L&D Pre-Delivery
[] Basic metabolic panel	Once, L&D Pre-Delivery
[] Comprehensive metabolic panel	Once, L&D Pre-Delivery
[] Fetal fibronectin	Once, L&D Pre-Delivery
[] Fern test	Once, Vaginal fluid, L&D Pre-Delivery
[] Hepatitis B surface antigen	Once, L&D Pre-Delivery
[] HIV 1, 2 antibody	Once, L&D Pre-Delivery
[] Lactate dehydrogenase, LDH	Once, L&D Pre-Delivery
[X] Type and Screen	Once, L&D Pre-Delivery
[] Uric acid	Once, L&D Pre-Delivery
[] Urine drugs of abuse screen	Once, L&D Pre-Delivery
[] Urinalysis with microscopic	Once Clean catch midstream, L&D Pre-Delivery
[] Urinalysis with microscopic	Once Catheter, L&D Pre-Delivery

Microbiology

[] Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: L&D Pre-Delivery
[] Neisseria gonorrhoeae by PCR	Once Urine is the only acceptable source for patients less than or equal to 13 years old. Specimen source: Urine Specimen Source: Specimen Site: L&D Pre-Delivery
[] Chlamydia trachomatis by PCR	Once Urine is the only acceptable source for patients less than or equal to 13 years old. Specimen source: Urine Specimen Source: Specimen Site: L&D Pre-Delivery
[] Beta Strep Screen Culture with Lim Broth	Once, Vaginal, L&D Pre-Delivery

Pre-Eclamptic Lab Panel

[] Pre-Eclamptic Lab Panel	
[] CBC with differential	Once, L&D Pre-Delivery
[] Comprehensive metabolic panel	Once, L&D Pre-Delivery
[] Prothrombin time with INR	Once, L&D Pre-Delivery
[] Partial thromboplastin time	Once, L&D Pre-Delivery
[] Fibrinogen	Once, L&D Pre-Delivery
[] Uric acid	Once, L&D Pre-Delivery
[] LDH	Once, L&D Pre-Delivery
[] Urine Protein and Creatinine	
[] Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
[] Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery

24 Hour urine

[X] Creatinine clearance, urine, 24 hour	Once, L&D Pre-Delivery
[X] Protein, urine, 24 hour	Once, L&D Pre-Delivery

Imaging

Ultrasound

[] US Fetal Biophysical Profile	Routine, 1 time imaging For 1 , L&D Pre-Delivery
[] US Pregnancy Greater Than 14 Weeks	Routine, 1 time imaging For 1 , L&D Pre-Delivery
[] Ultrasound OB limited 1 + fetuses	Routine, 1 time imaging For 1 , L&D Pre-Delivery

Consults

For Physician Consult orders use sidebar

Physician Consults

<input type="checkbox"/> Consult Anesthesiology	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated? L&D Pre-Delivery
<input type="checkbox"/> Consult Maternal and Fetal Medicine	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated? L&D Pre-Delivery
<input type="checkbox"/> Consult Neonatology	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated? L&D Pre-Delivery

Ancillary consults

<input type="checkbox"/> Consult to PT eval and treat	Reasons for referral to Physical Therapy (mark all applicable): Are there any restrictions for positioning or mobility? Please provide safe ranges for HR, BP, O2 saturation(if values are very abnormal): Weight Bearing Status: L&D Pre-Delivery
<input type="checkbox"/> Consult to Social Work	Reason for Consult: L&D Pre-Delivery
<input type="checkbox"/> Consult to Spiritual Care	Reason for consult? L&D Pre-Delivery