



Physician Orders ADULT: Blood Culture Adult Plan

Blood Culture Adult Plan

Laboratory

Due to increased risk for contamination from central lines, peripheral cultures are recommended when NOT evaluating for catheter related blood stream infection.(NOTE)*

- ☒ Blood Culture
Time Study, T;N, Specimen Source: Peripheral Blood

- ☒ Blood Culture
Time Study, T;N+2, Specimen Source: Peripheral Blood

If ruling out endocarditis and need an additional set, select the below peripheral blood culture as well (NOTE)*

- ☐ Blood Culture
Time Study, T;N+3, Specimen Source: Peripheral Blood

Avoid drawing routine blood cultures from a central line (NOTE)*

When ordering Blood Cultures, if a catheter-related blood stream infection is suspected, select the below order.(NOTE)*

- ☐ Blood Culture Line
- ☐ *Time Study, T;N, Specimen Source: Dialysis Catheter - Non-Tunneled (DEF)**
 - ☐ *Time Study, T;N, Specimen Source: Dialysis Catheter - Tunneled*
 - ☐ *Time Study, T;N, Specimen Source: Line*
 - ☐ *Time Study, T;N, Specimen Source: Line, Arterial*
 - ☐ *Time Study, T;N, Specimen Source: Line, Broviac*
 - ☐ *Time Study, T;N, Specimen Source: Line, Central*
 - ☐ *Time Study, T;N, Specimen Source: Line, PICC*
 - ☐ *Time Study, T;N, Specimen Source: Line, Venous*
 - ☐ *Time Study, T;N, Specimen Source: Port*
 - ☐ *Time Study, T;N, Specimen Source: Portacath*
 - ☐ *Time Study, T;N, Specimen Source: Triple Lumen*
 - ☐ *Time Study, T;N, Specimen Source: Umbilical Artery Catheter*
 - ☐ *Time Study, T;N, Specimen Source: Umbilical Venous Catheter*

Date

Time

Physician's Signature

MD Number

*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

