

Physician Orders Pediatric: LEB ECMO Circuit Prime Plan

Da		Physician's Signature	MD Number
	STAT, T;N, Volume: 3 units STAT	s, Special Needs: Irradiated, Send to bedsic	de in a cooler for ECMO prime
	Transfuse PRBC >4 Months		
	STAT, T;N, Volume: 3 units STAT	s, Special Needs: Irradiated, Send to bedsic	de in a cooler for ECMO prime
	Transfuse PRBC <4 Months		
	STAT, T;N, Volume: 1 unit		
$\overline{\mathbf{A}}$	Transfuse FFP-Pediatric		
Labora	•		
	Max dose = 1 gram	' Piggyback, q8h, Routine, (for 3 dose), Re	ason for ABA. Propriyiaxis,
☑	ceFAZolin	/ Diagraphoph agh Pourting (for 2 does) Po	agan for ABV: Brankylavia
		ntration:100 units/mL	
	300 units, Injection, Device		
	heparin 100 units/mL injectable solu	ution	
	🗆 10 mEq, Injection, Devid	ce, once, STAT	
	☐ 30 mEq, Injection, Devic	ce, once, STAT (DEF)*	
$\overline{\mathbf{A}}$	sodium bicarbonate 8.4% intraveno	us solution	
_	900 mg, Injection, Device, o	once, STAT	
$\overline{\mathbf{A}}$	calcium chloride		
Medica	cations		
LEB E	ECMO Circuit Prime Plan		

*Report Legend:

DEF - This order sentence is the default for the selected order

GOAL - This component is a goal

IND - This component is an indicator

INT - This component is an intervention

IVS - This component is an IV Set

NOTE - This component is a note

Rx - This component is a prescription

SUB - This component is a sub phase, see separate sheet

R-Required Order

