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

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

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

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 > 3 mL/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