Physician Orders Pediatric: LEB Dialysis Lab Orders Plan

Initiate Orders Phase
Care Sets/Protocols/PowerPlans

☑ Initiate Powerplan Phase

Phase: LEB Dialysis Lab Orders Phase, When to Initiate: ________________________________

LEB Dialysis Lab Orders Phase
Laboratory

☐ Hematocrit & Hemoglobin
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ CBC
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ CMP
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ BMP
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Phosphorus Level
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Calcium Level
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Reticulocyte Count
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Iron Level
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Ferritin Level
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ TIBC Fe Profile
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ PTH
  Routine, T;N, once, Type: Blood, Nurse Collect

☐ BUN
  Routine, T;N, once, Type: Blood, Nurse Collect
Physician Orders Pediatric: LEB Dialysis Lab Orders Plan

Comments: IN DIALYSIS

☐ PRA Screen Activation
  Routine, T;N, once, Type: Blood, Nurse Collect

☐ Aluminum
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Selenium Level
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Copper Serum
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Zinc Level
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Vitamin D 25 Hydroxy Level
  Routine, T;N, once, Type: Blood, Nurse Collect

☐ Lipid Profile
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: fasting, IN DIALYSIS

☐ HIV Ab/Ag Screen
  Routine, T;N, once, Type: Blood, Nurse Collect

☐ Hepatitis B Surface Antigen
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Hepatitis B Antibody
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Hepatitis C Antibody
  Routine, T;N, once, Type: Blood, Nurse Collect
  Comments: IN DIALYSIS

☐ Blood Culture
  Routine, T;N, once, Nurse Collect

☐ Body Fluid Culture and Gram Stain
  Routine, T;N, Specimen Source: Peritoneal Fluid Body Site: Peritoneum, Nurse Collect

☐ Cell Count & Diff Fluid
  Routine, T;N, Type: Peritoneal Fluid, Nurse Collect

☐ Urea Nitrogen Fluid
  Routine, T;N, Type: Peritoneal Dialysis Fluid, Nurse Collect
Physician Orders Pediatric: LEB Dialysis Lab Orders Plan

☐ Type and Crossmatch Pediatric >4 months
   Routine, T;N, Type: Blood

☐ Transfuse PRBC >4 Months
   Routine, T;N

☐ Hold PRBC >4 Months
   Routine, T;N

__________________________   ____________________________   ______________________________________  __________
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