Physician Orders PEDIATRIC: LEB ED Suspected Stroke Plan

LEB ED Suspected Stroke

Vital Signs
☑️ Vital Signs
   Stat Monitor and Record T,P,R,BP, q1h(std)

Food/Nutrition
☑️ NPO
   Start at: T;N

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
☐️ Sodium Chloride 0.9%
   1,000 mL, IV, STAT, mL/hr
☐️ D5NS
   1,000 mL, IV, STAT, mL/hr
☐️ D5 1/2NS
   1,000 mL, IV, STAT, mL/hr

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

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- C-Reactive Protein
  - STAT, T;N, Type: Blood, Nurse Collect
- Crossmatch Units from Type and Screen-Pediatric
  - STAT, T;N
- 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)*
- Anti-Factor Xa for Heparin Monitoring
  - STAT, T;N, Type: Blood, Nurse Collect
- BMP
  - STAT, T;N, Type: Blood, Nurse Collect
- CBC with Diff
  - STAT, T;N, Type: Blood, Nurse Collect
- Sickle Cell Screen
  - STAT, T;N, Type: Blood, Nurse Collect
- ESR
  - STAT, T;N, Type: Blood, Nurse Collect
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☐ 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

☑ 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
    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

☐ Type and Screen Pediatric  
    STAT, T;N, Nurse Collect

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

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

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

☐ Thrombin Time  
    STAT, T;N, Type: Blood, Nurse Collect

Diagnostic Tests

☐ CT Brain/Head  W/WO Cont  
    T,N, Reason for Exam: CVA (Cerebrovascular Accident), Stat, Stretcher
    Comments: Acute Stroke Protocol

☐ CT Brain/Head W Cont  
    T,N, Reason for Exam: CVA (Cerebrovascular Accident), Stat, Stretcher
    Comments: Acute Stroke Protocol

☐ CT Brain/Head  WO Cont  
    T,N, Reason for Exam: CVA (Cerebrovascular Accident), Stat, Stretcher
    Comments: Acute Stroke Protocol

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

☐ MRA Head WO Cont
  T;N, Stat, Stretcher
  Comments: CVA, Acute Stroke Protocol

☐ MRA Neck WO Cont
  T;N, Stat, Stretcher
  Comments: CVA. Acute Stroke Protocol

☐ EKG
  Start at: T;N, Priority: Stat, Reason: Other, specify, 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
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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