

Location: _____

General

Nursing

IV Fluids

Medications

VTE

Labs

Laboratory

 CBC with platelet and differential Once, Routine, Blood, 3 **Comprehensive metabolic panel** Once, Routine, Blood, 3 **Magnesium level** Once, Routine, Blood, 3 **Phosphorus level** Once, Routine, Blood, 3 **Lactate dehydrogenase, LDH** Once, Routine, Blood, 3 **Prealbumin** Once, Routine, Blood, 3 **Hemoglobin A1c** Once, Routine, Blood, 3 **TSH** Once, Routine, Blood, 3 **HIV 1/2 antigen/antibody, fourth generation, with reflexes** Once, Routine, Blood, 3

Release to patient (Note: If manual release option is selected, result will auto release 5 days from finalization.):

 Acute viral hepatitis panel (HAV, HBV, HCV) Once, Routine, Blood, 3 **Hepatitis B surface antibody** Once, Routine, Blood, 3 **Hepatitis B core antibody, total** Once, Routine, Blood, 3 **Hepatitis A antibody, total** Once, Routine, Blood, 3 **Cytomegalovirus antibody, IgG** Once, Routine, Blood, 3 **Syphilis treponema screen with RPR confirmation (reverse algorithm)** Once, Routine, Blood, 3

Release to patient (Note: If manual release option is selected, result will auto release 5 days from finalization.):

 Creatinine clearance, urine, 24 hour Once, Routine, Urine **Prostate specific antigen** Once, Routine, Blood, 3, If male

Release to patient (Note: If manual release option is selected, result will auto release 5 days from finalization.):

Coagulopathy Studies

 Prothrombin time with INR Once, Routine, Blood, 3 **Partial thromboplastin time** Once, Routine, Blood, 3

Do not draw blood from the arm that has heparin infusion. Do not draw from heparin flushed lines. If there is no other access other than the heparin line, then stop the heparin, flush the line, and aspirate 20 ml of blood to waste prior to drawing a specimen.

 Thrombin time Once, Routine, Blood, 3 **Thromboelastograph** Once, Routine, Blood, 3

Anticoagulant Therapy:

Diagnosis:

Fax Number (For TEG Graph Result):

Specimen cannot be transported through the P-tube; hand carry specimen to the Core Laboratory.

 Thromboelastograph Once, Routine, Blood, 3

Specimen cannot be transported through the P-tube; hand carry specimen to the Core Laboratory.

 Fibrinogen Once, Routine, Blood, 3 **D-dimer** Once, Routine, Blood, 3 **Platelet mapping** Once, Routine, Blood, 3

Anticoagulant Therapy:

Diagnosis:

Fax Number (For TEG Graph Result):

Specimen cannot be transported through the P-tube; hand carry specimen to the Core Laboratory.

 Platelet function analysis Once, Routine, Blood, 3

Specimen cannot be transported through the P-tube; hand carry specimen to the Core Laboratory.

Sign: _____ Printed Name: _____

Date/Time: _____

- Heparin PF4 antibody (IgG)** Once, Routine, Blood, 3, If on heparin and low platelets (decreased by 50 percent or less than 150)

Microbiology

- Blood culture, aerobic and anaerobic x 2**

- Blood culture, aerobic and anaerobic x 2**

Most recent Blood Culture results from the past 7 days:

@LASTPROCRESULT(LAB462)@

Blood Culture Best Practices (<https://formweb.com/files/houstonmethodist/documents/blood-culture-stewardship.pdf>)

Blood culture, aerobic & anaerobic Once, Routine, Blood, Collect before antibiotics given. Blood cultures should be drawn from a peripheral site. If unable to draw both sets from a peripheral site, please call the lab for assistance; an IV line should NEVER be used.

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- Sputum culture** Once, Routine, Sputum

- Urinalysis screen and microscopy, with reflex to culture** Once, Routine, Urine

Specimen Source: Urine

Specimen Site:

Specimen must be received in the laboratory within 2 hours of collection.

Blood Bank

- Type and screen** Once, Routine, Blood

CT

- CT Chest W Abdomen W Pelvis W Contrast (Omnipaque)**

For those with iodine allergies, please order the panel with Readi-Cat (barium sulfate).

- CT Chest W Contrast Abdomen W Contrast Pelvis W Contrast** 1 time imaging, Routine

Can the Creatinine labs be waived prior to performing the exam? No, all labs must be obtained prior to performing this exam.

Is the patient pregnant?

Release to patient (Note: If manual release option is selected, result will auto release 5 days from finalization.):

- iohexol (OMNIPAQUE) 300 mg iodine/mL oral solution** 300 , once

FOR CT SCAN ONLY: Mix Iohexol 30 mL in 32 ounces of water, may add one packet of Crystal Light flavored to taste.

- CT Chest WO Abdomen WO Pelvis WO Contrast (Omnipaque)**

For those with iodine allergies, please order the panel with Readi-Cat (barium sulfate).

- CT Chest Wo Contrast Abdomen Wo Contrast Pelvis Wo Contrast** 1 time imaging, Routine

Is the patient pregnant?

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- iohexol (OMNIPAQUE) 300 mg iodine/mL oral solution** 300 , once

FOR CT SCAN ONLY: Mix Iohexol 30 mL in 32 ounces of water, may add one packet of Crystal Light flavored to taste.

- CV CT cardiac calcium scoring** 1 time imaging, Routine

Is the patient pregnant?

X-Ray

- Chest 2 Vw** 1 time imaging, Routine

Is the patient pregnant?

Release to patient (Note: If manual release option is selected, result will auto release 5 days from finalization.):

US

- Echocardiogram complete w contrast and 3D if needed** 1 time imaging, Routine, With pulmonary arterial pressures

Does this study require a chemo toxicity strain protocol?

Does this exam need a strain protocol?

Call back number for Critical Findings:

Where should test be performed?

Does this exam need a bubble study?

Preferred interpreting Cardiologist or group:

PV carotid duplex 1 time imaging, Routine, Bilateral; if history of coronary artery disease or age 40 years or older

Laterality:

Special protocol:

PV physiologic arterial lower ext bilat complete w abi 1 time imaging, Routine

Laterality:

CV pacemaker defib or ilr interrogation Once, Routine, If patient has AICD or PPM, interrogate AICD/PPM

Cardiology

Cardiology

ECG 12 lead Once, Routine, 6, Pre-transplant/VAD evaluation.

Clinical Indications:

Interpreting Physician:

CV pacemaker defib or ilr interrogation Once, Routine

Imaging

Other Studies

Respiratory

Respiratory

Spirometry, diffusion, lung volumes Once, Routine
RT to follow protocol for changes to requested PFT orders?

Spirometry pre & post w/ bronchodilator, diffusion, lung volumes Once, Routine
RT to follow protocol for changes to requested PFT orders?

Spirometry Once, Routine
RT to follow protocol for changes to requested PFT orders?

Spirometry pre & post w/ bronchodilator Once, Routine
RT to follow protocol for changes to requested PFT orders?

Respiratory muscle force Once, Routine
RT to follow protocol for changes to requested PFT orders?

Lung volumes Once, Routine
RT to follow protocol for changes to requested PFT orders?

IP Diffusion Capacity Combination Panel

Spirometry, diffusion Once, Routine
RT to follow protocol for changes to requested PFT orders?

Spirometry, diffusion, lung volumes Once, Routine
RT to follow protocol for changes to requested PFT orders?

Spirometry, diffusion, MIPS/MEPS Once, Routine
RT to follow protocol for changes to requested PFT orders?

Spirometry, diffusion, lung volumes, MIPS/MEPS Once, Routine
RT to follow protocol for changes to requested PFT orders?

Spirometry pre & post w/ bronchodilator, diffusion Once, Routine
RT to follow protocol for changes to requested PFT orders?

Spirometry pre & post w/ bronchodilator, diffusion, lung volumes Once, Routine
RT to follow protocol for changes to requested PFT orders?

Spirometry pre & post w/ bronchodilator, diffusion, MIPS/MEPS Once, Routine
RT to follow protocol for changes to requested PFT orders?

Spirometry pre & post w/ bronchodilator, diffusion, lung volumes, MIPS/MEPS Once, Routine
RT to follow protocol for changes to requested PFT orders?

Vital capacity test Once, Routine
RT to follow protocol for changes to requested PFT orders?

Cardiopulmonary stress exercise Once, Routine, Mixed Venous Oxygenation (MVO2)
Protocol:
RT to follow protocol for changes to requested PFT orders?

Six minute walk w/ pulse oximetry Once, Routine
Purpose:
RT to follow protocol for changes to requested PFT orders?

Sign: _____ Printed Name: _____ Date/Time: _____

Arterial blood gas STAT, 1, Occurrences, Routine, Blood, 3

Rehab

Consults

For Physician Consult orders use sidebar

Ancillary Consults

Consult to Nutrition Services Once, Routine, initiate inpatient VAD Nutrition Protocol

Reason For Consult? MD order Diet Consult

Purpose/Topic:

Reason for Consult?

Consult to Transplant Social Work Once, Routine

Reason for Consult? Transplant Psychosocial Evaluation

Organ Transplant: Heart

Reason for Consult?

Consult to Transplant Financial Services Once, Routine

Reason for Consult?

Organ Transplant:

Reason for Consult?

Consult to Biomedical Ethics Once, Routine

Priority: Routine

Reason for Consult?

Requestor name:

Enter call back number:

Reason for Consult?

Consult to Palliative Care Once, Routine

Priority:

Reason for Consult?

Order?

Name of referring provider:

Enter call back number:

Reason for Consult?

Additional Orders