Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

Initiate Orders Phase
Care Sets/Protocols/PowerPlans
☐ Initiate Powerplan Phase
  T;N, Phase: Kidney-Panc/Panc Transp Re-Admit Phase, When to Initiate:

Kidney-Panc/Panc Transp Re-Admit Phase
Admission/Transfer/Discharge
☐ Patient Status Initial Inpatient
  ☐ T;N, Admitting Physician: ________________________________
  Reason for Visit:
  Bed Type: Critical Care, Unit Location: 7East (DEF)*
  Care Team: ___________________________ Anticipated LOS: 2 midnights or more

  ☐ T;N, Admitting Physician: ________________________________
  Reason for Visit:
  Bed Type: Med-Surg, Unit Location: 10East
  Care Team: ___________________________ Anticipated LOS: 2
  midnights or more

  ☐ T;N, Admitting Physician: ________________________________
  Reason for Visit:
  Bed Type: Med-Surg, Unit Location: 10 Thomas
  Care Team: ___________________________ Anticipated LOS: 2 midnights
  or more

Vital Signs
☐ Vital Signs Per Unit Protocol
  T;N, Monitor and Record T,P,R,BP, include orthostatic blood pressure with vital
  signs

Activity
☐ Out Of Bed
  T;N, Up As Tolerated

☐ Out Of Bed
  T;N, Up To Chair

☐ Bedrest w/BRP
  T;N

Food/Nutrition
☐ NPO
  Start at: T;N, Instructions: NPO except for medications

☐ NPO
  Start at: T;2359, Instructions: NPO except for medications

☐ Regular Adult Diet
  Start at: T;N

☐ Renal Diet On Dialysis
  Start at: T;N, Adult (>18 years)
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

- Renal Diet Not On Dialysis
  Start at: T;N, Adult (>18 years)
- Consistent Carbohydrate Diet
  Start at: T;N, 1800 Calorie (DEF)*
  Start at: T;N, 2000 Calorie

Patient Care
- ☑ VTE MEDICAL Prophylaxis Plan(SUB)*
- ☑ Daily Weights
  T;N, Routine
- ☑ Intake and Output
  T;N, Routine, q8h(std)
- ☑ Telemetry
  T;N, Routine
- ☑ Whole Blood Glucose Nsg
  T;N,achs (DEF)*
  T;N, q6h(std), If tolerating PO or intermittent feeds, may decrease frequency of
  Whole Blood Glucose Nsg toachs
  T;N, q4h(std), If tolerating PO or intermittent feeds, may decrease frequency of
  Whole Blood Glucose Nsg toachs
- ☑ IV Insert/Site Care
  T;N, Routine
- ☑ Nursing Communication
  T;N, If temperature greater than 38.3 degrees C place orders for Blood Culture
  x 2, Urine Culture and gram stain for sputum.

Continuous Infusion
- ☑ +1 Hours D5 1/2NS
  1,000 mL, IV, Routine, 50 mL/hr
- ☑ +1 Hours Normal Saline
  1,000 mL, IV, Routine, 50 mL/hr
- ☑ +1 Hours 1/2NS
  1,000 mL, IV, Routine, 50 mL/hr

Medications
- Immunosuppression Medications
  ☑ +1 Hours Prograf
    - 0.5 mg, Cap, PO, bid, Routine, To be given at 0600  Draw level prior to
      administration of 0600 dose. (DEF)*
      Comments: For organ transplant
    - 1 mg, Cap, PO, bid, Routine, To be given at 0600  Draw level prior to
      administration of 0600 dose.
      Comments: For organ transplant
    - 2 mg, Cap, PO, bid, Routine, To be given at 0600  Draw level prior to
      administration of 0600 dose.
      Comments: For organ transplant
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

- 3 mg, Cap, PO, bid, Routine, To be given at 0600
  - Draw level prior to administration of 0600 dose.
  - Comments: For organ transplant

- 4 mg, Cap, PO, bid, Routine, To be given at 0600
  - Draw level prior to administration of 0600 dose.
  - Comments: For organ transplant

- 5 mg, Cap, PO, bid, Routine, To be given at 0600
  - Draw level prior to administration of 0600 dose.
  - Comments: For organ transplant

- 6 mg, Cap, PO, bid, Routine, To be given at 0600
  - Draw level prior to administration of 0600 dose.
  - Comments: For organ transplant

- 7 mg, Cap, PO, bid, Routine, To be given at 0600
  - Draw level prior to administration of 0600 dose.
  - Comments: For organ transplant

- 8 mg, Cap, PO, bid, Routine, To be given at 0600
  - Draw level prior to administration of 0600 dose.
  - Comments: For organ transplant

- +1 Hours Prograf
  - 0.5 mg, Cap, PO, qam, Routine, To be given at 0600
    - Draw level prior to administration of 0600 dose. (DEF)*
    - Comments: For organ transplant

  - 1 mg, Cap, PO, qam, Routine, To be given at 0600
    - Draw level prior to administration of 0600 dose.
    - Comments: For organ transplant

  - 2 mg, Cap, PO, qam, Routine, To be given at 0600
    - Draw level prior to administration of 0600 dose.
    - Comments: For organ transplant

  - 3 mg, Cap, PO, qam, Routine, To be given at 0600
    - Draw level prior to administration of 0600 dose.
    - Comments: For organ transplant

  - 4 mg, Cap, PO, qam, Routine, To be given at 0600
    - Draw level prior to administration of 0600 dose.
    - Comments: For organ transplant

  - 5 mg, Cap, PO, qam, Routine, To be given at 0600
    - Draw level prior to administration of 0600 dose.
    - Comments: For organ transplant

  - 6 mg, Cap, PO, qam, Routine, To be given at 0600
    - Draw level prior to administration of 0600 dose.
    - Comments: For organ transplant

  - 7 mg, Cap, PO, qam, Routine, To be given at 0600
    - Draw level prior to administration of 0600 dose.
    - Comments: For organ transplant
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

☐ 8 mg, Cap, PO, qam, Routine, To be given at 0600  Draw level prior to administration of 0600 dose.
   Comments: For organ transplant

☐ +1 Hours Prograf
   ☐ 0.5 mg, Cap, PO, qpm, Routine, To be given at 1800 (DEF)*
      Comments: For organ transplant
   ☐ 1 mg, Cap, PO, qpm, Routine, To be given at 1800
      Comments: For organ transplant
   ☐ 2 mg, Cap, PO, qpm, Routine, To be given at 1800
      Comments: For organ transplant
   ☐ 3 mg, Cap, PO, qpm, Routine, To be given at 1800
      Comments: For organ transplant
   ☐ 4 mg, Cap, PO, qpm, Routine, To be given at 1800
      Comments: For organ transplant
   ☐ 5 mg, Cap, PO, qpm, Routine, To be given at 1800
      Comments: For organ transplant
   ☐ 6 mg, Cap, PO, qpm, Routine, To be given at 1800
      Comments: For organ transplant
   ☐ 7 mg, Cap, PO, qpm, Routine, To be given at 1800
      Comments: For organ transplant
   ☐ 8 mg, Cap, PO, qpm, Routine, To be given at 1800
      Comments: For organ transplant

Neoral and Gengraf are NOT interchangeable with Sandimmune.(NOTE)*

☐ +1 Hours Neoral
   ☐ 25 mg, Cap, PO, bid, Routine (DEF)*
      Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.
   ☐ 50 mg, Cap, PO, bid, Routine
      Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.
   ☐ 75 mg, Cap, PO, bid, Routine
      Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.
   ☐ 100 mg, Cap, PO, bid, Routine
      Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.
   ☐ 200 mg, Cap, PO, bid, Routine
      Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.

☐ +1 Hours Gengraf
   ☐ 25 mg, Cap, PO, bid, Routine (DEF)*
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.

☐ 50 mg, Cap, PO, bid, Routine
   Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.

☐ 75 mg, Cap, PO, bid, Routine
   Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.

☐ 100 mg, Cap, PO, bid, Routine
   Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.

☐ 200 mg, Cap, PO, bid, Routine
   Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.

☐ +1 Hours SandIMMUNE

☐ 25 mg, Cap, PO, bid, Routine (DEF)*
   Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.

☐ 50 mg, Cap, PO, bid, Routine
   Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.

☐ 75 mg, Cap, PO, bid, Routine
   Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.

☐ 100 mg, Cap, PO, bid, Routine
   Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.

☐ 200 mg, Cap, PO, bid, Routine
   Comments: To be given at 0600 and 1800. Draw level prior to administration of 0600 dose.

☐ +1 Hours Rapamune

☐ 1 mg, Tab, PO, QDay, Routine (DEF)*
   Comments: To be given at 0600, Draw level prior to administration of 0600 dose.

☐ 2 mg, Tab, PO, QDay, Routine
   Comments: To be given at 0600, Draw level prior to administration of 0600 dose.

☐ 3 mg, Tab, PO, QDay, Routine
   Comments: To be given at 0600, Draw level prior to administration of 0600 dose.

☐ 4 mg, Tab, PO, QDay, Routine
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

Comments: To be given at 0600, Draw level prior to administration of 0600 dose.
- 5 mg, Tab, PO, QDay, Routine
  Comments: To be given at 0600, Draw level prior to administration of 0600 dose.
- 6 mg, Tab, PO, QDay, Routine
  Comments: To be given at 0600, Draw level prior to administration of 0600 dose.
- 7 mg, Tab, PO, QDay, Routine
  Comments: To be given at 0600, Draw level prior to administration of 0600 dose.
- 8 mg, Tab, PO, QDay, Routine
  Comments: To be given at 0600, Draw level prior to administration of 0600 dose.

☐ +1 Hours CellCept
  - 1,000 mg, Tab, PO, bid, Routine, To be given at 0600 and 1800 (DEF)*
  - 750 mg, Tab, PO, bid, Routine, To be given at 0600 and 1800
  - 500 mg, Tab, PO, bid, Routine, To be given at 0600 and 1800
  - 250 mg, Tab, PO, bid, Routine, To be given at 0600 and 1800

☐ +1 Hours Myfortic
  - 720 mg, EC Tablet, PO, bid, Routine, To be given at 0600 and 1800 (DEF)*
  - 540 mg, EC Tablet, PO, bid, Routine, To be given at 0600 and 1800
  - 360 mg, EC Tablet, PO, bid, Routine, To be given at 0600 and 1800
  - 180 mg, EC Tablet, PO, bid, Routine, To be given at 0600 and 1800

☐ +1 Hours Imuran
  - 50 mg, Tab, PO, QDay, To be given at 1800 (DEF)*
  - 100 mg, Tab, PO, QDay, To be given at 1800

☐ Transplant Steroid Taper Plan(SUB)*

☐ +1 Hours prednisONE
  - 5 mg, Tab, PO, QDay, Routine, To be given at 0800.

☐ +1 Hours methylPREDNISolone
  - 500 mg, Injection, IV Push, once, Routine (DEF)*
  - 250 mg, Injection, IV Push, once, Routine

Anti-infectives

☐ +1 Hours valganciclovir
  - 900 mg, Tab, PO, wb/s, Routine, CMV treatment (DEF)*
  - 900 mg, Tab, PO, ws, Routine, CMV prophylaxis/treatment
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

- 450 mg, Tab, PO, ws, Routine, CMV prophylaxis/treatment

+1 Hours fluconazole
- 200 mg, Tab, PO, QDay, Routine, (for 0, fungal prophylaxis

+1 Hours clotrimazole
- 10 mg, Tab, PO, pchs, Routine, fungal prophylaxis

+1 Hours Septra
- 80 mg, Tab, PO, hs, Routine, Dose expressed as mg of trimethoprim

If allergic to Sulfas place order below:

+1 Hours dapsone
- 25 mg, Tab, PO, QDay, Routine

**Blood Pressure Medications**

- metoprolol tartrate

  - 12.5 mg, Tab, PO, bid, Routine (DEF)*
    Comments: Hold for SBP less than 110mmHg, HR less than 60 bpm

  - 25 mg, Tab, PO, bid, Routine
    Comments: Hold for SBP less than 110mmHg, HR less than 60 bpm

  - 50 mg, Tab, PO, bid, Routine
    Comments: Hold for SBP less than 110mmHg, HR less than 60 bpm

  - 100 mg, Tab, PO, bid, Routine
    Comments: Hold for SBP less than 110mmHg, HR less than 60 bpm

  - 150 mg, Tab, PO, bid, Routine
    Comments: Hold for SBP less than 110mmHg, HR less than 60 bpm

  - 200 mg, Tab, PO, bid, Routine
    Comments: Hold for SBP less than 110mmHg, HR less than 60 bpm

+1 Hours metoprolol extended release

  - 25 mg, ER Tablet, PO, QDay, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm (DEF)*

  - 50 mg, ER Tablet, PO, QDay, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm

  - 100 mg, ER Tablet, PO, QDay, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm

  - 200 mg, ER Tablet, PO, QDay, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm

+1 Hours labetalol

  - 100 mg, Tab, PO, bid, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm (DEF)*
    Comments: BETA BLOCKER

  - 200 mg, Tab, PO, bid, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm
    Comments: BETA BLOCKER
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

- 300 mg, Tab, PO, bid, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm
  Comments: BETA BLOCKER
- 400 mg, Tab, PO, bid, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm
  Comments: BETA BLOCKER
- 600 mg, Tab, PO, bid, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm
  Comments: BETA BLOCKER

+1 Hours carvedilol
- 3.125 mg, Tab, PO, wb/s, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm (DEF)*
  Comments: BETA BLOCKER
- 6.25 mg, Tab, PO, wb/s, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm
  Comments: BETA BLOCKER
- 12.5 mg, Tab, PO, wb/s, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm
  Comments: BETA BLOCKER
- 25 mg, Tab, PO, wb/s, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm
  Comments: BETA BLOCKER

+1 Hours atenolol
- 25 mg, Tab, PO, QDay, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm (DEF)*
  Comments: BETA BLOCKER
- 50 mg, Tab, PO, QDay, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm
  Comments: BETA BLOCKER
- 100 mg, Tab, PO, QDay, Routine, Hold for SBP less than 110mmHg, HR less than 60 bpm
  Comments: BETA BLOCKER

+1 Hours amLODIPine
- 5 mg, Tab, PO, QDay, Routine, Hold for SBP less than 120mmHg (DEF)*
- 10 mg, Tab, PO, QDay, Routine, Hold for SBP less than 120mmHg

+1 Hours NIFEdipine extended release
- 30 mg, ER Tablet, PO, QDay, Routine (DEF)*
  Comments: Hold for SBP less than 120mmHg
- 60 mg, ER Tablet, PO, QDay, Routine
  Comments: Hold for SBP less than 120mmHg
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

☐ 90 mg, ER Tablet, PO, QDay, Routine
   Comments: Hold for SBP less than 120mmHg

☐ 120 mg, ER Tablet, PO, QDay, Routine
   Comments: Hold for SBP less than 120mmHg

☐ +1 Hours cloNIDine
   ☐ 0.1 mg, Tab, PO, bid, Hypertension, Routine (DEF)*
      Comments: Hold for SBP less than 120mmHg, HR less than 60 bpm, HR less than 60
   ☐ 0.2 mg, Tab, PO, bid, Hypertension, Routine
      Comments: Hold for SBP less than 120mmHg, HR less than 60 bpm, HR less than 60
   ☐ 0.3 mg, Tab, PO, bid, Hypertension, Routine
      Comments: Hold for SBP less than 120mmHg, HR less than 60 bpm, HR less than 60
   ☐ 0.1 mg, Tab, PO, tid, Hypertension, Routine
      Comments: Hold for SBP less than 120mmHg, HR less than 60 bpm, HR less than 60
   ☐ 0.2 mg, Tab, PO, tid, Hypertension, Routine
      Comments: Hold for SBP less than 120mmHg, HR less than 60 bpm, HR less than 60
   ☐ 0.3 mg, Tab, PO, tid, Hypertension, Routine
      Comments: Hold for SBP less than 120mmHg, HR less than 60 bpm, HR less than 60

☐ +1 Hours hydrALAZINE
   ☐ 25 mg, Tab, PO, tid, Routine (DEF)*
      Comments: Hold for SBP less than 120mmHg
   ☐ 50 mg, Tab, PO, tid, Routine
      Comments: Hold for SBP less than 120mmHg
   ☐ 100 mg, Tab, PO, tid, Routine
      Comments: Hold for SBP less than 120mmHg

☐ +1 Hours cloNIDine
   0.1 mg, Tab, PO, q4h, PRN Hypertension, Routine
      Comments: PRN SBP greater than 160 mmHg or DBP greater than 90 mmHg

If allergic to clonidine place order below:(NOTE)*

☐ +1 Hours hydrALAZINE
   10 mg, Injection, IV Push, q4h, PRN Hypertension, Routine
      Comments: PRN SBP greater than 160 mmHg or DBP greater than 90 mmHg

Other Medications

NOTE: Order Transplant Sliding Scale Insulin Protocol below as appropriate including if Transplant Steroid Taper has been ordered.(NOTE)*
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

- Transplant Insulin Sliding Scale Protocol Plan(SUB)*
  - +1 Hours aspirin
    - 81 mg, DR Tablet, PO, QDay, Routine (DEF)*
    - 325 mg, DR Tablet, PO, QDay, Routine
  - +1 Hours famotidine
    - 20 mg, Tab, PO, QDay, Routine (DEF)*
    - 20 mg, Tab, PO, bid, Routine
  - +1 Hours pantoprazole
    - 40 mg, DR Tablet, PO, QDay, Routine
  - +1 Hours metoclopramide
    - 5 mg, Tab, PO, ac, Routine (DEF)*
    - 10 mg, Tab, PO, ac, Routine
    - 10 mg, Tab, PO, ac, Routine
  - +1 Hours magnesium oxide
    - 400 mg, Tab, PO, wb/s, Routine (DEF)*
    - 800 mg, Tab, PO, wb/s, Routine
  - +1 Hours calcium-vitamin D 500 mg-200 intl units oral tablet
    - 1 tab, Tab, PO, wb/s
  - +1 Hours Multiple Vitamins with Minerals oral tablet
    - 1 tab, Tab, PO, ws

Laboratory
- CBC
  - STAT, T;N, once, Type: Blood
- CMP
  - STAT, T;N, once, Type: Blood
- Magnesium Level
  - STAT, T;N, once, Type: Blood
- Phosphorus Level
  - STAT, T;N, once, Type: Blood
- PT/INR
  - STAT, T;N, once, Type: Blood
- PTT
  - STAT, T;N, once, Type: Blood
- Amylase Level
  - STAT, T;N, once, Type: Blood
- Lipase Level
  - STAT, T;N, once, Type: Blood
- Blood Culture
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

- Time Study, T;N, q5min x 2 occurrence, Specimen Source: Peripheral Blood
  - Blood Culture
    - Time Study, T;N, q5min x 2 occurrence, Specimen Source: Line, PICC, Nurse Collect
- BK Virus DNA Quant by PCR
  - STAT, T;N, once, Type: Blood
- BK Virus DNA Quant by PCR
  - STAT, T;N, once, Type: Urine, Nurse Collect
- CMV by PCR Quantitative Plasma
  - STAT, T;N, once, Type: Blood
- Transplant ATP by Cylex
  - STAT, T;N, once, Type: Blood
- Urinalysis w/Reflex Microscopic Exam
  - STAT, T;N, once, Type: Urine, Nurse Collect
- Culture and Sensitivity Urine
  - STAT, T;N, Specimen Source: Urine
- Gram Stain
  - STAT, T;N, once, Specimen Source: Sputum
- Occult Blood, Stool
  - STAT, T;N, once, Type: Stool
- C Diff Toxin B gene by PCR for Protocol
  - STAT, T;N, once, Type: Stool
- NOTE: AM Labs(NOTE)*
- Lipid Profile
  - Routine, T+1;0400, once, Type: Blood
    - Comments: Fasting
- C-Peptide
  - Routine, T+1;0400, once, Type: Blood
- Hemoglobin A1C
  - Routine, T+1;0400, once, Type: Blood
- Rapamycin Level
  - Routine, T;N, MonThu, Type: Blood
- CBC
  - Routine, T;N, qam, Type: Blood
- PT/INR
  - Routine, T;N, qam, Type: Blood
- CMP
  - Routine, T;N, qam, Type: Blood (DEF)*
  - Routine, T;N, MonThu, Type: Blood
- BMP
  - Routine, T;N, qam, Type: Blood
- Magnesium Level
  - Routine, T;N, qam, Type: Blood
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

☐ Phosphorus Level
  Routine, T;N, qam, Type: Blood
☐ Amylase Level
  Routine, T;N, qam, Type: Blood
☐ Lipase Level
  Routine, T;N, qam, Type: Blood
☐ FK506 Level
  Routine, T;N, qam, Type: Blood
☐ Cyclosporine Level
  Routine, T;N, qam, Type: Blood
NOTE: If peritoneal dialysis catheter present, request order below:(NOTE)*
☐ Body Fluid Profile
  STAT, T;N, once, Type: Peritoneal Fluid, Nurse Collect

Diagnostic Tests: Include Reason for Exam
☐ EKG
  Start at: T;N, Priority: Stat
☐ Chest 1 VW
  T;N, Stat, Portable
☐ Chest 2VW Frontal & Lat
  T;N, Stat, Stretcher
☐ Abd Comp W Decubitus/Erect VW
  T;N, Stat, Stretcher
☐ Abd Sing AP VW
  T;N, Stat, Stretcher
☐ US Kidney Transplanted W Dup Doppler
  T;N, Stat, Stretcher

Consults/Notifications/Referrals
☐ Notify Physician-Once
  T;N, Notify: Transplant Nephrology Fellow, upon arrival to unit
☐ Notify Physician For Vital Signs Of
  T;N, Notify: Transplant Nephrology Fellow, BP Systolic > 180, BP Diastolic > 100, BP Systolic < 100, BP Diastolic < 60, Celsius Temp > 38.3, Oxygen Sat < 94, Urine Output < 400mL/8 hours, Blood Glucose < 60, Blood Glucose > 200, difference between lying a
☐ Consult Clinical Pharmacist
  Start at: T;N, Reason: Transplant patient arrival, Special Instructions: consult Transplant Pharmacy Specialist
☐ Dietitian Consult/Nutrition Therapy
  T;N
☐ Nursing Communication
  T;N, Notify Transplant Research Coordinator of patient arrival.
☐ Transplant Coordinator Consult
  T;N, Reason for Consult: Transplant patient arrival
Physician Orders ADULT: Kidney-Panc/Panc Transplant Re-Admit Plan

- Medical Social Work Consult
  T:N
- Hemodialysis Unit Consult
  T:N, Collect peritoneal fluid for Cell Count & Diff Fluid if ordered.

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