Physician Orders PEDIATRIC: LEB ED Suspected Stroke with Hx of Sickle Cell Disease Plan

LEB ED Stroke w   Hx   Sickle Cell Disease
Vital Signs
- ☑ Vital Signs
  Stat Monitor and Record T,P,R,BP, q1h(std)

Food/Nutrition
- ☑ NPO
  Start at: T

Patient Care
- ☑ Neurochecks
  Stat, q1h x 4hours, if stable, decrease q2h
- ☑ Cardiopulmonary Monitor
  T;N Stat, Monitor Type: CP Monitor
- ☑ Oxygen Sat Monitoring NSG
  Stat, q2h(std)
- ☑ Intake and Output
  Routine, q1h(std)
- ☑ IV Insert/Site Care LEB
  Stat, Place two 20 gauge or larger catheter, if possible
- ☑ Bedside Glucose Nsg
  Stat, q2h(std), If blood sugars between 60 - 150 mg/dL, may decrease to q4h.

Respiratory Care
- ☑ Oxygen Delivery
  Stat, Special Instructions: Titrate to keep O2 sat at 92% or greater, Delivery method per RT/RN
- ☐ ISTAT POC (RT Collect)
  - ☐ *T;N Stat once, Test Select BUN (ED Only) | Electrolytes | Glucose | Ionized calcium | VBG (DEF)**
  - ☐ *T;N Stat once, Test Select CBG | BUN (ED Only) | Electrolytes | Glucose | Ionized calcium*

Continuous Infusion
- ☐ D5NS
  1,000 mL, IV, STAT, mL/hr
  Comments: give 1.5x maintenance
- ☐ Sodium Chloride 0.9%
  1,000 mL, IV, STAT, mL/hr
- ☐ D5 1/2NS
  1,000 mL, IV, STAT, mL/hr

Medications
- ☐ **+1 Hours** Sodium Chloride 0.9% Bolus
  20 mL/kg, Injection, IV, once, STAT, (infuse over 15 min)

Laboratory
- ☑ BMP

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> *STAT, T;N, Type: Blood, Nurse Collect*

☑ CBC with Diff
> *STAT, T;N, Type: Blood, Nurse Collect*

☐ ESR
> *STAT, T;N, Type: Blood, Nurse Collect*

☐ ESR, (Erythrocyte Sedimentation Rate)
> *STAT, T;N, Type: Blood, Nurse Collect*

☑ PT/INR
> *STAT, T;N, Type: Blood, Nurse Collect*

☑ PTT
> *STAT, T;N, Type: Blood, Nurse Collect*

☑ Thrombin Time
> *STAT, T;N, Type: Blood, Nurse Collect*

☑ HPLC Hemoglobinopathy Evaluation
> *STAT, T;N, Type: Blood, Nurse Collect*

☑ Fibrinogen Level
> *STAT, T;N, Type: Blood, Nurse Collect*

☑ D-Dimer Quantitative
> *STAT, T;N, Type: Blood, Nurse Collect*

☑ Hold Specimen
> *STAT, T;N, Type: Blood, Nurse Collect, Collection Comment: Collect extra red top tube*

NOTE: If possibility of pregnancy (female patient age 10 years or greater), place order below:(NOTE)*

☐ Pregnancy Screen Serum
> *STAT, T;N, Type: Blood, Nurse Collect*

NOTE: Choose appropriate type and screen based on patient's age.(NOTE)*

☐ Type and Screen Pediatric
> *STAT, T;N, Type: Blood, Nurse Collect*

☐ Type and Screen
> *STAT, T;N, Type: Blood, Nurse Collect*

☐ Type and Screen <4 months(DAT included)
> *STAT, T;N, Type: Blood, Nurse Collect*

☐ Factor V Assay
> *STAT, T;N, Type: Blood, Nurse Collect*

☐ Factor VIII Assay
> *STAT, T;N, Type: Blood, Nurse Collect*

☐ C-Reactive Protein
> *STAT, T;N, Type: Blood, Nurse Collect*

☐ Crossmatch Units from Type and Screen-Pediatric

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> *STAT, T;N*
>> *Comments: Extended match for Sickle Cell Disease*

☐ Crossmatch Units from Type and Screen
> *STAT, T;N*

☐ Transfuse PRBC <4 Months
> *STAT, T;N*

☐ Transfuse PRBC's <4 Months-Pediatric
> *STAT, T;N*

☐ Transfuse PRBC >4 Months
> *STAT, T;N*

☐ Transfuse PRBC's >4 Months-Pediatric
> *STAT, T;N*

☐ RBC Phenotype Ext, Ag Testing
> *STAT, T;N, Type: Blood, Nurse Collect*

☐ Antithrombin III Level
> *STAT, T;N, Type: Blood, Nurse Collect*

☐ Drug Screen Urine Stat LEB
> *STAT, T;N, Type: Urine, Nurse Collect*

if patient has had recent history of febrile illness, order Blood Culture below:(NOTE)*

☐ Blood Culture
> *STAT, T;N, once, Specimen Source: Peripheral Blood, Nurse Collect*

If patient is on aspirin at the time, order VERIFY NOW aspirin resistance test(NOTE)*

☐ Platelet Function Test
> *STAT, T;N, Type: Blood, Nurse Collect*

if patient is on enoxaparin, order Anti-Factor XA for Heparin Monitoring below:(NOTE)*

☐ Heparin Assay Anti Xa
> *STAT, T;N, Type: Blood, Nurse Collect*

Diagnostic Tests

☐ LEB CT Brain Head W/WO Cont Plan(SUB)*
☐ LEB CT Brain Head W Cont Plan(SUB)*
☐ LEB CT Brain/Head WO Cont Plan(SUB)*
☐ CT Ang Head W/WO Cont W Imag Post Prc
> *T;N, Reason for Exam: CVA (Cerebrovascular Accident), Stat, Stretcher*
>> *Comments: Acute Stroke Protocol*

☐ CT Ang Neck W/WO Cont W Imag Post Pro
> *T;N, Reason for Exam: CVA (Cerebrovascular Accident), Stat, Stretcher*
>> *Comments: Acute Stroke Protocol*

☐ MRI Brain & Stem WO Cont
> *T;N, Reason for Exam: CVA (Cerebrovascular Accident), Stat, Stretcher*

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Comments: Acute Stroke Protocol

☐ MRA Head WO Cont
T;N, Reason for Exam: Other, Enter in Comments, Stat, Stretcher
Comments: CVA, Acute Stroke Protocol

☐ MRA Neck WO Cont
T;N, Reason for Exam: Other, Enter in Comments, Stat, Stretcher
Comments: CVA, Acute Stroke Protocol

☐ EKG
Start at: T;N, Priority: Stat, Reason: Other, specify
Comments: Stroke like symptoms

Consults/Notifications/Referrals

☐ Physician Group Consult
Routine, Group: ULPS Cardiology, Reason for Consult: Stroke like symptoms

☐ Physician Group Consult
Routine, Group: Semmes Murphy Clinic, Reason for Consult: Stroke like symptoms, Pediatric Neurosurgery

☐ Telemedicine Consult

☑ Notify Physician For Vital Signs Of
Notify: ED physician, Urine Output < 0.5 mL/kg/hr or>3mL/kg/hr, Blood Glucose < 60, Blood Glucose > 150, Blood Pressure documented as low by Cerner limits.

☑ Physician Group Consult
Stat, Group: ULPS Neurology, Reason for Consult: Suspected stroke

☑ Physician Group Consult
Stat, Group: St. Jude   Hematology, Reason for Consult: Suspected stroke

_____ _____ _____ _____
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

0 6 5