Physician Orders ADULT
Title: ED Weakness Orders

[R] = will be ordered
T= Today; N = Now (date and time ordered)
Height: _____ cm   Weight: _____ kg

Allergies:	[ ] No known allergies
[ ]Medication allergy(s):_____	
[ ] Latex allergy [ ]Other:_____	

	Standing Triage Orders	
[ ]	Intermittent Needle Therapy Insert/Site (INT Insert/Site Care)	T;N,STAT,q4day
[ ]	O2 Sat Spot Check-NSG	T;N, STAT
[ ]	O2 Sat Monitoring NSG	T;N, STAT
[ ]	Nasal Cannula (O2-BNC)	T;N STAT, 2 L/min, Special Instructions: Titrate to keep O2 sat >/= 92%
[ ]	Cardiac Monitoring-ED Only	T;N, STAT
[ ]	Whole Blood Glucose Nsg (Bedside Glucose Nsg)	T;N, STAT, once
[ ]	CBC	T;N, STAT, once, Type: Blood, Nurse Collect
[ ]	Electrocardiogram (EKG)	Start at: T;N, Priority: Stat
[ ]	Comprehensive Metabolic Panel (CMP)	T;N, STAT, once, Type: Blood, Nurse Collect
[ ]	ED Troponin-I (GT only)	T;N, STAT, Type: Blood, Nurse Collect, Comment: order if age 50 or older
[ ]	Troponin-I	T;N, STAT, Type: Blood, Nurse Collect, Comment: order if age 50 or older
	NOTE: If possibility of pregnancy order below:	
[ ]	Pregnancy Screen Serum	T;N, STAT, once, Type: Blood, Nurse Collect
	Respiratory Care	
[ ]	ISTAT Blood Gases (RT Collect) (ABG- RT Collect)	T;N Stat once
	Continuous Infusions	
[ ]	Sodium Chloride 0.9% (Bolus)	500 mL, IV Piggyback, once, STAT, 1,000 mL/hr
[ ]	Sodium Chloride 0.9%	1,000 mL,IV,STAT,T;N,75 mL/hr
[ ]	Sodium Chloride 0.45%	1,000 mL,IV,STAT,T;N,75 mL/hr
[ ]	Dextrose 5% with 0.45% NaCl	1,000 mL,IV,STAT,T;N,75 mL/hr
	Medications	
[ ]	acetaminophen	650 mg,Tab,PO,q6h,PRN Fever,STAT,T;N
[ ]	ibuprofen	800 mg,Tab,PO,q6h,PRN Fever,STAT,T;N
[ ]	amoxicillin-clavulanate	875 mg,Tab,PO,once,STAT,T;N,(1 dose)
[ ]	azithromycin	500 mg,Tab,PO,once,STAT,T;N
[ ]	azithromycin	500 mg,Injection,IV Piggyback,once,STAT,T;N
[ ]	sulfamethoxazole-trimethoprim (sulfamethoxazole-trimethoprim DS)	160 mg,DS Tab,PO,once,STAT,T;N,160mg=1DS tab
[ ]	cefepime	1 g,Injection,IV Piggyback,once,STAT,T;N
[ ]	cefepime	2 g,Injection,IV Piggyback,once,STAT,T;N

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	**Medications continued**	
[ ]	ceftriaxone	1 g, IV Piggyback, IV Piggyback, once, STAT
[ ]	ceftriaxone	2 g, IV Piggyback, IV Piggyback, once, STAT
[ ]	ciprofloxacin	400 mg, IV Piggyback, IV Piggyback, once, STAT
[ ]	clindamycin	300 mg,Tab,PO,once,STAT,T;N
[ ]	clindamycin	900 mg,IV Piggyback,IV Piggyback,once,STAT,T;N
[ ]	doxycycline	100 g,Injection,IV Piggyback,once,STAT,T;N
[ ]	doxycycline	100 mg,Cap,PO,once,STAT,T;N
[ ]	metroNIDAZOLE	500 mg,IV Piggyback,IV Piggyback,once,STAT,T;N
[ ]	metroNIDAZOLE	500 mg,Tab,PO,once,STAT,T;N
[ ]	piperacillin-tazobactam	4.5 g, IV Piggyback, IV Piggyback, once, STAT
[ ]	vancomycin	1 g, IV Piggyback, IV Piggyback, once, STAT, (1 dose), Patient Weight less than or equal to 60 kg
[ ]	vancomycin	1.5 g, Injection, IV Piggyback, once, STAT, Patient Weight 60 - 100 kg
[ ]	vancomycin	2 g, Injection, IV Piggyback, once, STAT, Patient Weight greater than 100 kg
[ ]	glucose (Dextrose 50% in water Syringe)	50 mL, Injection, IV Push, once, STAT
**Laboratory**	
[ ]	Blood Culture	Time Study, q5min x 2 occurrence, Specimen Source: Peripheral Blood, Nurse Collect
[ ]	CK	T;N, STAT, once, Type: Blood, Nurse Collect
[ ]	Cortisol Level	T;N, STAT, once, Type: Blood, Nurse Collect
[ ]	Lactic Acid Level (Lactate Level)	T;N, STAT, once, Type: Blood, Nurse Collect
[ ]	Magnesium Level	T;N, STAT, once, Type: Blood, Nurse Collect
[ ]	Prothrombin Time (PT/INR)	T;N, STAT, once, Type: Blood, Nurse Collect
[ ]	Partial Thromboplastin Time (PTT)	T;N, STAT, once, Type: Blood, Nurse Collect
[ ]	Urinalysis w/Reflex Microscopic Exam	T;N, STAT, once, Type: Urine, Nurse Collect
[ ]	Urine Culture	T;N, STAT, Specimen Source: Urine, Nurse Collect
[ ]	Respiratory Culture and Gram Stain	T;N, Routine, Specimen Source: Sputum, Nurse Collect
[ ]	Myoglobin	T;N, STAT, once, Type: Blood, Nurse Collect
[ ]	Troponin-I	T;N, STAT, once, Type: Blood, Nurse Collect
[ ]	CK Isoenzymes	T;N, STAT, once, Type: Blood, Nurse Collect
**Diagnostic Tests**	
[ ]	Chest 1VW Frontal	T;N,Reason for Exam: Other, Enter in Commemts,Other reason: Weakness,Stat,Portable
[ ]	Chest 2VW Frontal & Lat	T;N,Reason for Exam: Other, Enter in Commemts,Other reason: Weakness,Stat,Stretcher
[ ]	CT Brain/Head WO Cont	T;N,Reason for Exam: Other, Enter in Commemts,Other reason: Weakness,Stat,Stretcher

ED Weakness Orders 20529-QM0808-(QF0412)-
Rev.022316

Methodist
Le Bonheur Healthcare

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Consults/Notifications	
[ ] Physician Consult	T;N, Reason for Consult: weakness
[ ] Physician Consult	T;N, Reason for Consult: weakness

_____ _____ _____ _____
Date   **Time**   **Physician's Signature**   **MD Number**

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