Physician Orders ADULT: Chronic Obstructive Pulmonary Disease Plan

Initiate Orders Phase
Care Sets/Protocols/PowerPlans
☐ Initiate Powerplan Phase
   Phase: Chronic Obstructive Pulmonary Disease Phase, When to Initiate:

Chronic Obstructive Pulmonary Disease Phase
Non Categorized
☐ Add To Problem List

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:
   Care Team: Anticipated LOS: 2 midnights or more

☐ Notify Physician-Once
   Notify: physician, Notify For: of room number upon arrival to unit

Vital Signs
☐ Vital Signs
   Monitor and Record T,P,R,BP, q2h(std)

Activity
☐ Activity As Tolerated
☐ Up
   With Assistance
☐ Bedrest
☐ Bedrest w/BRP

Food/Nutrition
☐ NPO
☐ Regular Adult Diet
☐ Clear Liquid Diet
   Start at: T,N
☐ Consistent Carbohydrate Diet
   Caloric Level: 1800 Calorie
☐ AHA Diet

Patient Care
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- Smoking Cessation Advice/Counseling
  Motivational coaching and clinic appointment.
- INT Insert/Site Care
  q4day
- Bedside Glucose Nsg
  aches

Respiratory Care
- ABG- RT Collect
  T,N Stat once
- ABG- RT Collect
  Stat once, Preferred Specimen Type: Venous
- O2-BNC
  2 L/min, Special Instructions: Titrate to keep O2 saturation => 92%
  Comments: O2 sat spot check will be done as needed to maintain oxygen level unless otherwise indicated by the physician.
- O2-Venturi Mask
  24 %, Special Instructions: Titrate to keep O2 saturation => 92%
- Oxygen Saturation-Spot Check (RT)
  q-shift
- O2 Sat-Continuous Monitoring (RT)
  q4h(std)
- Spirometry, bedside (Pulmonary Func Test)
- Chest Percussion (RT)
  q4h-Awake
- RT Consult
  Reason COPD Respiratory Therapy Specialist
- RT Consult
  Reason Other; See Special Instruction, Special Instructions: Home O2 assessment 24 hrs prior to discharge.

Continuous Infusion
- Sodium Chloride 0.9%
  1,000 mL, IV, Routine, 75 mL/hr
- sodium chloride 0.9% KCl 20 mEq
  1,000 mL, IV, Routine, 75 mL/hr
- D5 1/2 NS KCl 20 mEq/L
  1,000 mL, IV, Routine, 75 mL/hr
- Dextrose 5% with 0.45% NaCl
  1,000 mL, IV, Routine, 75 mL/hr
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☐ Dextrose 5% in Water
   1,000 mL, IV, Routine, 75 mL/hr
☐ D5W KCL 20 mEq/ L
   1,000 mL, IV, Routine, 75 mL/hr

Medications
☐ +1 Hours predniSONE
   40 mg, Tab, PO, QDay, Routine
☐ +1 Hours predniSONE
   30 mg, Tab, PO, QDay, Routine
☐ +1 Hours SOLUMedrol
   125 mg, Injection, IV, q6h, Routine
☐ +1 Hours azithromycin
   500 mg, Injection, IV Piggyback, q24h, Routine
☐ +1 Hours amoxicillin-clavulanate 875 mg-125 mg oral tablet
   875 mg, Tab, PO, q12h, Routine
☐ +1 Hours Ceftin
   500 mg, Tab, PO, q12h, Routine
☐ +1 Hours cefTRIAXone
   1 g, IV Piggyback, IV Piggyback, q24h, Routine
☐ +1 Hours albuterol
   2.5 mg, Inh Soln, NEB, q4h, Routine
☐ +1 Hours albuterol
   2.5 mg, Inh Soln, NEB, q2h, PRN Shortness of Breath, Routine
☐ +1 Hours ipratropium
   0.5 mg, Inh Soln, NEB, q4h, Routine
☐ +1 Hours ipratropium
   0.5 mg, Inh Soln, NEB, q2h, PRN Shortness of Breath, Routine
☐ +1 Hours albuterol
   180 mcg, MDI, INH, q6h, Routine, (180 mcg = 2 Puffs)
   Comments: 2 puffs
☐ +1 Hours albuterol
   180 mcg, MDI, INH, q2h, PRN Shortness of Breath, Routine, (180 mcg = 2 Puffs)
☐ +1 Hours Serevent Diskus
   50 mcg, MDI, INH, bid, Routine, (50 mcg = 1 puff)
☐ +1 Hours budesonide-formoterol 160 mcg-4.5 mcg/inh inhalation aerosol
   2 puff, MDI, INH, bid, Routine
☐ +1 Hours tiotropium
   18 mcg, MDI, INH, QDay, Routine, (18 mcg = 1 Puff)
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- **+1 Hours** arformoterol
  - 15 mcg, *Inh Soln*, NEB, q12h, Routine
- **+1 Hours** budesonide
  - 0.5 mg, *Inh Soln*, NEB, bid, Routine
- **+1 Hours** guaIFEnesin extended release
  - 1,200 mg, *ER Tablet*, PO, bid, Routine

- VTE MEDICAL Prophylaxis Plan(SUB)*
- Insulin SENSITIVE Sliding Scale Plan(SUB)*
- Insulin STANDARD Sliding Scale Plan(SUB)*
- Insulin RESISTANT Sliding Scale Plan(SUB)*

**Laboratory**
- CBC
  - Routine, T;N, once, Type: Blood
- BMP
  - Routine, T;N, once, Type: Blood
- CMP
  - Routine, T;N, once, Type: Blood
- Magnesium Level
  - Routine, T;N, once, Type: Blood
- Phosphorus Level
  - Routine, T;N, once, Type: Blood
- BNP
  - Routine, T;N, once, Type: Blood
- BNP Pro
  - Routine, T;N, once, Type: Blood
- CK
  - Routine, T;N, once, Type: Blood
- Troponin-I
  - Routine, T;N, once, Type: Blood
- Respiratory Culture and Gram Stain
  - Routine, T;N, Specimen Source: Sputum, Nurse Collect

**Diagnostic Tests**
- Chest 1VW Frontal
  - T;N, *Reason for Exam: Chronic Obstructive Pulmonary Disease*, Routine, Portable
- Chest 2VW Frontal & Lat
  - T;N, *Reason for Exam: Chronic Obstructive Pulmonary Disease*, Routine, Stretcher
- EKG
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Start at: T;N, Priority: Routine, COPD

☐ CT Thorax WO Cont
☐ CT Thorax W Cont Plan(SUB)*

Consults/Notifications/Referrals

☐ Physical Therapy Initial Eval and Tx
  Special Instructions: Evaluate for pulmonary rehab, 0

☐ Occupational Therapy Initial Eval and Tx

☐ Medical Social Work Consult
  Reason: Assistance at Discharge, Assist with discharge meds and discharge planning.

☐ Case Management Consult
  Reason: Discharge Planning, Assist with discharge meds and discharge planning.

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