

TPN Medications

Peripheral TPN (HMSL Only) (Single Response)

() D10% Neonatal Standard Starter TPN	intravenous, for 24 Hours, daily at 1500 Indication:
() Neonate Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, daily at 1500 Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, daily at 1500 Indication:

Peripheral TPN (HMH, HMStC Only) (Single Response)

(X) Peripheral Standard Starter (Single Response)

Standard Starter TPN - For immediate use. Contains no MTE, MVI, or cysteine. No changes made to Standard Starter

() D5% Neonatal Standard Starter TPN	intravenous, for 24 Hours, daily at 1500 Indication:
() D10% Neonatal Standard Starter TPN	intravenous, for 24 Hours, daily at 1500 Indication:
() Neonatal Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, daily at 1500 Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, daily at 1500 Indication:

Peripheral TPN (HMSJ Only) (Single Response)

(X) Peripheral Standard Starter (Single Response)

Standard Starter TPN - For immediate use. Contains no MTE, MVI, or cysteine. No changes made to Standard Starter

() D5% Neonatal Standard Starter TPN	intravenous, for 24 Hours, daily at 2000 Indication:
() D10% Neonatal Standard Starter TPN	intravenous, for 24 Hours, daily at 2000 Indication:
() Neonatal Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, daily at 2000 Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, daily at 2000 Indication:

Peripheral TPN (HMWB Only) (Single Response)

(X) Peripheral TPN (HMWB Only) (Single Response)

Standard Starter TPN - For immediate use. Contains no MTE, MVI, or cysteine. No changes made to Standard Starter

() D5% Neonatal Standard Starter TPN	intravenous, for 24 Hours, continuous neo TPN, S at 3:00 PM Indication:
() D10% Neonatal Standard Starter TPN	intravenous, for 24 Hours, continuous neo TPN, S at 3:00 PM Indication:
() Neonate Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, continuous neo TPN, S at 3:00 PM Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, continuous neo TPN, S at 3:00 PM Indication:

Peripheral TPN (HMW, HMTW Only) (Single Response)

(X) Peripheral Standard Starter (Single Response)

Standard Starter TPN - For immediate use. Contains no MTE, MVI, or cysteine. No changes made to Standard Starter

() Neonatal Premix Starter TPN (AA3% D5W Calcium 0.75 mmol/100 mL Heparin 0.5 Unit/mL) infusion	intravenous, for 24 Hours, daily at 2000 Indication:
() Neonatal Premix Starter TPN (AA3% D10W Calcium 0.75 mmol/100 mL Heparin 0.5 Unit/mL) infusion	intravenous, daily at 2000 Indication:
() Neonatal Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, daily at 2000 Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, daily at 2000 Indication:

Peripheral TPN (HMStJ Only) (Single Response)

() Neonatal Premix Starter TPN AA3% D10W Calcium 3mM Heparin 1 Units/mL	intravenous, for 24 Hours, daily at 2000 Indication:
() Neonate Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, daily at 2000 Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, daily at 2000 Indication:

Central TPN (HMSL Only) (Single Response)

() D10% Neonatal Standard Starter TPN	intravenous, for 24 Hours, daily at 1500 Indication:
() Neonate Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, daily at 1500 Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, daily at 1500 Indication:

Central TPN (HMH, HMStC Only) (Single Response)

(X) Central Standard Starter (Single Response)	Standard Starter TPN - For immediate use. Contains no MTE, MVI, or cysteine. No changes made to Standard Starter
() D5% Neonatal Standard Starter TPN	intravenous, for 24 Hours, daily at 1500 Indication:
() D10% Neonatal Standard Starter TPN	intravenous, for 24 Hours, daily at 1500 Indication:
() Neonatal Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, daily at 1500 Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, daily at 1500 Indication:

Central TPN (HMSJ Only) (Single Response)

(X) Central Standard Starter (Single Response)	Standard Starter TPN - For immediate use. Contains no MTE, MVI, or cysteine. No changes made to Standard Starter
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() Neonatal Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, daily at 2000 Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, daily at 2000 Indication:

Central TPN (HMWB Only) (Single Response)

(X) Central Standard Starter (Single Response)	Standard Starter TPN - For immediate use. Contains no MTE, MVI, or cysteine. No changes made to Standard Starter
() D5% Neonatal Standard Starter TPN	intravenous, for 24 Hours, continuous neo TPN, S at 3:00 PM Indication:

() D10% Neonatal Standard Starter TPN	intravenous, for 24 Hours, continuous neo TPN, S at 3:00 PM Indication:
() Neonate Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, continuous neo TPN, S at 3:00 PM Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, continuous neo TPN, S at 3:00 PM Indication:

Central TPN (HMStJ ONLY) (Single Response)

() Neonatal Premix Starter TPN AA3% D10W Calcium 3mM Heparin 1 Units/mL	intravenous, for 24 Hours, daily at 2000 Indication:
() Neonate Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, daily at 2000 Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, daily at 2000 Indication:

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() Neonatal Premix Starter TPN (AA3% D10W Calcium 0.75 mmol/100 mL Heparin 0.5 Unit/mL) infusion	intravenous, daily at 2000 Indication:
() Neonatal Premature TPN (LESS than 2.5 kg)	intravenous, for 24 Hours, daily at 2000 Indication:
() Neonatal Infant TPN (0-1 year)	intravenous, for 24 Hours, daily at 2000 Indication:

Lipids (HMH, HMSL, HMSTC, HMTW Only)

[] neonatal fat emulsion 20% (INTRALIPID,LIPOSYN) infusion	intravenous, for 24 Hours, daily at 1500
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Lipids (HMWB only)

[] neonatal fat emulsion 20% (INTRALIPID,LIPOSYN) infusion	intravenous, for 24 Hours, continuous neo TPN, S at 3:00 PM
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Lipids (HMW, HMSJ, HMSTJ ONLY)

[] neonatal fat emulsion 20% (INTRALIPID,LIPOSYN) infusion	intravenous, for 24 Hours, daily at 2000
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Labs

Labs Once

[] Comprehensive metabolic panel	Once For 1 Occurrences
[] Basic metabolic panel	Once For 1 Occurrences
[] Calcium level	Once For 1 Occurrences
[] Magnesium	Once For 1 Occurrences
[] Phosphorus	Once For 1 Occurrences
[] Alkaline phosphatase	Once For 1 Occurrences
[] ALT (SGPT)	Once For 1 Occurrences
[] Bilirubin direct	Once For 1 Occurrences
[] Prealbumin level	Once For 1 Occurrences
[] Albumin level	Once For 1 Occurrences
[] Triglycerides	Once For 1 Occurrences
[] urine glucose-ketones test strip	miscellaneous, PRN At every void

