

General

Phase of Care

This order must be checked to allow group discontinuation of pre-delivery orders by nursing during post partum phase of care.

Discontinue pre-delivery orders Routine, Once, L&D Pre-Delivery

Admission Orders (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: Pregnancy
 Bed request comments:
 L&D Pre-Delivery

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

Droplet isolation status Details

Enteric isolation status Details

Precautions

Aspiration precautions L&D Pre-Delivery

Fall precautions Increased observation level needed:
 On Admission and every 8 hours, L&D Pre-Delivery

Latex precautions L&D Pre-Delivery

Seizure precautions Increased observation level needed:
 L&D Pre-Delivery

Common Present on Admission Diagnosis

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

Vital Signs

<input checked="" type="checkbox"/>	Vital signs - T/P/R/BP (per unit protocol)	Routine, Per unit protocol, L&D Pre-Delivery
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Activity

<input type="checkbox"/>	Strict bed rest	Routine, Until discontinued, Starting S, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Bed rest with bathroom privileges	Routine, Until discontinued, Starting S Bathroom Privileges: with bathroom privileges L&D Pre-Delivery
<input type="checkbox"/>	May use birthing ball	Routine, Until discontinued, Starting S, L&D Pre-Delivery
<input type="checkbox"/>	Bed rest with bathroom privileges for BM	Routine, Until discontinued, Starting S Bathroom Privileges: with bathroom privileges For BM, L&D Pre-Delivery
<input type="checkbox"/>	Activity as tolerated	Routine, Until discontinued, Starting S Specify: Activity as tolerated L&D Pre-Delivery
<input type="checkbox"/>	May use Whirlpool tub if membranes intact	Routine, Until discontinued, Starting S, L&D Pre-Delivery

Nursing Care

<input checked="" type="checkbox"/>	Apply external fetal monitor	
<input checked="" type="checkbox"/>	Monitor fetal heart tones continuous	Routine, Continuous Type: Continuous L&D Pre-Delivery

<input type="checkbox"/>	Monitor fetal heart tones intermittent	Routine, Continuous Type: Intermittent L&D Pre-Delivery
<input type="checkbox"/>	Fetal nonstress test	Routine, Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Tocometry	Routine, Until discontinued, Starting S Type: Continuous L&D Pre-Delivery
<input type="checkbox"/> Apply internal fetal monitor (FSE)		
<input type="checkbox"/>	Fetal scalp monitor	Routine, Continuous Indication: May place Fetal Scalp Electrode if unable to adequately monitor fetal heart tones and membranes are ruptured. May place if GBS positive: Yes L&D Pre-Delivery
<input type="checkbox"/>	POC Amnisure	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Sterile vaginal exam	Routine, Until discontinued, Starting S Perform sterile vaginal exam to monitor progression or if clinically indicated, L&D Pre-Delivery
<input type="checkbox"/>	For urinary retention: Assist patient to void on bedpan in upright position prior to straight cath x 1 followed by placement of indwelling urinary catheter if necessary	Routine, Until discontinued, Starting S, L&D Pre-Delivery
<input type="checkbox"/>	Straight cath	Routine, Conditional Frequency For 1 Occurrences If patient unable to void on bedpan, preferably in upright position, straight cath x 1. If patient unable to void after 1st straight cath, insert indwelling urinary catheter., L&D Pre-Delivery
<input checked="" type="checkbox"/> Insert and maintain Foley		
<input checked="" type="checkbox"/>	Insert Foley catheter	Routine, Conditional Frequency For 1 Occurrences Type: Size: Urinometer needed: If regional block and patient unable to void insert indwelling urinary catheter., L&D Pre-Delivery
<input checked="" type="checkbox"/>	Foley Catheter Care	Routine, Conditional Frequency For 1 Occurrences Orders: Maintain L&D Pre-Delivery
<input type="checkbox"/>	Patient may have epidural	Routine, Once Notify Anesthesia immediately upon patient's request and begin pre-epidural hydration, L&D Pre-Delivery
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, L&D Pre-Delivery
<input type="checkbox"/>	Place antiembolic stockings	Routine, Until discontinued, Starting S, L&D Pre-Delivery

Nursing Care

<input checked="" type="checkbox"/> Apply external fetal monitor		
<input checked="" type="checkbox"/>	Monitor fetal heart tones continuous	Routine, Continuous Type: Continuous L&D Pre-Delivery
<input type="checkbox"/>	Monitor fetal heart tones intermittent	Routine, Continuous Type: Intermittent L&D Pre-Delivery
<input type="checkbox"/>	Fetal nonstress test	Routine, Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Tocometry	Routine, Until discontinued, Starting S Type: Continuous L&D Pre-Delivery
<input type="checkbox"/> Apply internal fetal monitor (FSE)		
<input type="checkbox"/>	Fetal scalp monitor	Routine, Continuous Indication: May place Fetal Scalp Electrode if unable to adequately monitor fetal heart tones and membranes are ruptured. May place if GBS positive: Yes L&D Pre-Delivery
<input type="checkbox"/>	Amnisure	Once, Amniotic fluid, L&D Pre-Delivery

<input checked="" type="checkbox"/> Sterile vaginal exam	Routine, Until discontinued, Starting S Perform sterile vaginal exam to monitor progression or if clinically indicated, L&D Pre-Delivery
<input type="checkbox"/> For urinary retention: Assist patient to void on bedpan in upright position prior to straight cath x 1 followed by placement of indwelling urinary catheter if necessary	Routine, Until discontinued, Starting S, L&D Pre-Delivery
<input type="checkbox"/> Straight cath	Routine, Conditional Frequency For 1 Occurrences If patient unable to void on bedpan, preferably in upright position, straight cath x 1. If patient unable to void after 1st straight cath, insert indwelling urinary catheter., L&D Pre-Delivery
<input checked="" type="checkbox"/> Insert and maintain Foley	
<input checked="" type="checkbox"/> Insert Foley catheter	Routine, Conditional Frequency For 1 Occurrences Type: Size: Urinometer needed: If regional block and patient unable to void insert indwelling urinary catheter., L&D Pre-Delivery
<input checked="" type="checkbox"/> Foley Catheter Care	Routine, Conditional Frequency For 1 Occurrences Orders: Maintain L&D Pre-Delivery
<input type="checkbox"/> Patient may have epidural	Routine, Once Notify Anesthesia immediately upon patient's request and begin pre-epidural hydration, L&D Pre-Delivery
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, L&D Pre-Delivery
<input type="checkbox"/> Place antiembolic stockings	Routine, Until discontinued, Starting S, L&D Pre-Delivery
Nursing Care	
<input checked="" type="checkbox"/> Apply external fetal monitor	
<input checked="" type="checkbox"/> Monitor fetal heart tones continuous	Routine, Continuous Type: Continuous L&D Pre-Delivery
<input type="checkbox"/> Monitor fetal heart tones intermittent	Routine, Continuous Type: Intermittent L&D Pre-Delivery
<input type="checkbox"/> Fetal nonstress test	Routine, Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> Tocometry	Routine, Until discontinued, Starting S Type: Continuous L&D Pre-Delivery
<input type="checkbox"/> Apply internal fetal monitor (FSE)	
<input type="checkbox"/> Fetal scalp monitor	Routine, Continuous Indication: May place Fetal Scalp Electrode if unable to adequately monitor fetal heart tones and membranes are ruptured. May place if GBS positive: Yes L&D Pre-Delivery
<input type="checkbox"/> POC Amnisure	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> Sterile vaginal exam	Routine, Until discontinued, Starting S Perform sterile vaginal exam to monitor progression or if clinically indicated, L&D Pre-Delivery
<input type="checkbox"/> For urinary retention: Assist patient to void on bedpan in upright position prior to straight cath x 1 followed by placement of indwelling urinary catheter if necessary	Routine, Until discontinued, Starting S, L&D Pre-Delivery
<input type="checkbox"/> Straight cath	Routine, Conditional Frequency For 1 Occurrences If patient unable to void on bedpan, preferably in upright position, straight cath x 1. If patient unable to void after 1st straight cath, insert indwelling urinary catheter., L&D Pre-Delivery
<input checked="" type="checkbox"/> Insert and maintain Foley	

<input checked="" type="checkbox"/> Insert Foley catheter	Routine, Conditional Frequency For 1 Occurrences Type: Size: Urinometer needed: If regional block and patient unable to void insert indwelling urinary catheter., L&D Pre-Delivery
<input checked="" type="checkbox"/> Foley Catheter Care	Routine, Conditional Frequency For 1 Occurrences Orders: Maintain L&D Pre-Delivery
<input type="checkbox"/> Patient may have epidural	Routine, Once Notify Anesthesia immediately upon patient's request and begin pre-epidural hydration, L&D Pre-Delivery
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, L&D Pre-Delivery
<input type="checkbox"/> Place antiembolic stockings	Routine, Until discontinued, Starting S, L&D Pre-Delivery
Notify	
<input checked="" type="checkbox"/> Notify Physician for vitals:	Routine, Until discontinued, Starting S Temperature greater than: 100.3 Temperature less than: Systolic BP greater than: 160 Systolic BP less than: 80 Diastolic BP greater than: 110 Diastolic BP less than: 50 MAP less than: Heart rate greater than (BPM): Heart rate less than (BPM): Respiratory rate greater than: 24 Respiratory rate less than: 12 SpO2 less than:
<input checked="" type="checkbox"/> Notify Anesthesiologist immediately if patient requests an epidural and begin pre-epidural hydration	Routine, Until discontinued, Starting S, L&D Pre-Delivery
<input checked="" type="checkbox"/> Notify Nursery and Neonatologist to attend delivery if indicated	Routine, Until discontinued, Starting S, L&D Pre-Delivery
<input type="checkbox"/> Notify (General)	Routine, Until discontinued, Starting S, L&D Pre-Delivery
Bowel Care	
<input type="checkbox"/> Tap water enema	Routine, Once On Admission, L&D Pre-Delivery
<input type="checkbox"/> mineral oil enema	1 enema, rectal, once PRN, constipation, L&D Pre-Delivery Once on admission
Consent	
<input checked="" type="checkbox"/> Complete Consent Form	Routine, Once Consent For: Delivery Procedure: Vaginal delivery of fetus and placenta with possible cesarean section, possible episiotomy, and possible use of vacuum/forceps. Diagnosis/Condition: Physician: Risks, benefits, and alternatives (as outlined by the Texas Medical Disclosure Panel, as appears on Houston Methodist Medical/Surgical Consent forms) were discussed with patient/surrogate? L&D Pre-Delivery
Diet	
<input type="checkbox"/> NPO	Diet effective now, Starting S NPO: Pre-Operative fasting options: L&D Pre-Delivery

<input checked="" type="checkbox"/> 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
<input type="checkbox"/> 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

IV Fluids

IV Fluids

<input type="checkbox"/> lactated Ringer's bolus	1,000 mL, intravenous, for 30 Minutes, once PRN, If patient requests epidural - for epidural prehydration, L&D Pre-Delivery Notify Anesthesiologist immediately if patient requests Epidural and begin pre-epidural hydration.
<input type="checkbox"/> dextrose 5 % and lactated Ringer's infusion	125 mL/hr, intravenous, continuous
<input type="checkbox"/> lactated ringer's infusion	125 mL/hr, intravenous, continuous

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

Antibiotics (Single Response)

Does your patient have a penicillin allergy?

<input type="checkbox"/> No (Single Response)	
<input type="checkbox"/> penicillin G IVPB Loading and Maintenance Dose - Prophylaxis Regimen for GBS	"Followed by" Linked Panel
<input type="checkbox"/> Loading Dose - penicillin G (POTASSIUM) IV	5 Million Units, intravenous, for 30 Minutes, once, For 1 Doses, L&D Pre-Delivery If GBS positive Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/> Maintenance Dose - penicillin G (POTASSIUM) IV	2.5 Million Units, intravenous, for 30 Minutes, every 4 hours, Starting H+4 Hours, L&D Pre-Delivery If GBS positive Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/> ampicillin IVPB Loading and Maintenance Dose - Alternative Regimen for GBS	"Followed by" Linked Panel
<input type="checkbox"/> Loading Dose - ampicillin IV	2 g, intravenous, for 30 Minutes, once, For 1 Doses, L&D Pre-Delivery If GBS positive Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/> Maintenance Dose - ampicillin IV	1 g, intravenous, for 30 Minutes, every 4 hours, Starting H+6 Hours, L&D Pre-Delivery If GBS positive Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/> Yes (Single Response)	
<input type="checkbox"/> ceFAZolin (ANCEF) IV Loading and Maintenance Doses - if GBS Positive	"Followed by" Linked Panel
Recommended for patients NOT high risk for anaphylaxis	

[] Loading Dose - cefazolin (ANCEF) IV	2 g, intravenous, once, For 1 Doses, L&D Pre-Delivery If GBS positive Type of Therapy: New Anti-Infective Order Reason for Therapy: Medical Prophylaxis
[] Maintenance Dose - cefazolin (ANCEF) IV	1 g, intravenous, every 8 hours, L&D Pre-Delivery If GBS positive. Through delivery then discontinue. Reason for Therapy: Medical Prophylaxis
() clindamycin (CLEOCIN) IV Loading and Maintenance Doses - if GBS Positive	"Followed by" Linked Panel
Recommended ONLY for patients with high risk for penicillin anaphylaxis that are culture isolate sensitive to Clindamycin.	
[] Loading Dose - clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, once, For 1 Doses, L&D Pre-Delivery If GBS positive Reason for Therapy: Medical Prophylaxis
[] Maintenance Dose - clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, every 8 hours, L&D Pre-Delivery If GBS positive. Through delivery then discontinue. Reason for Therapy: Medical Prophylaxis
() vancomycin (VANCOCIN) IVPB	1 g, intravenous, every 12 hours, L&D Pre-Delivery If GBS positive. Ensure through delivery Reason for Therapy: Medical Prophylaxis

PRN Antihypertensives

[] For blood pressure GREATER than or EQUAL to 160 mmHg - labetalol (NORMODYNE) tablet	200 mg, oral, 2 times daily PRN, high blood pressure, For Systolic BP GREATER than 160mmHg and Diastolic BP GREATER than 110mmHg., L&D Pre-Delivery DO NOT give incremental dosing as this will compromise fetal circulation. HOLD parameters for this order: Hold Parameters requested HOLD for: HOLD for: Contact Physician if: For Systolic BP GREATER than 160mmHG and Diastolic BP GREATER than 110mmHg
[] hydrALAZINE (APRESOLINE) tablet	5 mg, oral, every 6 hours PRN, high blood pressure, For blood pressure GREATER than 160mmHG DO NOT give incremental dosing as this will compromise fetal circulation. HOLD parameters for this order: Contact Physician if:

PRN Severe Hypertension

[] NIFEdipine (PROCARDIA) capsule	10 mg, oral, once PRN, high blood pressure, for severe BP elevations of 15 min or more. Recheck BP in 15 min., For 1 Doses, L&D Pre-Delivery HOLD parameters for this order: Contact Physician if: For Systolic BP GREATER than 160mmHG and Diastolic BP GREATER than 110mmHg
[] labetalol (NORMODYNE, TRANDATE) injection	20 mg, intravenous, once PRN, high blood pressure, for severe blood pressure elevation (systolic BP GREATER than or EQUAL to 110 mm Hg) persisting for 15 minutes or more., For 1 Doses, L&D Pre-Delivery Give IV Push over 2 minutes. Repeat BP measurements in 10 minutes and record results. HOLD parameters for this order: Contact Physician if: For Systolic BP GREATER than 160mmHG and Diastolic BP GREATER than 110mmHg

Non-Reassuring FHR with Hyperstimulation

<input type="checkbox"/> terbutaline (BRETHINE) injection	0.25 mg, subcutaneous, once PRN, hyperstimulation with non-reassuring fetal heart rate, L&D Pre-Delivery
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Cervical Ripening (Single Response)

<input type="checkbox"/> Vaginal - misoprostol (CYTOTEC) tablet for vaginal use	25 mcg, vaginal, every 4 hours, L&D Pre-Delivery
<input type="checkbox"/> dinoprostone (CERVIDIL) vaginal insert	10 mg, vaginal, once, For 1 Doses, L&D Pre-Delivery Remove Dinoprostone (Cervidil) 12 hours after placement (or if non-reassuring FHR tracing, tachysystole, onset of active labor). After insertion of Dinoprostone (Cervidil), position patient supine with lateral tilt for 2 hours

Induction/Augmentation (Single Response)

<input type="checkbox"/> misoprostol (CYTOTEC) tablet for vaginal use	25 mcg, vaginal, every 4 hours, L&D Pre-Delivery
<input type="checkbox"/> oxytocin (PITOCIN) infusion	2 milli-units/min, intravenous, titrated, L&D Pre-Delivery Begin 30 minutes after the removal of dinoprostone (CERVIDIL) insert OR begin 4 hours after the last dose of misoprostol (CYTOTEC). In the absence of FHR abnormalities, increase dose every 20 minutes by 2 mu/min until adequate uterine activity is achieved. Adequate uterine activity is defined as: uterine contractions that are 2-3 minutes apart, contraction duration of 40-90 seconds and moderate intensity by palpation or 50-60 mmHg above baseline with IUPC. Contractions are not to exceed 5 contractions in 10 minutes averaged over a 30-minute window, last 2 minutes or more, occur within 1 minute of each other, or result in insufficient resting tone between contractions. Max Dose (mu/min):

PostPartum Oxytocin

<input checked="" type="checkbox"/> oxytocin (PITOCIN) Bolus and Maintenance Infusion	"Followed by" Linked Panel
<input checked="" type="checkbox"/> oxytocin 30 unit/500 mL bolus from bag	10 Units, intravenous, for 30 Minutes, once, For 1 Doses, L&D Pre-Delivery
<input checked="" type="checkbox"/> oxytocin (PITOCIN) infusion	5.7 Units/hr, intravenous, once, Starting H+30 Minutes, For 1 Doses, L&D Pre-Delivery Run at 95 mL/hr for 3.5 hours. Total 20 units over 3.5 hours. (Infuse at rate of 95 mL/hr over 3.5 hours) Increase to 999 mL/hr for uterine tone and bleeding per physician instructions.

Bleeding Medications PostPartum (Single Response)

<input type="checkbox"/> oxytocin (PITOCIN) infusion and methylergonovine (METHERGINE)	"And" Linked Panel
methylergonovine (METHERGINE) is contraindicated if BP GREATER than 140/90 mmHg	
<input type="checkbox"/> oxytocin (PITOCIN) infusion	5.7 Units/hr, intravenous, continuous PRN, PostPartum Vaginal Bleeding, Postpartum If uterine atony or if excessive bleeding persists, infuse oxytocin at 999mL/hr.
<input type="checkbox"/> methylergonovine (METHERGINE) injection - Contraindicated if BP GREATER than 140/90 mmHg	200 mcg, intramuscular, once PRN, as needed for vaginal bleeding not controlled by oxytocin, Postpartum Use if inadequate response to oxytocin. Notify Physician if further treatment needed. Contraindicated if BP GREATER than 140/90 mmHg
<input type="checkbox"/> oxytocin (PITOCIN) infusion AND carboprost (HEMABATE) injection And diphenoxylate-atropine (LOMOTIL) oral dose	"And" Linked Panel
<input type="checkbox"/> oxytocin (PITOCIN) infusion	5.7 Units/hr, intravenous, continuous PRN, PostPartum Vaginal Bleeding, Postpartum If uterine atony or if excessive bleeding persists, infuse oxytocin at 999mL/hr.

<input type="checkbox"/>	carboprost (HEMABATE) injection	250 mcg, intramuscular, once PRN, for Vaginal Bleeding uncontrolled by oxytocin., Postpartum
<input type="checkbox"/>	diphenoxylate-atropine (LOMOTIL) 2.5-0.025 mg per tablet	1 tablet, oral, once PRN, diarrhea, Postpartum
"And" Linked Panel		
<input type="checkbox"/>	oxytocin (PITOCIN) infusion and misoprostol (CYTOTEC)	
<input type="checkbox"/>	oxytocin (PITOCIN) infusion	5.7 Units/hr, intravenous, continuous PRN, Postpartum Bleeding, Postpartum If uterine atony or if excessive bleeding persists, infuse oxytocin at 999mL/hr
<input type="checkbox"/>	misoprostol (CYTOTEC) tablet	1,000 mcg, rectal, once PRN, as needed for vaginal bleeding not controlled by oxytocin, Postpartum Use if inadequate response to oxytocin. Notify Physician if further treatment needed.

Fetal Demise

<input type="checkbox"/>	misoprostol (CYTOTEC) tablet	oral, L&D Pre-Delivery
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Moderate Pain (Pain Score 4-6) - NOT HMTW, HMSJ (Single Response)

<input type="checkbox"/>	fentaNYL (SUBLIMAZE) injection	50 mcg, intravenous, every 2 hour PRN, moderate pain (score 4-6), L&D Pre-Delivery
<input type="checkbox"/>	butorphanol (STADOL) injection	1 mg, intravenous, every 2 hour PRN, moderate pain (score 4-6), L&D Pre-Delivery
<input type="checkbox"/>	nalbuphine (NUBAIN) injection	5 mg, intravenous, every 4 hours PRN, moderate pain (score 4-6), L&D Pre-Delivery

Moderate Pain (Pain Score 4-6) - HMTW Only (Single Response)

<input type="checkbox"/>	fentaNYL (SUBLIMAZE) injection	50 mcg, intravenous, every 2 hour PRN, moderate pain (score 4-6), L&D Pre-Delivery
<input type="checkbox"/>	nalbuphine (NUBAIN) injection	5 mg, intravenous, every 4 hours PRN, moderate pain (score 4-6), L&D Pre-Delivery

Moderate Pain (Pain Score 4-6) - HMSJ Only (Single Response)

<input type="checkbox"/>	fentaNYL (SUBLIMAZE) injection	50 mcg, intravenous, every 2 hour PRN, moderate pain (score 4-6), L&D Pre-Delivery
<input type="checkbox"/>	butorphanol (STADOL) injection	1 mg, intravenous, every 2 hour PRN, moderate pain (score 4-6), L&D Pre-Delivery
<input type="checkbox"/>	nalbuphine (NUBAIN) injection	5 mg, intravenous, every 4 hours PRN, moderate pain (score 4-6), L&D Pre-Delivery

Severe Pain (Pain Score 7-10) - NOT HMTW (Single Response)

<input type="checkbox"/>	fentaNYL (SUBLIMAZE) injection	100 mcg, intravenous, every 2 hour PRN, severe pain (score 7-10), L&D Pre-Delivery
<input type="checkbox"/>	butorphanol (STADOL) injection	2 mg, intravenous, every 2 hour PRN, severe pain (score 7-10), L&D Pre-Delivery
<input type="checkbox"/>	nalbuphine (NUBAIN) injection	10 mg, intravenous, every 4 hours PRN, severe pain (score 7-10), L&D Pre-Delivery

Severe Pain (Pain Score 7-10) - HMTW Only (Single Response)

<input type="checkbox"/>	fentaNYL (SUBLIMAZE) injection	100 mcg, intravenous, every 2 hour PRN, severe pain (score 7-10), L&D Pre-Delivery
<input type="checkbox"/>	nalbuphine (NUBAIN) injection	10 mg, intravenous, every 4 hours PRN, severe pain (score 7-10), L&D Pre-Delivery

Local Anesthetics - NOT HMTW

<input checked="" type="checkbox"/>	lidocaine (XYLOCAINE) 10 mg/mL (1 %) injection	intra dermal, PRN, As needed for perineal repair, L&D Pre-Delivery
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Local Anesthetics - HMTW Only

[X] lidocaine PF (XYLOCAINE) 10 mg/mL (1 %) injection	intradermal, PRN, As needed for perineal repair, L&D Pre-Delivery
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Antiemetics - HHM, 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

[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 in sodium chloride 0.9 % 0.9 % 20 mL for Alaris pump syringe option	12.5 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.
[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 - HMSTJ 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) 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, 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.

<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.
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VTE

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

URL: "\appt1.pdf"

<input type="checkbox"/> 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: L&D Pre-Delivery
<input type="checkbox"/> LOW Risk of DVT (Selection Required)	"And" Linked Panel
<input type="checkbox"/> Low risk of VTE	Routine, Once Low risk: Due to low risk, no VTE prophylaxis is needed. Will encourage early ambulation L&D Pre-Delivery
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous While in bed., L&D Pre-Delivery
<input type="checkbox"/> MODERATE Risk of DVT - Surgical (Selection Required)	
<p>Moderate Risk Definition Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated. One or more of the following medical conditions: CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome Age 60 and above Central line History of DVT or family history of VTE Anticipated length of stay GREATER than 48 hours Less than fully and independently ambulatory Estrogen therapy Moderate or major surgery (not for cancer) Major surgery within 3 months of admission</p>	
<input type="checkbox"/> Moderate Risk (Selection Required)	
<input type="checkbox"/> Moderate risk of VTE	Routine, Once, L&D Pre-Delivery
<input type="checkbox"/> Moderate Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis BUT order Sequential compression device	"And" Linked Panel
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): L&D Pre-Delivery
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, L&D Pre-Delivery
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis	"And" Linked Panel
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): L&D Pre-Delivery
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): L&D Pre-Delivery
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	

<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600 (TIME CRITICAL), Starting S+1, L&D Pre-Delivery
<input type="checkbox"/> patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600 (TIME CRITICAL), Starting S+1, L&D Pre-Delivery For Patients with CrCL LESS than 30 mL/min
<input type="checkbox"/> 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
<input type="checkbox"/> patients weight 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 Patient weight of 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1 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):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM
<input type="checkbox"/> 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, L&D Pre-Delivery Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> HEParin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM For patients with weight GREATER than 100 kg.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1, L&D Pre-Delivery Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous
<input type="checkbox"/> MODERATE Risk of DVT - Non-Surgical (Selection Required)	
Moderate Risk Definition Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated. One or more of the following medical conditions: CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome Age 60 and above Central line History of DVT or family history of VTE Anticipated length of stay GREATER than 48 hours Less than fully and independently ambulatory Estrogen therapy Moderate or major surgery (not for cancer) Major surgery within 3 months of admission	
<input type="checkbox"/> Moderate Risk (Selection Required)	
<input type="checkbox"/> Moderate risk of VTE	Routine, Once, L&D Pre-Delivery
<input type="checkbox"/> Moderate Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis - Order Sequential compression device	"And" Linked Panel

<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis	"And" Linked Panel
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/>	enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
<input type="checkbox"/>	enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 1700, Starting S
<input type="checkbox"/>	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
<input type="checkbox"/>	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
<input type="checkbox"/>	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
<input type="checkbox"/>	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):
<input type="checkbox"/>	heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours
<input type="checkbox"/>	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.
<input type="checkbox"/>	HEParin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours For patients with weight GREATER than 100 kg.
<input type="checkbox"/>	warfarin (COUMADIN) tablet	oral, daily at 1700 Indication:
<input type="checkbox"/>	Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/>	Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous
<input type="checkbox"/>	Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous

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

High Risk (Selection Required)

High risk of VTE Routine, Once, L&D Pre-Delivery

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.

HEParin (porcine) injection - For Patients with weight GREATER than 100 kg 7,500 Units, subcutaneous, every 8 hours, Starting S+1
For patients with weight GREATER than 100 kg.

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

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

High Risk (Selection Required)

High risk of VTE Routine, Once, L&D Pre-Delivery

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.

HEParin (porcine) injection - For Patients with weight GREATER than 100 kg 7,500 Units, subcutaneous, every 8 hours
For patients with weight GREATER than 100 kg.

warfarin (COUMADIN) tablet oral, daily at 1700
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):
L&D Pre-Delivery

Place/Maintain sequential compression device continuous Routine, Continuous, L&D Pre-Delivery

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, L&D Pre-Delivery

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):

aspirin chewable tablet 162 mg, oral, daily, Starting S+1

aspirin (ECOTRIN) enteric coated tablet 162 mg, oral, daily, Starting S+1

Apixaban and Pharmacy Consult (Selection Required)

apixaban (ELIQUIS) tablet 2.5 mg, oral, 2 times daily, Starting S+1
Indications: VTE prophylaxis

Pharmacy consult to monitor apixaban (ELIQUIS) therapy STAT, Until discontinued, Starting S
Indications: VTE prophylaxis

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.

HEParin (porcine) injection - For Patients with weight GREATER than 100 kg 7,500 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM
For patients with weight GREATER than 100 kg.

Rivaroxaban and Pharmacy Consult (Selection Required)

rivaroxaban (XARELTO) tablet for hip or knee arthroplasty planned during this admission 10 mg, oral, daily at 0600 (TIME CRITICAL)
Indications: VTE prophylaxis

<input type="checkbox"/>	Pharmacy consult to monitor rivaroxaban (XARELTO) therapy	STAT, Until discontinued, Starting S Indications: VTE prophylaxis
<input type="checkbox"/>	warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1 Indication:
<input type="checkbox"/>	Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/>	Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): L&D Pre-Delivery
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, L&D Pre-Delivery

Labs

COVID-19 Qualitative PCR

<input type="checkbox"/>	COVID-19 qualitative PCR - Nasal Swab	STAT For 1 Occurrences Specimen Source: Nasal Swab Is this for pre-procedure or non-PUI assessment? Yes Please select a reason for ordering, if applicable. Laboring patient Please select a reason for ordering, if applicable. Laboring patient L&D Pre-Delivery
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Labs HMMH

<input type="checkbox"/>	Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/>	Surgical pathology request	Collection Date: 3/22/2021 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/>	Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Bedside glucose	Routine, Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	OB Panel	
<input checked="" type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Basic metabolic panel	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Hepatitis B surface antigen	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	HIV Ag/Ab combination	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Type and screen, obstetrical patient	
<input checked="" type="checkbox"/>	Type and screen, obstetrical patient	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	ABO and Rh confirmation	Once, Blood Bank Confirmation
<input type="checkbox"/>	Urine dipstick	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: L&D Pre-Delivery
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	

<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/>	LDH	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Fetal Demise Panel	
<input type="checkbox"/>	Antibody screen (gel)	Once, L&D Pre-Delivery
<input type="checkbox"/>	Antithrombin III level	Once, L&D Pre-Delivery
<input type="checkbox"/>	Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/>	Factor V leiden by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hemoglobin A1c	Once, L&D Pre-Delivery
<input type="checkbox"/>	Homocystine, plasma	Once, L&D Pre-Delivery
<input type="checkbox"/>	Kleihauer-Betke	Once, L&D Pre-Delivery
<input type="checkbox"/>	Lupus anticoagulant panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Parvovirus B19 antibody, IgG and IgM	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin mutation, factor II, by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	TSH	Once, L&D Pre-Delivery

Labs HMW, HMSL

<input type="checkbox"/>	Blood gas, arterial, cord	Once, L&D Pre-Delivery
<input type="checkbox"/>	Blood gas, venous, cord	Once, L&D Pre-Delivery
<input type="checkbox"/>	Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/>	Surgical pathology request	Collection Date: 3/22/2021 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/>	Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Bedside glucose	Routine, Once, L&D Pre-Delivery
<input type="checkbox"/>	OB Panel	
<input type="checkbox"/>	Bedside glucose	Routine, Every hour, L&D Pre-Delivery
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Basic metabolic panel	Once, 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"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once, L&D Pre-Delivery
<input type="checkbox"/>	Type and screen, obstetrical patient	
<input type="checkbox"/>	Type and screen, obstetrical patient	Once, L&D Pre-Delivery
<input type="checkbox"/>	ABO and Rh confirmation	Once, Blood Bank Confirmation

<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: L&D Pre-Delivery
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/>	LDH	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Fetal Demise Panel	
<input type="checkbox"/>	Antibody screen (gel)	Once, L&D Pre-Delivery
<input type="checkbox"/>	Antithrombin III level	Once, L&D Pre-Delivery
<input type="checkbox"/>	Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/>	Factor V leiden by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hemoglobin A1c	Once, L&D Pre-Delivery
<input type="checkbox"/>	Homocystine, plasma	Once, L&D Pre-Delivery
<input type="checkbox"/>	Kleihauer-Betke	Once, L&D Pre-Delivery
<input type="checkbox"/>	Lupus anticoagulant panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Parvovirus B19 antibody, IgG and IgM	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin mutation, factor II, by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	TSH	Once, L&D Pre-Delivery

Labs HMSJ

<input type="checkbox"/>	Cord blood gas, arterial	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Cord blood gas, venous	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/>	Surgical pathology request	Collection Date: 3/22/2021 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/>	Urine drugs of abuse screen	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Bedside glucose	Routine, Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	OB Panel	
<input checked="" type="checkbox"/>	CBC with differential	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Basic metabolic panel	STAT For 1 Occurrences, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Hepatitis B surface antigen	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	HIV 1, 2 antibody	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once, L&D Labs
<input checked="" type="checkbox"/>	Type and screen, obstetrical patient	

<input checked="" type="checkbox"/> Type and screen, obstetrical patient	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> ABO and Rh confirmation	Once, Blood Bank Confirmation
<input checked="" type="checkbox"/> Urinalysis screen and microscopy, with reflex to culture	STAT For 1 Occurrences Specimen Source: Urine Specimen Site: L&D Pre-Delivery
<input type="checkbox"/> Pre-Eclamptic Lab Panel	
<input type="checkbox"/> CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/> Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/> Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/> Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/> Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/> Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/> LDH	Once, L&D Pre-Delivery
<input type="checkbox"/> Urine Protein and Creatinine	
<input type="checkbox"/> Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Fetal Demise Panel	
<input type="checkbox"/> Antibody screen (gel)	Once, L&D Pre-Delivery
<input type="checkbox"/> Antithrombin III level	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/> Factor V leiden by PCR	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Fibrinogen	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Hemoglobin A1c	Once, L&D Pre-Delivery
<input type="checkbox"/> Homocystine, plasma	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Kleihauer-Betke	Once, L&D Pre-Delivery
<input type="checkbox"/> Lupus anticoagulant panel	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Parvovirus B19 antibody, IgG and IgM	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Prothrombin mutation, factor II, by PCR	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Partial thromboplastin time	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Prothrombin time with INR	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> TSH	STAT For 1 Occurrences, L&D Pre-Delivery

Labs HMCL

<input type="checkbox"/> Blood gas, arterial, cord	Once, L&D Pre-Delivery
<input type="checkbox"/> Blood gas, venous, cord	Once, L&D Pre-Delivery
<input type="checkbox"/> Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/> Surgical pathology request	Collection Date: 3/22/2021 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/> Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> OB Panel	
<input checked="" type="checkbox"/> CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/> Basic metabolic panel	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> HIV 1, 2 antibody	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> Hepatitis B surface antigen	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once, L&D Pre-Delivery

<input checked="" type="checkbox"/>	Type and screen, obstetrical patient	
<input checked="" type="checkbox"/>	Type and screen, obstetrical patient	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	ABO and Rh confirmation	Once, Blood Bank Confirmation
<input type="checkbox"/>	Urine dipstick	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: L&D Pre-Delivery
<input type="checkbox"/> Pre-Eclamptic Lab Panel		
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/>	LDH	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Fetal Demise Panel		
<input type="checkbox"/>	Antibody screen (gel)	Once, L&D Pre-Delivery
<input type="checkbox"/>	Antithrombin III level	Once, L&D Pre-Delivery
<input type="checkbox"/>	Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/>	Factor V leiden by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hemoglobin A1c	Once, L&D Pre-Delivery
<input type="checkbox"/>	Homocystine, plasma	Once, L&D Pre-Delivery
<input type="checkbox"/>	Kleihauer-Betke	Once, L&D Pre-Delivery
<input type="checkbox"/>	Lupus anticoagulant panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Parvovirus B19 antibody, IgG and IgM	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin mutation, factor II, by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	TSH	Once, L&D Pre-Delivery

Labs HMTW

<input type="checkbox"/>	Blood gas, arterial, cord	Once, L&D Pre-Delivery
<input type="checkbox"/>	Blood gas, venous, cord	Once, L&D Pre-Delivery
<input type="checkbox"/>	Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/>	Surgical pathology request	Collection Date: 3/22/2021 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/>	Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Bedside glucose	Routine, Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> OB Panel		
<input checked="" type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Basic metabolic panel	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Hepatitis B surface antigen	Once, L&D Pre-Delivery

<input type="checkbox"/>	HIV 1, 2 antibody	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Type and screen, obstetrical patient	
<input checked="" type="checkbox"/>	Type and screen, obstetrical patient	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	ABO and Rh confirmation	Once, Blood Bank Confirmation
<input checked="" type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: L&D Pre-Delivery
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/>	LDH	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Fetal Demise Panel	
<input type="checkbox"/>	Antibody screen (gel)	Once, L&D Pre-Delivery
<input type="checkbox"/>	Antithrombin III level	Once, L&D Pre-Delivery
<input type="checkbox"/>	Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/>	Factor V leiden by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hemoglobin A1c	Once, L&D Pre-Delivery
<input type="checkbox"/>	Homocystine, plasma	Once, L&D Pre-Delivery
<input type="checkbox"/>	Kleihauer-Betke	Once, L&D Pre-Delivery
<input type="checkbox"/>	Lupus anticoagulant panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Parvovirus B19 antibody, IgG and IgM	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin mutation, factor II, by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	TSH	Once, L&D Pre-Delivery

Labs HMWB

<input type="checkbox"/>	Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/>	Surgical pathology request	Collection Date: 3/22/2021 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/>	Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Bedside glucose	Routine, Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	OB Panel	
<input checked="" type="checkbox"/>	CBC with differential	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Basic metabolic panel	Once For 1 Occurrences, L&D Pre-Delivery
<input checked="" type="checkbox"/>	HIV 1, 2 antibody	Once For 1 Occurrences, L&D Pre-Delivery

<input checked="" type="checkbox"/>	Hepatitis B surface antigen	Once For 1 Occurrences, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once For 1 Occurrences, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Type and screen, obstetrical patient	
<input checked="" type="checkbox"/>	Type and screen, obstetrical patient	Once, L&D Pre-Delivery
<input checked="" type="checkbox"/>	ABO and Rh confirmation	Once, Blood Bank Confirmation
<input type="checkbox"/>	Urine dipstick	Once For 1 Occurrences, L&D Pre-Delivery
<input checked="" type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once For 1 Occurrences Specimen Source: Urine Specimen Site: L&D Pre-Delivery
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/>	LDH	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Fetal Demise Panel	
<input type="checkbox"/>	Antibody screen (gel)	Once, L&D Pre-Delivery
<input type="checkbox"/>	Antithrombin III level	Once, L&D Pre-Delivery
<input type="checkbox"/>	Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/>	Factor V leiden by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hemoglobin A1c	Once, L&D Pre-Delivery
<input type="checkbox"/>	Homocystine, plasma	Once, L&D Pre-Delivery
<input type="checkbox"/>	Kleihauer-Betke	Once, L&D Pre-Delivery
<input type="checkbox"/>	Lupus anticoagulant panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Parvovirus B19 antibody, IgG and IgM	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin mutation, factor II, by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	TSH	Once, L&D Pre-Delivery

24 Hour urine

<input type="checkbox"/>	24 Hour urine	
<input type="checkbox"/>	Creatinine clearance, urine, 24 hour	Once, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, 24 hour	Once, L&D Pre-Delivery

Magnesium and D-dimer

<input type="checkbox"/>	D-dimer	Once, L&D Pre-Delivery
<input type="checkbox"/>	Magnesium level	Once, L&D Pre-Delivery

Respiratory

Oxygen

<input checked="" type="checkbox"/>	Oxygen therapy	Routine, As needed Device: Non-rebreather mask Rate in liters per minute: Titrate to keep O2 Sat Above: Other (Specify) Specify titration to keep O2 Sat (%) Above: 94 Indications for O2 therapy: Fetal indication Continue O2 for 30 minutes per event., L&D Pre-Delivery
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Consults

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