

## **Physician Orders**

LEB Nephrology Infusion Unit Admit Plan

PEDIATRIC

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

	I = I oday; N = Now (date and time ordered)			
	Height: cm Weight: kg   Allergies: []] No known allergies			
Anerg	100.			
	Admission/Transfer/Discharge			
[ ]	Admit Patient to Dr.			
· ·	Admit Status: [ ] Inpatient [ ] Routi	ne Post Procedure <24hrs [] 23 hour OBS		
	Bed Type: [] Med/Surg [] Critical C	are [] Stepdown [] Telemetry; Specific Unit Location:		
[]	Admit Patient	T;N		
[]	Notify Physician Once	T;N, of room number on arrival to unit		
	ry Diagnosis:			
Secor	idary Diagnosis:			
		Vital Signs		
[]	Vital Signs	T;N, Routine Monitor and Record T,P,R,BP		
[]	Vital Signs	T;N, Monitor and Record T,P,R,BP, q1h(std), During infusion.		
		Activity		
[]	Out Of Bed	T;N, Up Ad Lib		
		Food/Nutrition		
[]	NPO	Start at: T;N		
<u>[]</u>	Breastfeed	T;N		
<u>[]</u>	Formula Per Home Routine	T;N		
ĻĻ	Formula			
ĻĻ	Regular Pediatric Diet	Start at: T;N, no added salt		
	Sodium Control Diet	Start at: T;N		
r 1	Advance Diet As Tolerated	Patient Care T;N, Start clear liquids and advance to regular diet as tolerated.		
<u>Ļ į</u>	Isolation Precautions	T;N, Start clear liquids and advance to regular diet as tolerated. T;N		
	Strict I/O	T;N, Routine, q2h(std)		
	Weight	T;N, Routine, once		
<u><u></u></u>	Hepwell Insert/Site Care LEB	T;N, Routine, g2h(std)		
	Bedside Glucose Nsg	T;N, achs		
	O2 Sat Spot Check-NSG	T;N, with vital signs		
	O2 Sat Monitoring NSG	T:N		
	Cardiopulmonary Monitor	T;N Routine, Monitor Type: CP Monitor		
	Nursing Communication	T;N, Encourage patient to void q1h.		
	Respiratory Care			
[ ]	Oxygen Delivery	T; N,L/min, Titrate to keep O2 sat =/> 92%. Wean to room air		
Continuous Infusions				
[]	D5 1/2NS	1000mL,IV,Routine,T:N, atmL/hr, Admister IV fluids for 2.5 hours prior to		
		the initiation of mesna, 3 hours prior to the initiation of cyclophosphamide and		
		continue to administer IV fluids for 3 hours following the completion of		
		cyclophosphamide.		





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		Medications	
[]	Heparin 10 unit/mL flush	5 mL, (10units/mL),Ped Injectable, IVPush, prn, PRN Catheter clearance,	
		routine,T;N, peripheral or central line per nursing policy	
[]	ondansetron	mg,(0.15mg/kg),injection,IV,bid,(2 doses), Routine,T;N, Max dose = 4mg,	
		administer first dose 30min prior to cyclophosphamide and second dose four	
		hours after cyclophosphamide dose	
[]	mesna	mg ,injection,IVPB,tid, (3 doses),Routine, T;N, Total dose = 80% of	
		cyclophosphamide dose, administer first dose 30min prior to	
		cyclophosphamide, second dose immediately after cyclophosphamide infusion	
		and third dose three hours after second dose of mesna	
[]	cyclophosphamide	gm (0.5g/m2),injection,IVPB,once, (Infuse over 1 hour),Reason: lupus,T;N	
[]	cyclophosphamide	gm (0.75g/m2),injection,IVPB,once, (Infuse over 1 hour), Reason:	
		lupus,T;N	
[]	cyclophosphamide	gm (1.0g/m2),injection,IVPB,once, (Infuse over 1 hour), Reason: lupus,T;N	
[]	methyIPREDNISolone	mg/kg,injection,IVPB, once, routine,T;N	
[]	methyIPREDNISolone	mg/kg,injection,IVPB,q6h, routine,T;N	
Laboratory			
	CBC	T;N, Routine, once, Type: Blood	
[]	СМР	Routine, T;N, once, Type: Blood	
[]	ESR	Routine, T;N, once, Type: Blood	
	Cyclosporine Level	Routine, T;N, once, Type: Blood	
[]	FK506 Level (Tacrolimus Level)	Routine, T;N, once, Type: Blood	
[]	C3 Complement	Routine, T;N, once, Type: Blood	
[]	C4 Complement	Routine, T;N, once, Type: Blood	
[]	DNA Antibody Double Stranded	Routine, T;N, once, Type: Blood	
[]	Pregnancy Screen Serum	Routine, T;N, once, Type: Blood	
[]	Urinalysis w/Reflex Microscopic Exam	Routine, T;N, once, Type: Urine	
[]	Protein Urine Random	Routine, T;N, once, Type: Urine	
[]	Creatinine Urine Random	Routine, T;N, once, Type: Urine	
	Consults/Notifications		
<u>[]</u>	Notify Resident-Continuing	T;N, For:, Who:	
<u>[]</u>	Notify Resident-Once	T;N, For:, Who:	
[]	Consult MD Group	T;N, Consult Who:,Reason:	
[]	Consult MD	T;N, Consult Who:,Reason:	
[]	Dietitian Consult	T;N, Reason:	

Date

Time

**Physician's Signature** 

MD Number