Physician Orders ADULT: Discharge Plan

Initiate Orders Phase
Care Sets/Protocols/PowerPlans
☐ Initiate Powerplan Phase
   Phase: Discharge Phase, When to Initiate:_______________________________

Discharge Phase
Non Categorized
☐ Add To Problem List

Admission/Transfer/Discharge
☐ Discharge Patient

Condition
☐ Condition
   T;N, Stable

Patient Care
R Discharge Instructions
   T;N, Diet: As Tolerated Follow up Appointments: Follow up with _________ MD in __ weeks., Other Instructions: Notify PCP for worsening condition
☐ Instruct/Educate
   Instruct: Patient
☐ Add To Problem List

Medications
If this patient has any of the following diagnoses, please select appropriate subphase(s) below and address each discharge measure if not already addressed.(NOTE)*
☐ STK Plan(SUB)*
☐ Acute MI Plan(SUB)*
☐ Warfarin and Overlap Tx for PE/DVT Plan(SUB)*
☐ CHF DC Plan(SUB)*

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
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SUB - This component is a sub phase, see separate sheet
R-Required order