



Physician Orders PEDIATRIC: LEB GEN SURG Admit Plan

Initiate Orders Phase

Care Sets/Protocols/PowerPlans

- Initiate Powerplan Phase
Phase: LEB GEN SURG Admit Phase, When to Initiate: _____

LEB GEN SURG Admit Plan

Admission/Transfer/Discharge

- Patient Status Initial Outpatient
T;N Attending Physician: _____
Reason for Visit: _____
Bed Type: _____ Specific Unit: _____
Outpatient Status/Service: [] Ambulatory Surgery, [] OP Diagnostic Procedure
[] OP OBSERVATION Services
- Notify Physician-Once
Notify For: Of room number on arrival to unit.

Vital Signs

- Vital Signs
 - Monitor and Record T,P,R,BP, q4h(std) (DEF)*
 - Monitor and Record T,P,R,BP, q2h(std)

Activity

- Activity As Tolerated
Up Ad Lib
- Ambulate
ambulate in hall ____ times daily
- Bedrest

Food/Nutrition

- NPO
- Regular Pediatric Diet
- Clear Liquid Diet
Start at: T;N

Patient Care

- Intake and Output
Routine, q2h(std)
- Hepwell Insert/Site Care LEB
Routine, q2h(std)
- Cardiopulmonary Monitor
Routine, Monitor Type: CP Monitor, Special Instructions: upon arrival to floor
- Replogle (NGT)
*Suction Strength: Low Intermittent (DEF)**
Flush, NGT with ____ mL normal saline every ____ hours
- Nasogastric Tube Insert
For instillation of polyethylene glycol-electrolyte solution
- Nursing Communication
Ensure electrolyte solution is completed before midnight
- Nursing Communication
Ensure patient has IVF infusing before starting polyethylene glycol-electrolyte solution
- O2 Sat Monitoring NSG

Continuous Infusion





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Bolus IV Fluids

- Sodium Chloride 0.9% Bolus
10 mL/kg, Injection, IV, once, Routine, (infuse over 1 hr)

Maintenance IV Fluids

- Sodium Chloride 0.9%
1,000 mL, IV, Routine, mL/hr
- D5 1/2NS
1,000 mL, IV, Routine, mL/hr
- D5 1/2 NS KCl 20 mEq/L
1,000 mL, IV, Routine, mL/hr

Replacement IV Fluids

- 1/2 NS + 20 mEq/L KCL (pediatric) (IVS)*
Sodium Chloride 0.45%
1,000 mL, IV, Routine, Replacement IV Fluids, Replace NG output mL/mL every 4 hours
potassium chloride (additive)
20 mEq
- Lactated Ringers Injection
1,000 mL, IV, Routine, Replacement IV Fluids, Replace NG output mL/mL every 4 hours

Medications

- +1 Hours** clindamycin
10 mg/kg, Ped Injectable, IV Piggyback, q8h, Routine, (for 14 day), Max dose = 4.8 grams/day
- +1 Hours** cefOXitin
30 mg/kg, Ped Injectable, IV Piggyback, q8h, Routine, (for 14 day), Max dose = 12 grams/day
- +1 Hours** acetaminophen
10 mg/kg, Supp, PR, q4h, PRN Pain, Mild or Fever, Routine, Max Dose = 75 mg/kg/day up to 4 g/day
Comments: For temperature greater than 38.5 Degrees Celsius
- +1 Hours** ketorolac
0.5 mg/kg, Ped Injectable, IV Piggyback, q6h, Routine, (for 8 dose), Max dose = 30 mg
- +1 Hours** morphine
0.05 mg/kg, Ped Injectable, IV, q2h, PRN Pain, Severe (8-10), Routine, (for 3 day), Max initial dose = 2 mg
- +1 Hours** famotidine
0.5 mg/kg, Ped Injectable, IV, bid, Routine, Max Daily Dose = 20 mg/dose or 40 mg/day
- +1 Hours** ondansetron
0.1 mg/kg, Ped Injectable, IV, q8h, PRN Nausea, Routine, Max dose = 8 mg
- +1 Hours** polyethylene glycol 3350 with electrolytes
25 mL/kg, Oral Soln, NG, q1h, Routine, (for 4 dose), Until rectal effluent clear. Complete by Midnight.
Comments: To be given at 25 mL/kg/hr for four hours via NGT, Max total volume = 100mL/kg, Until rectal effluent is clear. Complete by midnight.
- +1 Hours** Normal saline enema
10 mL/kg, Enema, PR, once, Routine

Laboratory

- LEB Transfusion Less Than 4 Months of Age Plan (SUB)*
- LEB Transfusion 4 Months of Age or Greater Plan (SUB)*
- CBC
Routine, T;N, once, Type: Blood





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- Blood Culture
Routine, T;N, once, Specimen Source: Peripheral Blood
- BMP
Routine, T;N, Type: Blood
- CMP
Routine, T;N, once, Type: Blood
- Amylase Level
Routine, T;N, once, Type: Blood
- Amylase Level LeBonheur Germantown
Routine, T;N, once, Type: Blood
- Lipase Level
Routine, T;N, once, Type: Blood
- Lipase Level LeBonheur Germantown
Routine, T;N, once, Type: Blood
- PTT
Routine, T;N, once, Type: Blood
- PT/INR
Routine, T;N, once, Type: Blood
- Stool Ova & Parasites
Routine, T;N, Specimen Source: Stool, Nurse Collect
- Stool WBC - Ped
Routine, T;N, once, Type: Stool, Nurse Collect
- Clostridium difficile Toxin B gene by PCR
Routine, T;N, once, Type: Stool, Nurse Collect
- Stool Culture
Routine, T;N, Specimen Source: Stool, Nurse Collect
- Urinalysis w/Reflex Microscopic Exam
Routine, T;N, once, Type: Urine, Nurse Collect
- Urine Culture
Routine, T;N, Specimen Source: Urine, Nurse Collect
- Pregnancy Screen Serum
Routine, T;N, Type: Blood

Diagnostic Tests

- Chest PA & Lateral
T;N, Routine, Wheelchair
- KUB Flat and Upright
T;N, Routine, Wheelchair
- US Pelvic Non OB Comp
T;N, ROUTINE, Wheelchair
- LEB US Abd Comp w/Delay Diet Plan(SUB)*
- LEB CT Abdomen W/WO Cont Plan(SUB)*
- LEB CT Pelvis W/WO Cont Plan(SUB)*

Consults/Notifications/Referrals

- Notify Physician-Continuing
Notify: Resident on call, Notify For: of temperature 38.5 degrees, persistent abdominal pain or vomiting, or urinary output less than 1mL/kg/hr over 4 hours
- Notify Physician-Once





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Notify: PCP, Notify For: of admission in AM

PT Ped Eval & Tx
Routine

Date	Time	Physician's Signature	MD Number
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***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

