Physician Orders PEDIATRIC: LEB Bone/Joint Infection Admit Plan

Initiate Orders Phase
Care Sets/Protocols/PowerPlans
☐ Initiate Powerplan Phase

Phase: LEB Bone/Joint Infection Admit Phase, When to Initiate: ______________________

LEB Bone/Joint Infection 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

Food/Nutrition
☐ NPO
☐ Breastfeed
☐ LEB Formula Orders Plan(SUB)*
☐ Regular Pediatric Diet
☐ 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
☐ Intake and Output
Routine, q2h(std)
☐ Daily Weights
Routine, qEve
☐ O2 Sat Spot Check-NSG
with vital signs
☐ O2 Sat Monitoring NSG
☐ Cardiopulmonary Monitor
Routine, Monitor Type: CP Monitor

Respiratory Care
☐ Oxygen Delivery
Special Instructions: Titrate to keep O2 sat greater than or equal to 92%. Wean to room air.

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

Medications
☐ +1 Hours acetaminophen
  ☐ 10 mg/kg, Liq, PO, q4h, PRN Pain, Mild or Fever, Routine, Max Dose = 75 mg/kg/day up to 4g/day (DEF)*
  ☐ 325 mg, Tab, PO, q4h, PRN Pain, Mild 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
  Comments: May give PR if unable to take PO

☐ +1 Hours acetaminophen-HYDROcodone 325 mg-7.5 mg/15 mL oral solution
  0.15 mg/kg, Elixir, PO, q6h, PRN Pain, Moderate (4-7), Routine, (for 5 day ), (5 mL = 2.5 mg HYDROcodone), Max dose = 10mg

☐ +1 Hours acetaminophen-HYDROcodone 325 mg-5 mg oral tablet
  1 tab, Tab, PO, q4h, PRN Pain, Moderate (4-7), Routine, (for 5 day ), (1 tab = 5 mg HYDROcodone), Max dose = 10 mg

☐ +1 Hours ondansetron
  0.1 mg/kg, Oral Susp, PO, q8h, PRN Nausea/Vomiting, Routine, Max dose = 8mg (DEF)*
  4 mg, Orally Disintegrating Tab, PO, q8h, PRN Nausea/Vomiting, Routine

☐ +1 Hours ondansetron
  0.1 mg/kg, Ped Injectable, IV Push, q8h, PRN Nausea/Vomiting, Routine, Max dose = 8mg
  Comments: May give IV if unable to take PO

Anti-infectives
☐ +1 Hours clindamycin
  15 mg/kg, Ped Injectable, IV Piggyback, q8h, Routine, (for 14 day ), Reason for ABX: Bone/Joint Infection, Max dose = 4.8 grams/day

☐ +1 Hours vancomycin
  15 mg/kg, Ped Injectable, IV Piggyback, q6h, Routine, (for 14 day ), Reason for ABX: Bone/Joint Infection, Max dose = 4 grams/day

☐ +1 Hours cefTRIAXone
  50 mg/kg, Ped Injectable, IV Piggyback, q12h, Routine, (for 14 day ), Reason for ABX: Bone/Joint Infection, Max dose = 4 grams/day

Laboratory
☐ Blood Culture
  Routine, T;N, once, Specimen Source: Peripheral Blood, Nurse Collect

☐ CBC
  Routine, T;N, once, Type: Blood

☐ CRP
  Routine, T;N, once, Type: Blood

Diagnostic Tests
☐ Chest PA & Lateral
  T;N, Routine, Wheelchair

☐ Bone Scan (Cellulitis/Osteo)
  T;N, Reason for Exam: Osteomyelitis, Routine, Wheelchair

Consults/Notifications/Referrals
☐ Notify Resident-Continuing
☐ Notify Resident-Once
☐ Consult MD Group
☐ Consult MD
**Physician Orders PEDIATRIC: LEB Bone/Joint Infection Admit Plan**

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

**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

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