Physician Orders ADULT
Order Set: Chest Pain Sudden Onset Orders

[R] = will be ordered
T= Today; N = Now (date and time ordered)
Height: _____cm   Weight: _____kg

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

	Uncategorized	
[R]	Chest Pain Quality Measures	T;N

	Admission/Transfer/Discharge	
[ ]	Patient Status Initial **Inpatient**	Attending Physician: _____
	Bed Type: [ ] Med Surg [ ] Telemetry [ ]Critical Care [ ] Stepdown [ ] Obstetrics [ ] Other	
[ ]	Patient Status Initial **Outpatient**	Attending Physician: _____
	Outpatient Status/Service: [ ] OP-Ambulatory [ ] OP-Diagnostic Procedure [ ] OP-Observation Services	
	NOTE to MD:	
	<u>Initial status – inpatient</u> --- **For a condition/dx with severity of illness or co-morbid conditions indicating a hospital stay greater than 24 hours is required.**	
	<u>Initial Status Outpatient – Ambulatory surgery</u> – **Outpatient surgery/procedure with discharge anticipated after a routine or, in some cases, extended recovery.** • **Routine recovery after outpatient surgery is estimated at 6-8 hours.** • **"Extended" routine recovery may be required for a patient to stay longer (could be overnight) to recover from anticipated sequela of surgery including effects of anesthesia, nausea, pain.** • **For unanticipated sequela of surgery or a complicated post operative course, the patient may require a status change to inpatient. Please consult with a case manager before making this choice of "status change".** • **Examples: Initial status outpatient is generally selected for patients undergoing PCI, diagnostic caths, EP studies, ablations, pacemaker implantations, other routine surgeries.**	
	<u>Initial status Outpatient -Observation Services –</u> **Short term treatment, assessment and reassessment - estimate discharge within 24 hours** • **In some cases (for Medicare patients), this can be extended to 48 hours.** • **Observation Services can also be utilized when it is unclear (without additional assessment) whether the patient will require an inpatient stay.**	
[ ]	Notify physician once	T;N, of room number on arrival to unit
Primary Diagnosis:_____		
Secondary Diagnosis:_____		

	Vital Signs	
[ ]	Vital Signs	T;N, q4h(std)

	Activity	
[ ]	Bedrest	T;N

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

	Patient Care	
[ ]	O2 Sat Monitoring NSG	T;N, q8h(std)
[ ]	IV Insert/Site Care	T;N,q4day
[ ]	Intermittent Needle Therapy Insert/Site (INT Insert/Site Care)	T;N,q4day
[ ]	Telemetry (Cardiac Monitoring)	T;N, Stat
[ ]	Intake and Output	T;N, q8h(std), record
[ ]	Whole Blood Glucose Nsg (Bedside Glucose Nsg)	T;N, achs, PRN, if patient know diabetic

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Respiratory Care		
[ ]	Nasal Cannula (O2-BNC)	T;N, 2 L/min, Special Instructions: titrate to keep O2 Sat =/>92%
[ ]	ISTAT Blood Gases (RT Collect) (ABG-RT Collect)	T;N Stat
Continuous Infusions		
[ ]	Dextrose 5% with 0.45% NaCl (Sodium chloride 0.45% with D5W)	1,000 mL,IV,Routine,T;N,75 mL/hr
[ ]	Sodium Chloride 0.45%	1,000 mL,IV,Routine,T;N,75 mL/hr
[ ]	Sodium Chloride 0.9%	1,000 mL,IV,Routine,T;N,75 mL/hr
[ ]	Dextrose 5% in Water	1,000 mL,IV,Routine,T;N,75 mL/hr
[ ]	Dextrose 5% with 0.45% NaCl	1,000 mL,IV,Routine,T;N,75 mL/hr
Medications		
[ ]	aspirin	324 mg, Chew tab, Chewed, once, Routine, (4 x 81 mg tabs)
[ ]	aspirin	325 mg,Tab,PO,QDay,Routine,T;N
[ ]	morPHINE	2 mg,Injection,IV Push,q4h,PRN Pain, Severe (8-10),Routine,T;N
[ ]	nitroglycerin (nitroglycerin sublingual)	0.4 mg, Tab, SL, q5min, PRN Chest Pain, STAT, q5 minutes x 3 for chest pain
[ ]	nitroglycerin (nitroglycerin 2% topical ointment)	1 inch,Ointment,TOP,q6h,STAT,T;N
[ ]	promethazine	12.5 mg,Tab,PO,q4h,PRN Nausea,Routine,T;N
[ ]	ondansetron	4 mg,Injection,IV Push,once,STAT,T;N
Laboratory		
[ ]	CK	T;N,STAT,once,Type: Blood
[ ]	Troponin-I	T;N,STAT,once,Type: Blood
[ ]	D-Dimer Quantitative	T;N,STAT,once,Type: Blood
[ ]	Glucose Level	T;N,STAT,once,Type: Blood
[ ]	Prothrombin Time (PT/INR)	T;N,STAT,once,Type: Blood
[ ]	Partial Thromboplastin Time (PTT)	T;N,STAT,once,Type: Blood
[ ]	Magnesium Level	T;N,STAT,once,Type: Blood
[ ]	Myoglobin	T;N,STAT,once,Type: Blood
[ ]	Urinalysis	T;N,Routine,once,Type: Urine,Nurse Collect
[ ]	Urinalysis w/Reflex Microscopic Exam	T;N, Routine, once, Type: Urine, Nurse Collect
[ ]	Comprehensive Metabolic Panel (CMP)	T;N,STAT,once,Type: Blood
[ ]	Basic Metabolic Panel (BMP)	T;N,STAT,once,Type: Blood
[ ]	Amylase Level	T;N,STAT,once,Type: Blood
[ ]	Lipase Level	T;N,STAT,once,Type: Blood
Diagnostic Tests		
[ ]	Chest 1VW Frontal	T;N, Reason for Exam: Chest Pain, Stat, Portable
[ ]	CT Thorax W Cont	T;N, Reason for Exam: Chest Pain, Routine, Stretcher
[ ]	NM Pulm Perf Image Particulate Vent&Re	T;N, Reason for Exam: Chest Pain, Routine, Stretcher

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Diagnostic Tests continued		
	Treadmill Stress Test Orders (see below)	
	Note: You MUST Select one order from the first 5 listed. All of the rest of the following orders must be selected to complete this careset.	
[ ]	NM Myocardial Perf SPECT Mult Study (Cardiac Stress Test - Non-Specified)	T;N,Reason for Exam: Chest Pain,Drug Type: Non-Specified,Stretcher
[ ]	NM Myocardial Perf SPECT Mult Study (Cardiac Stress Test - Adenosine)	T;N,Reason for Exam: Chest Pain,Drug Type: Adenosine,Stretcher
[ ]	NM Myocardial Perf SPECT Mult Study (Cardiac Stress Test - Dobutamine)	T;N,Reason for Exam: Chest Pain,Drug Type: Dobutamine,Stretcher
[ ]	NM Myocardial Perf SPECT Mult Study (Cardiac Stress Test - Persantine)	T;N,Reason for Exam: Chest Pain,Drug Type: Persantine,Stretcher
[ ]	NM Myocardial Perf SPECT Mult Study (Cardiac Stress Test - No Drug)	T;N,Reason for Exam: Chest Pain,Drug Type: None,Stretcher
[ ]	NM Myocardial Perf w Ejection Fraction	T;N,Reason for Exam: Chest Pain,Stretcher
[ ]	NM Myocardial Perf w Wall Motion	T;N,Reason for Exam: Chest Pain,Stretcher
[ ]	Treadmill Exercise for Stress Test	Start at: T;N, Reason: Chest Pain/Angina/MI, Priority: Routine
[ ]	Delay Diet	Start at: T;2359, Delay diet for NM Myocardial Perf SPECT Mult Study
[ ]	Electrocardiogram (EKG)	Start at: T;N, Priority: Stat, Reason: Chest Pain/Angina/MI
[ ]	TTE Adult Echo W/Contrast if Necessary	Start at: T;N, Priority: Stat, Reason: Chest Pain/Angina
Consults/Notifications		
[ ]	Notify Physician of Chest Pain	T;N, unrelieved by Nitroglycerin administration
[ ]	Notify Physician For Vital Signs Of	T;N, BP Systolic > 170, BP Systolic < 90, Heart Rate > 120
[ ]	Notify Physician-Continuing	T;N, SaO2 less than 90
[ ]	Physician Consult	T;N, Consult: Cardiology, Reason for Consult: Chest pain

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