attach patient label here

Methodist Le Bonheur Healthcare

Physician Orders ADULT

Order Set: Gamma Globulin Infusion 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:	
Admission/Transfer/Discharge		
[ ]	Admit Patient to Dr.	
	Admit Status: Outpatient [ ] OP-OBSERVATION Services [ ] OP-Ambulatory Surgery	
	Observation - short term (usually less than 24 hrs) stay in the hospital for evaluation, treatment, assessment, and reassessment to determine need for progression to inpatient admission vs discharge to outpatient follow-up	
	Bed Type: [ ] Med/Surg [ ] Critical Care [ ] Stepdown [ ] Telemetry; Specific Unit Location:	
[ ]	Notify Physician-Once	T;N, of room number on arrival to unit
Primary Diagnosis:		
Secondary Diagnosis:		
Vital Signs		
[ ]	Vital Signs	T;N, Routine Monitor and Record T,P,R,BP, q-shift
[ ]	Vital Signs	T;N, Routine Monitor and Record T,P,R,BP, q4h(std)
Activity		
[ ]	Out Of Bed	T;N, Up As Tolerated
[ ]	Ambulate	T;N, With Assistance
Food/Nutrition		
[ ]	Regular Adult Diet	Start at: T;N
[ ]	Consistent Carbohydrate Diet	T;N, Caloric Level: 1800 Calorie, Insulin: [ ] No Insulin [ ] Short Acting [ ] Intermediate [ ] Long Acting [ ] Short and Intermediate [ ] Short and Long; Renal Patient:[ ] No [ ] Yes, on dialysis [ ] Yes, not on dialysis
[ ]	Sodium Control Diet (Low Sodium Diet)	Start at: T;N, Level: 3 gm
Patient Care		
[ ]	Observe For	T;N, for change in status for 30 minutes prior to each gamma globulin infusion
[ ]	Weight	T;N, on arrival to floor
[ ]	Intermittent Needle Therapy Insert/Site (INT Insert/Site Care)	T;N,q4day,for gamma globulin infusion
[ ]	Nursing Communication	T;N, If Serum Creatinine less than or equal to 1.2mg/dL, start IV Gamma Globulin infusion
Respiratory Care		
Continuous Infusions		
Medications		
[ ]	immune globulin intravenous	650 mg/kg,Injection,IV,QDay,Routine,T;N,(3 day)
[ ]	immune globulin intravenous	1,000 mg/kg, Injection, IV, once, Routine
[ ]	immune globulin intravenous	500 mg/kg,Injection,IV,QDay,Routine,T;N,(2 day)

attach patient label here

Methodist Le Bonheur Healthcare

Physician Orders ADULT

Order Set: Gamma Globulin Infusion Orders

[R] = will be ordered
T= Today; N = Now (date and time ordered)

Medications continued		
[ ]	diphenhydrAMINE	25 mg, Injection, IV Push, once, Routine
[ ]	hydrocortisone	25 mg, Injection, IV Push, once, Routine
[ ]	hydrocortisone	80 mg, Injection, IV Push, once, Routine
[ ]	EPINEPHrine 1 mg/mL Injection	0.3 mg,Injection,IM,q20min,PRN Other, specify in Comment, Routine, T;N
[ ]	acetaminophen	650 mg, Tab, PO, PRN Fever, Routine
Laboratory		
	NOTE: the following labs should be placed on admission:	
[ ]	CBC	T;N, Routine, once, Type: Blood
[ ]	Comprehensive Metabolic Panel (CMP)	T;N, Routine, once, Type: Blood
[ ]	Basic Metabolic Panel (BMP)	Time Study, T;N, QDay, Type: Blood
[ ]	Urinalysis w/Reflex Microscopic Exam	T;N, Routine, once, Type: Urine, Nurse Collect
Diagnostic Tests		
Consults/Notifications		
[ ]	Consult Clinical Pharmacist	Start at: T;N
[ ]	Notify Physician-Continuing	T;N, shortness of breath, swelling, itching, hypotension, or severe respiratory distress

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