Physician Orders PEDIATRIC: LEB Pulm Cystic Fibrosis Admit Plan

Initiate Orders Phase
Care Sets/Protocols/PowerPlans

☑️ Initiate Powerplan Phase  
  Phase: LEB Pulmonary CF Admit Phase, When to Initiate: ____________________________

LEB Pulm Cystic Fibrosis Admit Phase

Admission/Transfer/Discharge

☐ 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 For: of room number on arrival to unit

Vital Signs

☑️ Vital Signs

☐ Monitor and Record T,P,R,BP (DEF)*

☐ Monitor and Record T,P,R,BP, q4h(std)

Activity

☑️ Activity As Tolerated  
  Up Ad Lib, must wear mask when leaving room, wash hands before leaving room, must remain at least 3 ft away from other cystic fibrosis patients, no visiting in other cystic fibrosis patient rooms

Food/Nutrition

☐ NPO  
  Start at: T

☐ Breastfeed

☐ LEB Formula Orders Plan(SUB)*

☐ High Calorie High Protein Diet  
  3 meals and 3 high calorie snacks limited 1 diet carbonated soda/day, discourage grazing, no concentrated sweets.

☐ Clear Liquid Diet  
  Start at: T;N

Patient Care

☐ Advance Diet As Tolerated  
  Start clear liquids and advance to regular diet as tolerated.

☑️ Isolation Precautions  
  Isolation Type: Contact Precautions, must wear mask when out of room, must remain at least 6 ft away from other cystic fibrosis patients, no visiting in other cystic fibrosis patient rooms, for patients with multi-resistant pseudomonas or colonized B. cep

☑️ Nursing Communication
Physician Orders PEDIATRIC: LEB Pulm Cystic Fibrosis Admit Plan

☐ Intake and Output
  Routine, q2h(std), include stools
☐ Daily Weights
  Routine, qam
☐ Weight
  Routine, MonThu
☐ O2 Sat Spot Check-NSG
  T;N, with vital signs, discontinue if no oxygen required for 24 hours
☐ O2 Sat Spot Check-NSG
  T;N, Sleeping O2 sat nightly until O2 sat>92%
☐ O2 Sat Monitoring NSG
☐ Cardiopulmonary Monitor
  T;N Routine, Monitor Type: CP Monitor
☐ Bedside Glucose Nsg
  Routine, achs
☐ Bedside Glucose Nsg
  Routine, once, overnight between midnight and 0300.
☐ Instruct/Educate
  Instruct: patient and caregiver, on hand hygiene before leaving room
☐ Implanted Port Access
  Use for blood draw and medication administration
☐ IV Insert/Site Care LEB
  Routine
  Place PICC line insertion plan order below for patients needing PICC line access. Place PICC Consult for Non-Line Placement in Consult section for patients needing port a cath access(NOTE)*
☐ LEB PICC Line Insertion Plan(SUB)*

Respiratory Care
☐ Oxygen Delivery
  Special Instructions: Titrate to keep O2 sat >92%. Wean to room air
☐ Spirometry, bedside (Pulmonary Func Test)
  Routine MonThu, Special Instructions: For patients unable to leave room.
☐ Spirometry (Pulmonary Function Test)
  Routine, Special Instructions: MonThu
☐ RT Communication
  Special Instructions: CF order of inhalation medication administration: 1. albuterol 2. hypertonic saline 3. dornase alfa 4. airway clearance 5. steroid 6. inhaled antibiotic
☐ RT Assess and Call
  Routine
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- Initiate Pediatric CPT/Hyperinflation Protocol

**Continuous Infusion**
- Sodium Chloride 0.9%
  - 1,000 mL, IV, Routine, mL/hr
- D5 1/2NS
  - 1,000 mL, IV, Routine, mL/hr
- D5 1/4NS
  - 1,000 mL, IV, Routine, mL/hr
- D5 1/2 NS KCl 20 mEq/L
  - 1,000 mL, IV, Routine, mL/hr
- D5 1/4 NS KCl 20 mEq/L
  - 1,000 mL, IV, Routine, mL/hr

**Medications**
- +1 Hours acetaminophen
  - 10 mg/kg, Liq, PO, q4h, PRN Pain or Fever, Routine, Max Dose = 75 mg/kg/day up to 4g/day
  - 80 mg, Chew tab, PO, q4h, PRN Pain or Fever, Routine, Max Dose = 75 mg/kg/day up to 4g/day
  - 325 mg, Tab, PO, q4h, PRN Pain or Fever, Routine, Max Dose = 75 mg/kg/day up to 4g/day
- +1 Hours acetaminophen
  - 10 mg/kg, Supp, PR, q4h, PRN Pain or Fever, Routine, Max Dose = 75 mg/kg/day up to 4g/day
- +1 Hours albuterol (MDI)
  - puff, MDI, INH, bid, Routine, (1 puff = 90 mcg), before airway clearance
- +1 Hours HyperSal 7% Inhalation Solution
  - ______ mL, Inh Soln, NEB, bid, Routine
  Comments: give after bronchodilator and before airway clearance
- +1 Hours sodium chloride 3% inhalation solution
  - ______ mL, Inh Soln, NEB, bid, Routine, give after bronchodilator and before airway clearance
- +1 Hours dornase alfa
  - 2.5 mg, Inh Soln, NEB, QDay, Routine (DEF)*
  Comments: via PARI nebulizer (after hypertonic saline and before airway clearance)
  - 2.5 mg, Inh Soln, NEB, bid, Routine
  Comments: via PARI nebulizer (after hypertonic saline and before airway clearance)
- +1 Hours tobramycin inhalation soln
  - 300 mg, Inh Soln, NEB, bid, Routine, via PARI nebulizer (after airway clearance)
- +1 Hours colistimethate
  - 75 mg, Inh Soln, NEB, q12h, Routine, via PARI nebulizer (after airway clearance) Max dose = 150 mg
- +1 Hours Sodium Chloride 0.9%
Physician Orders PEDIATRIC: LEB Pulm Cystic Fibrosis Admit Plan

250 mL, IV, Routine, or medication administration

+1 Hours template non-formulary medication

75 mg, Inh Soln, NEB, tid, Routine, Continuation of a Home Medication, For children greater than or equal to 7 years and adolescents

Comments: via Altera nebulizer system

Anti-infectives

+1 Hours tobramycin

   5 mg/kg, Ped Injectable, IV Piggyback, q12h, Routine, (for 14 day ) (DEF)*
   Comments: for ______ doses, for patients greater than or equal to 8 years old

   3.3 mg/kg, Ped Injectable, IV Piggyback, q8h, Routine, (for 14 day )
   Comments: for ______ doses, for patients less than 8 years old

+1 Hours piperacillin-tazobactam

   100 mg/kg, Ped Injectable, IV Piggyback, q6h, Routine, (for 14 day )
   Comments: (_____mg of piperacillin component) for ______ doses, (1125mg of Zosyn contains 1000mg of piperacillin), Max dose = 12 grams/day of piperacillin component.

+1 Hours cefTAZidime

   50 mg/kg, Ped Injectable, IV Piggyback, q8h, Routine, (for 14 day ), Max dose = 6 grams/day
   Comments: for ______ doses.

+1 Hours cefepime

   50 mg/kg, Ped Injectable, IV Piggyback, q8h, Routine, (for 14 day ), Max dose = 2 grams
   Comments: for ______ doses.

+1 Hours ciprofloxacin

   15 mg/kg, Oral Susp, PO, q12h, Routine, (for 14 day ), Max dose = 1.5 grams/day (DEF)*

   250 mg, Tab, PO, q12h, Routine, (for 14 day ), Max dose = 1.5 grams/day

   500 mg, Tab, PO, q12h, Routine, (for 14 day ), Max dose = 1.5 grams/day

   750 mg, Tab, PO, q12h, Routine, (for 14 day ), Max dose = 1.5 grams/day

+1 Hours meropenem

   40 mg/kg, Ped Injectable, IV Piggyback, q8h, Routine, (for 14 day ), Max dose = 2 grams

+1 Hours vancomycin

   1 g, Ped Injectable, IV Piggyback, q8h, Routine, (for 14 day ), Max dose = 1 gram, for patients greater than or equal to 50 kg (DEF)*

   15 mg/kg, Ped Injectable, IV Piggyback, q6h, Routine, (for 14 day ), Max dose = 1 gram

+1 Hours sulfamethoxazole-trimethoprim susp

   10 mg/kg, Susp, PO, q12h, Routine, (for 14 day ), (5 mL = 40 mg trimethoprim)
   Comments: Dose expressed as mg of trimethoprim

+1 Hours sulfamethoxazole-trimethoprim SS

   80 mg, Tab, PO, q12h, Routine, (for 14 day ), (80 mg of trimethoprim = 1 Tab)
   Comments: Dose expressed as mg of trimethoprim
Physician Orders PEDIATRIC: LEB Pulm Cystic Fibrosis Admit Plan

+1 Hours sulfamethoxazole-trimethoprim DS
   160 mg, DS Tab, PO, q12h, Routine, (for 14 day), (160 mg of trimethoprim = 1 DS Tab)
   Comments: Dose expressed as mg of trimethoprim. Max dose = 320 mg of trimethoprim/day

+1 Hours azithromycin
   250 mg, Susp, PO, MWF, Routine, anti-inflammatory dose, patient less than 40kg (DEF)*
   500 mg, Susp, PO, MWF, Routine, anti-inflammatory dose, patient greater than 40kg

+1 Hours azithromycin
   500 mg, Tab, PO, MWF, Routine, anti-inflammatory dose, patient greater than 40kg (DEF)*
   250 mg, Tab, PO, MWF, Routine, anti-inflammatory dose, patient less than 40kg

+1 Hours Zyvox
   10 mg/kg, Ped Injectable, IV Piggyback, q8h, Routine, (for 14 day) (DEF)*
   Comments: less than 8 years old
   10 mg/kg, Ped Injectable, IV Piggyback, q12h, Routine, (for 14 day)
   Comments: greater than or equal to 8 years old
   10 mg/kg, Oral Susp, PO, q8h, Routine, (for 14 day)
   Comments: less than 8 years old
   10 mg/kg, Oral Susp, PO, q12h, Routine, (for 14 day)
   Comments: greater than or equal to 8 years old, Max dose = 600 mg

Gastrointestinal Agents

+1 Hours lansoprazole
   15 mg, Tab, PO, QDay, Routine, (Solutab) (DEF)*
   30 mg, Tab, PO, QDay, Routine, (Solutab)

+1 Hours MiraLax
   17 g, Powder, PO, QDay, Routine

+1 Hours ursodiol
   15 mg/kg, Oral Soln, PO, bid, Routine (DEF)*
   15 mg/kg, Tab, PO, bid, Routine

+1 Hours ADEKs oral tablet, chewable
   tab, Chew tab, PO, QDay, Routine
   Comments: Take with meals and enzymes

+1 Hours Antioxidant Multiple Vitamins (A,D,E,K-intensive) and Minerals oral liquid

+1 Hours Adeks
   cap, Cap, PO, QDay, Routine
   Comments: Take with meals and enzymes

+1 Hours Vitamin D3 1000 intl units oral tablet
   1,000 IntUnits, Tab, PO, QDay, Routine

LEB Pulm Cystic Fibrosis Admit Plan 41701 PP QM1108 Rev071216   Page 5 of 9
Physician Orders PEDIATRIC: LEB Pulm Cystic Fibrosis Admit Plan

+1 Hours Creon 3000 units oral delayed release capsule
  - 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  - 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

+1 Hours Creon 6 delayed release capsule
  - 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  - 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

+1 Hours Creon 12 delayed release capsule
  - 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  - 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

Creon 24 delayed release capsule
  - 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  - 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

+1 Hours Zenpep 3000 units-10,000 units-16,000 units oral delayed release capsule
  - 1 cap, EC Capsule, PO, wm, Routine (DEF)*
  - 1 cap, EC Capsule, PO, prn, PRN Snacks, Routine

+1 Hours Zenpep 5 oral delayed release capsule
  - 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  - 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

+1 Hours Zenpep 10 oral delayed release capsule
  - 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  - 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

+1 Hours Zenpep 15 oral delayed release capsule
  - 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  - 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

+1 Hours Zenpep 20 oral delayed release capsule
  - 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  - 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

+1 Hours Zenpep 25,000 units-85,000 units-136,000 units oral delayed release capsule
  - 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  - 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

+1 Hours Pancreaze 4200 units-17,500 units-10,000 units oral delayed release capsule
  - 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  - 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine
Physician Orders PEDIATRIC: LEB Pulm Cystic Fibrosis Admit Plan

☐ +1 Hours Pancreaze 10,500 units-43,750 units-25,000 units oral delayed release capsule
  ☐ 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  ☐ 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

☐ +1 Hours Pancreaze 21,000 units-61,000 units-37,000 units oral delayed release capsule
  ☐ 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  ☐ 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

☐ +1 Hours Pancreaze 16,800 units-70,000 units-40,00 units oral delayed release capsule
  ☐ 1 cap, ER Capsule, PO, wm, Routine (DEF)*
  ☐ 1 cap, ER Capsule, PO, prn, PRN Snacks, Routine

Vitamin K
☐ +1 Hours phytonadione
  5 mg, Tab, PO, MWF, Routine
  Comments: Take with meals and enzymes

Laboratory
☐ CBC
  Routine, T;N, once, Type: Blood
☐ CMP
  Routine, T;N, once, Type: Blood
☐ PT
  Routine, T;N, once, Type: Blood
☐ PTT
  Routine, T;N, once, Type: Blood
☐ IgE Antibody
  Routine, T;N, once, Type: Blood
☐ Cystic Fibrosis Carrier Screen
  Routine, T;N, once, Type: Blood
☐ Pancreatic Elastase I
  Routine, T;N, Type: Stool, Nurse Collect
☐ Pregnancy Screen Serum
  Routine, T;N, once, Type: Blood
☐ Cystic Fibrosis Respiratory Culture
  Routine, T;N, Specimen Source: Sputum Pharynx, Nurse Collect, Method: Swab
☐ AFB Culture and Smear
  Routine, T;N, Specimen Source: Sputum Pharynx
☐ Urinalysis w/Reflex Microscopic Exam
  Routine, T;N, once, Type: Urine, Nurse Collect
☐ Vit D 25OH
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Routine, T;N, once, Type: Blood

Diagnostic Tests
- Chest PA & Lateral
  - T;N, Reason for Exam: Other, Enter in Comments, Routine, Wheelchair (DEF)*
    Comments: Cystic Fibrosis Exacerbation
  - T;N, Reason for Exam: Line Placement, Routine, Wheelchair
- KUB
  - T;N, Routine, Wheelchair
- KUB Flat and Upright
  - T;N, Routine, Wheelchair
- LEB CT Chest W Cont Plan(SUB)*
- LEB CT Chest WO Plan(SUB)*
- LEB CT Abdomen W/WO Cont Plan(SUB)*
- LEB GI Upper W/WO Delayed Films W KUB w/Delay Diet Plan(SUB)*
- LEB GI Upper W/WO Delayed Films WO KUB w/Delay Diet Plan(SUB)*
- LEB GI Upper W Sm Bowel W Mult Serial Films w/Delay Diet Plan(SUB)*
- LEB Esophogram Plan w/Delay Diet(SUB)*

Consults/Notifications/Referrals
- Notify Resident-Continuing
- Notify Resident-Once
- Consult MD Group
  - Group: ULPS Endo, Reason for Consult: assistance with CFRD management
- Consult MD Group
  - Group: ULPS ID
- Consult MD Group
  - Group: ULPS Gastro
- Consult MD Group
  - Group: UT Pediatrics GI
- Consult MD Group
  - Group: UTMG Pulmonology
- Consult MD Group
  - Group: Hospice and Palliative Care - xcov
- Consult MD
- Consult MD Group
  - Group: UTMG Ob/Gyn
- PICC Consult Ped - for Non Line Placement
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*Routine, port a cath access*

- ☑ Consult Wound Care Nurse
- ☑ Dietitian Consult/Nutrition Therapy
- ☑ PT Ped Eval & Tx
- ☑ Medical Social Work Consult
- ☑ Child Life Consult
  
  *T;N*

- ☑ Consult School Teacher
- ☑ Consult Clinical Pharmacist

*Reason: continuous ceftazadine therapy*

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<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Physician’s Signature</th>
<th>MD Number</th>
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**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