Physician Orders ADULT: Cellulitis Plan

Initiate Orders Phase
Care Sets/Protocols/PowerPlans
☐ Initiate Powerplan Phase
  T;N, Phase: Cellulitis Phase, When to Initiate:__________________________

Cellulitis Phase
Admission/Transfer/Discharge
☐ Patient Status Initial Outpatient
  T;N, Attending Physician: _____________________________________________
  Reason for Visit: _____________________________________________________
  Bed Type: ____________________ Specific Unit: ____________________________
  _______________ Outpatient Status/Service OP-OBSERVATION Services

☐ Patient Status Initial Inpatient
  T;N Admitting Physician: ______________________________________________
  Reason for Visit: _____________________________________________________
  Bed Type: ____________________ Specific Unit: ____________________________
  Bed Type: ____________________ Specific Unit: ____________________________
  _____________________________ Care Team: _____________________________ Anticipated LOS: 2 midnights or more

☐ Notify Physician—Once
  T;N, Notify: physician, of room number upon arrival to unit

Vital Signs
☐ Vital Signs
  T;N, Monitor and Record T, P, R, BP, q8h(std)

☐ Vital Signs
  T;N, Monitor and Record T, P, R, BP, q4h(std)

Activity
☐ Bedrest
  T;N

☐ Bedrest w/BRP
  T;N

☐ Activity As Tolerated
  T;N

Food/Nutrition
☐ Regular Adult Diet
  Start at: T;N

☐ American Heart Association Diet
  Start at: T;N

☐ Consistent Carbohydrate Diet

Patient Care
☐ Elevate
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- Elevate Affected extremity
- IV Insert/Site Care
  - T;N,q4day

**Continuous Infusion**
- D5 1/2NS
  - 1,000 mL, IV, Routine, 100 mL/hr
- NS
  - 1,000 mL, IV, Routine, 100 mL/hr
- NaCl 0.45%
  - 1,000 mL, IV, Routine, 100 mL/hr

**Medications**
- ceFAZolin
  - 1 g, IV Piggyback, IV Piggyback, q8h, Routine
- vancomycin
  - 15 mg/kg, IV Piggyback, IV Piggyback, q12h, Routine
- piperacillin-tazobactam
  - 3.375 g, IV Piggyback, IV Piggyback, q6h, Routine
- ampicillin-sulbactam
  - 1.5 g, Injection, IV Piggyback, q6h, Routine
- nafcillin
  - 2 g, Injection, IV Piggyback, q6h, Routine
- acetaminophen
  - 650 mg, Tab, PO, q6h, PRN Pain, Mild (1-3), Routine
- oxyCODONE
  - 5 mg, Tab, PO, q6h, PRN Pain, Moderate (4-7), Routine
- morphine
  - 2 mg, Injection, IV Push, q2h, PRN Pain, Severe (8-10), Routine

**Laboratory**
- CBC
  - Routine, T+1;0400, once, Type: Blood
- BMP
  - Routine, T+1;0400, once, Type: Blood
- CMP
  - Routine, T+1;0400, once, Type: Blood
- ESR
  - Routine, T+1;0400, once, Type: Blood
- ESR, (Erythrocyte Sedimentation Rate)
  - Routine, T+1;0400, once, Type: Blood
- C-Reactive Protein
  - Routine, T+1;0400, once, Type: Blood
- Blood Culture
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Time Study, T;N, q5min, X 2 occurrence

☐ Culture, Wound and Gram Stain
   Routine, T;N, Nurse Collect

Diagnostic Tests: Include Reason for Exam

☐ US Ext Lower Ven Doppler W Compress Bil
   T;N, Reason for Exam: Other, Enter in Comments, Routine, Stretcher
   Comments: Reason: Cellulitis

☐ US Ext Lower Ven Doppler W Compress LT
   T;N, Reason for Exam: Other, Enter in Comments, Routine, Stretcher
   Comments: Reason: Cellulitis

☐ US Ext Lower Ven Doppler W Compress RT
   T;N, Reason for Exam: Other, Enter in Comments, Routine, Stretcher
   Comments: Reason: Cellulitis

☐ US Ext Upper Ven Doppler W Compress Bil
   T;N, Reason for Exam: Other, Enter in Comments, Routine, Stretcher
   Comments: Reason: Cellulitis

☐ US Ext Upper Ven Doppler W Compress LT
   T;N, Reason for Exam: Other, Enter in Comments, Routine, Stretcher
   Comments: Reason: Cellulitis

☐ US Ext Upper Ven Doppler W Compress RT
   T;N, Reason for Exam: Other, Enter in Comments, Routine, Stretcher
   Comments: Reason: Cellulitis

☐ NM Bone/Jt Imag Whole Body
   T;N, Reason for Exam: Other, Enter in Comments, Other reason: cellulitis vs osteomyelitis, Routine, Stretcher

Consults/Notifications/Referrals

☐ ET Consult
   T;N

☐ Consult MD
   T;N

☐ Pharmacy Consult - Vancomycin Dosing
   T;N

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
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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