Physician Orders

Care Set: Hypoglycemia Orders

[X or R] = will be ordered unless marked out.

T= Today; N= Now (date and time ordered)

---

**Height:** ___________ cm  **Weight:** ___________ kg

**Allergies:**
- [ ] No known allergies
- [ ] Medication allergy(s):
- [ ] Latex allergy  [ ] Other:

**Admission/Transfer/Discharge**
- [ ] Admit Patient to Dr.
- [ ] Admit Status: [ ] Inpatient  [ ] Routine Post Procedure <24hrs  [ ] 23 hour OBS
- **NOTE to MD: Admit as Inpatient:** POST PCI (PTCA) care to cardiology monitored bed (Medicare requirement);
- severity of signs and symptoms, adverse medical event, patient does not respond to treatment.

**Post Procedure:** routine recovery < 8 hours same day stay; extended recovery 8 -24 hours
- expected overnight stay, complexity of procedure or pt. condition, i.e., laparoscopy, HNP.

**23 Hour Observation:** additional time needed to evaluate for inpatient admission, i.e. r/o MI, syncope, abdominal pain; patient will respond rapidly to treatment, i.e. dehydration.

**Bed Type:** [ ] Med/Surg  [ ] Critical Care  [ ] Stepdown  [ ] Telemetry; Specific Unit Location:

- [ ] Notify physician once T;N, of room number on arrival to unit

**Primary Diagnosis:**

**Secondary Diagnosis:**

**Vital Signs**
- [ ] Vital Signs T;N, Monitor and Record T,P,R,BP, q4h(std)

**Activity**
- [ ] Bedrest T;N
- [ ] Bedrest w/BRP T;N
- [ ] Out Of Bed T;N, Up Ad Lib
- [ ] Out Of Bed T;N, With Assistance

**Food/Nutrition**
- [ ] NPO Start at: T;N
- [ ] Regular Adult Diet Start at: T;N
- [ ] Clear Liquid Diet Start at: T;N
- [ ] 1800 Calorie ADA Diet (ADA Diet 1800 Calorie) Start at: T;N
- [ ] American Heart Association Diet (Wise Diet) Start at: T;N

**Patient Care**
- [ ] Whole Blood Glucose Nsg (Bedside Glucose Nsg) T;N,Stat,q1h(std),For 3 occurrence
- [ ] Whole Blood Glucose Nsg (Bedside Glucose Nsg) T;N+180,q2h(std),For 3 occurrence
- [ ] Whole Blood Glucose Nsg (Bedside Glucose Nsg) T;N+540, Routine, q4h(std)

**Continuous Infusions**
- [ ] Dextrose 5% in Water 1,000 mL,IV,Routine,T;N,70 mL/hr
- [ ] Dextrose 10% in Water 1,000 mL,IV,Routine,T;N,50 mL/hr

**Laboratory**
- [ ] Cortisol Level T;N,STAT,once>Type: Blood, urinary sulfonylurea screen
- [ ] Glucose Level T;N,STAT,once>Type: Blood
- [ ] C-Peptide T;N,STAT,once>Type: Blood
- [ ] Insulin Level T;N,STAT,once>Type: Blood
- [ ] Hemoglobin A1C T;N,STAT,once>Type: Blood
- [ ] TSH T;N,Routine,once>Type: Blood
- [ ] Comprehensive Metabolic Panel (CMP) T+1:0400,Routine,once>Type: Blood

**Consulants/Notifications**
- [ ] Notify Physician-Continuing T;N, notify STAT if whole blood glucose < 70mg/dl and Hypoglycemia Protocol is being initiated

---

**Date**  **Time**  **Physician's Signature**  **MD Number**