



## Physician Orders ADULT: Medical Response Team Standing Orders Protocol Plan

### Initiate Orders Phase

#### Care Sets/Protocols/PowerPlans

- ☒ Initiate Powerplan Phase

*When to Initiate: Other-See Special Instructions, If MRT is notified per MD, Condition H or any associate, review and Initiate appropriate phase below.*

### Signs of Resp Distress Standing Order Phase

#### Non Categorized

Criteria for use: Patient complains of SOB, work required to breathe increases, cyanosis, family states patient cannot breathe.(NOTE)\*

#### Vital Signs

- ☒ Vital Signs  
*Stat, once*

#### Patient Care

- ☒ INT Insert/Site Care  
*Start, INT*
- ☒ Suction Patient  
*PRN, Suction: Oral, For airway management*
- ☒ Suction Patient  
*PRN, Suction: Nasal Suction: Nasotracheal, For airway management*
- ☒ Accucheck Nsg  
*Stat*

#### Nursing Communication

- ☒ Nursing Communication  
*STAT, obtain qualified physician interpretation of EKG*

#### Respiratory Care

- ☒ Oxygen Saturation-Spot Check (RT)  
*Stat*
- ☒ Rescue Oxygen Therapy  
*Routine, Special Instructions: Oxygen to increase O2 saturation to 92%*
- ☒ ISTAT Blood Gases (RT Collect)  
*Stat, once, Special Instructions: for agonal breathing; respiratory distress, respiratory rate greater than 22, or SPO2 less than 88%, T;N*

#### Continuous Infusion

- ☒ NS Bolus  
*500 mL, Injection, IV Piggyback, once, STAT, 1,000 mL/hr*  
*Comments: for SBP greater than 90mmHg or MAP less than 60mmHg may give once and call physician.*

#### Medications

- ☒ +1 Hours D50W Syringe  
*50 mL, Injection, IV Push, once, PRN Hypoglycemia, STAT, for Accucheck less than 60mg/dL*

#### Laboratory





**Physician Orders ADULT: Medical Response Team Standing Orders Protocol Plan**

- ☒ CMP  
*STAT, T;N, once, Type: Blood*
- ☒ CBC  
*STAT, T;N, once, Type: Blood*
- ☒ Lactate Level  
*STAT, T;N, once, Type: Blood*

**Diagnostic Tests**

- ☒ EKG  
*Start at: T;N, Priority: Stat, Reason: Other, specify, Respiratory Distress, Transport: Portable*
- ☒ Chest 1 VW  
*T;N, Reason for Exam: Respiratory Distress, Stat, Portable*

**Consults/Notifications/Referrals**

- ☒ Notify Physician-Once  
*Notify For: Stridor*

**Signs of Chest Pain Standing Orders Phase**

**Non Categorized**

Criteria for use: Chest pain/discomfort, Chest: Upper abdomen, chest, upper back, throat, jaw, shoulders, upper arms, Pain: Discomfort or other abnormal sensation such as gas, indigestion, fullness, pressure, tightness, or heaviness.(NOTE)\*

**Vital Signs**

- ☒ Vital Signs  
*Stat, once*

**Patient Care**

- ☒ INT Insert/Site Care  
*Start INT*
- ☒ Oxygen Sat Monitoring NSG  
*Stat, once*
- ☒ Oxygen Sat Monitoring NSG  
*Routine, q15min For 4 hr, PRN*
- ☒ Accucheck Nsg  
*Stat*

**Nursing Communication**

- ☒ Nursing Communication  
*STAT, obtain qualified physician, interpretation of EKG For STEMI; contact physician immediately and implement ordered STEMI interventions per physician order*
- ☒ Nursing Communication  
*STAT, if cardiologist on case; call cardiologist immediately*

**Respiratory Care**

- ☒ Rescue Oxygen Therapy  
*Routine, Special Instructions: Oxygen to increase O2 saturation to 90%*





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- ☒ Oxygen Saturation-Spot Check (RT)  
*Stat*

#### Continuous Infusion

- ☒ NS Bolus  
*500 mL, Injection, IV, N/A, STAT, (for 1 dose ), ( infuse over 1 hr )*  
*Comments: For SBP less than 90mmHg or MAP less than 60mmHg may give once and call physician.*

#### Medications

- ☒ **+1 Hours** aspirin  
*324 mg, Chew tab, PO, once, STAT*  
*Comments: If allergic to ASA hold and contact physician*
- OR(NOTE)\*
- ☐ **+1 Hours** aspirin  
*300 mg, Supp, PR, once, STAT, Give aspirin PR if unable to take PO*  
*Comments: If allergic to ASA hold and contact physician*
- ☒ **+1 Hours** nitroglycerin  
*0.4 mg, Tab, SL, q15min, Chest Pain, STAT, (for 3 dose )*  
*Comments: Give after EKG completed only if MAP greater than 60mm HG or SBP greater than 90mmHG. Call physician after 1st dose.*

#### Laboratory

- ☒ Troponin-I  
*STAT, T;N, once, Type: Blood*
- ☒ CMP  
*STAT, T;N, once, Type: Blood*
- ☒ CBC  
*STAT, T;N, once, Type: Blood*

#### Diagnostic Tests

- ☒ EKG  
*Start at: T;N, Priority: Stat, Reason: Chest Pain/Angina/MI, send to ED for immediate interpretation*
- ☒ Chest 1 VW  
*T;N, Reason for Exam: Chest Pain, Stat, Portable*

#### Signs of Mental Change Standing Order Phase

##### Non Categorized

Criteria for use: Acute confusion, cognitive impairment, loss of mental capacity, memory impairment, or MRT call for Suspected CVA. Comment: for signs and symptoms of suspected stroke such as Facial Droop , Arm Drift, Abnormal or loss of speech, aphasia, agraphia, acalculia, apraxia, gaze preference, visual field deficit, hemiparesis, hemisensory loss, neglect, flat affect, severe headache with no known cause, confusion, dizziness, loss of balance, or loss of sensation Or increase in NIHSS greater than 4pts((NOTE)\*

#### Vital Signs

- ☒ Vital Signs  
*Stat, once*





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- ☒ Vital Signs  
*Routine, q15min, For 4 hr, PRN*

### Patient Care

- ☒ Accucheck Nsg  
*Stat, once*
- ☒ INT Insert/Site Care  
*Start INT*

### Nursing Communication

- ☒ Nursing Communication  
*STAT, obtain qualified physician interpretation of EKG*
- ☒ Nursing Communication  
*STAT, obtain qualified physician MD to call BAT team 516-2287*
- ☒ Nursing Communication  
*STAT, obtain last known "well" time before symptoms*

### Respiratory Care

- ☒ Oxygen Saturation-Spot Check (RT)  
*Stat*
- ☒ Rescue Oxygen Therapy  
*Routine, Special Instructions: Oxygen to increase O2 Saturation to 92%*
- ☒ ISTAT Blood Gases (RT Collect)  
*Stat, once, Special Instructions: for agonal breathing; respiratory distress, respiratory rate greater than 22, or SPO2 less than 88%, T;N*

### Continuous Infusion

- ☒ NS Bolus  
*500 mL, Injection, IV, N/A, STAT, (for 1 dose ), ( infuse over 1 hr )  
Comments: for SBP less than 90 or MAP less than 60mmHG may give once and call physician*

### Medications

- ☒ **+1 Hours** D50W Syringe  
*50 mL, Injection, IV Push, N/A, Other, specify in Comment, STAT, (for 1 dose ), For Accucheck less than 60mg/dL  
Comments: For Accucheck less than 60mg/dL.*
- ☒ **+1 Hours** glucagon  
*1 mg, Injection, Subcutaneous, N/A, PRN, STAT, (for 1 dose ), For Accucheck less than 60mg/dL;  
Give if no IV access*

### Laboratory

- ☒ CMP  
*STAT, T;N, once, Type: Blood*
- ☒ CBC  
*STAT, T;N, once, Type: Blood*





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- ☒ Lactate Level  
STAT, T;N, once, Type: Blood
- ☒ Blood Culture  
STAT, T;N, q5min 2 occurrence, Specimen Source: Peripheral Blood  
Comments: For a temp less than 36 C or greater than 38 C.

**Diagnostic Tests**

- ☒ Electrocardiogram  
Start at: T;N, Priority: Stat, Reason: Syncope, Transport: Stretcher
- ☒ Chest 1 VW  
Reason for Exam: Other, Enter in Comments, Stat, Portable  
Comments: Change in level of consciousness.  
Place CT below if accucheck within normal limits and stroke suspected:(NOTE)\*
- ☒ CT Head/Brain W/O Cont  
T;N, Reason for Exam: Confusion, Stat, Stretcher  
Comments: For signs and symptoms of suspected stroke such as Facial Droop , Arm Drift, Abnormal or loss of speech, aphasia, agraphia, acalculia, apraxia, gaze preference, visual field deficit, hemiparesis, hemi-sensory loss, neglect, flat affect, severe headache with no known cause, confusion, dizziness, loss of balance, or loss of sensation.

\_\_\_\_\_  
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

