



Physician Orders Pediatric: LEB Endocrine General Admit Plan

Unique Plan Description: LEB Hemodialysis Inpatient Plan

Plan Selection Display: LEB Hemodialysis Inpatient Plan

PlanType: Medical

Version: 2

Begin Effective Date: 7/11/2016 10:43 PM

End Effective Date: Current

Available at: LE BONHEUR

Plan Comment: 1/20/09 Non Meds Built and display named:41911 PP QM0109- TB, Medications built by Latese Wilkins 01/28/09. Non med orders reviewed and synched on 3-26-09 but final design decisions not made yet - mtg is 4-9-09.mt

4-27-09 Hemodialysis-Ped online order sentence per new OEF design. Users requested downtime template to only have a "blank" format to fill in during downtime.mt 4-30-09 reviewed and synched non med orders and updated Blood Bank orders.mt 5-20-09 plan updated with changes approved at Dialysis meeting on 5-12-09.mt 04.20.10-Hepatitis Orders updated per PN changes-DMM 7-12-11 Initiate Orders Phase added.mt. Changed Heparin to ped inj 10-19-11 SP. 07/8/16 Version to testing (v2 ) and made updates per CR 102899: Set Initiate Orders Phase to "Auto Initiate" and pre-checked Initiate PowerPlan Phase order- Tracey Boatwright

Initiate Orders Phase

Care Sets/Protocols/PowerPlans

- Initiate Powerplan Phase
Phase: LEB Hemodialysis Inpatient Phase

LEB Hemodialysis Inpatient Phase

Non Categorized

- Initiate Powerplan Phase
Phase: LEB Hemodialysis Inpatient Phase

Patient Care

- Hemodialysis-Pediatric
Routine, MWF, Length of Trmt: 3 Hours, Dialysate: 2K 3 Ca, Na Modeling: 145-138 linear fashionPRN, Rate(Blood/Dialysate): 300/500, Dialyzer: F 160NR (Leb Only), Heparin: 1000 unit bolus, Target Temp: < 38 deg C
No BP or Venipunctures
no BP or venipuncture in access extremity
Nursing Communication
T;N, Hold all AM blood pressure medications as ordered on day of dialysis
Nursing Communication
T;N, NPO 1 hour prior to hemodialysis then resume previous diet after completion of treatment
DIALYSIS Nsg Communication
Immediately upon completion of dialysis treatment: 1. Obtain BUN level 30 seconds after completion,





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2. Obtain BUN level 15 minutes after completion.

**Continuous Infusion**

- Sodium Chloride 0.9% Bolus  
*mL, Injection, IV, N/A, PRN Hypotension, STAT, mL/hr (DEF)\**  
*25 mL, Injection, IV, N/A, PRN Hypotension, STAT, mL/hr*  
*50 mL, Injection, IV, N/A, PRN Hypotension, STAT, mL/hr*  
*100 mL, Injection, IV, N/A, PRN Hypotension, STAT, mL/hr*  
*150 mL, Injection, IV, N/A, PRN Hypotension, STAT, mL/hr*  
*200 mL, Injection, IV, N/A, PRN Hypotension, STAT, mL/hr*  
*250 mL, Injection, IV, N/A, PRN Hypotension, STAT, mL/hr*

**Medications**

- +1 Hours** epoetin alfa  
*units, Injection, IV, once, Routine*  
*Comments: with dialysis*
- +1 Hours** paricalcitol  
*mcg, Injection, IV, once, Routine*  
*Comments: with dialysis*
- +1 Hours** Ferrlecit  
*62.5 mg, Injection, IV, once, Routine (DEF)\**  
*Comments: with dialysis*  
*125 mg, Injection, IV, once, Routine*  
*Comments: with dialysis*
- +1 Hours** heparin  
*units, Ped Injectable, IV, once, Routine*  
*Comments: prime and discard, in dialysis*
- +1 Hours** heparin  
*units, Ped Injectable, IV, once, Routine*  
*Comments: (bolus dose), in dialysis*
- +1 Hours** heparin  
*units, Ped Injectable, IV, N/A, Routine*  
*Comments: Discontinue heparin \_\_\_\_ minutes prior to the end. Patient to receive \_\_\_\_ units/hr via heparin pump.*
- +1 Hours** heparin  
*units, Ped Injectable, IV, MWF, Routine, Concentration: 1000 units/mL, Dwell in venous port CVL post dialysis*  
*Comments: Please instill \_\_\_\_ mL into arterial port and \_\_\_\_ mL into venous port to lock catheter at end of dialysis*
- +1 Hours** alteplase





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*mg, Ped Injectable, IV, MWF, Routine, Concentration: 1 mg/mL, Dwell in arterial port CVL post dialysis*

**+1 Hours** alteplase

*mg, Ped Injectable, IV, MWF, Routine, Concentration: 1 mg/mL, Dwell in venous port CVL post dialysis*

**Laboratory**

Hematocrit & Hemoglobin

*Routine, T;N, once, Type: Blood, Nurse Collect  
Comments: IN DIALYSIS*

CBC

*Routine, T;N, once, Type: Blood, Nurse Collect  
Comments: IN DIALYSIS*

CMP

*Routine, T;N, once, Type: Blood, Nurse Collect  
Comments: PRE-DIALYSIS*

CMP

*Routine, T;N, once, Type: Blood, Nurse Collect  
Comments: POST-DIALYSIS*

BMP

*Routine, T;N, once, Type: Blood, Nurse Collect  
Comments: PRE DIALYSIS*

BMP

*Routine, T;N, once, Type: Blood, Nurse Collect  
Comments: POST-DIALYSIS*

Magnesium Level

*Routine, T;N, once, Type: Blood, Nurse Collect  
Comments: IN DIALYSIS*

Phosphorus Level

*Routine, T;N, once, Type: Blood, Nurse Collect  
Comments: IN DIALYSIS*

Reticulocyte Count

*Routine, T;N, once, Type: Blood, Nurse Collect  
Comments: IN DIALYSIS*

Iron Level

*Routine, T;N, once, Type: Blood, Nurse Collect  
Comments: IN DIALYSIS*

Ferritin Level

*Routine, T;N, once, Type: Blood, Nurse Collect*





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- TIBC Fe Profile  
*Routine, T;N, once, Type: Blood, Nurse Collect*  
*Comments: IN DIALYSIS*
- PTH  
*Routine, T;N, once, Type: Blood, Nurse Collect*
- BUN  
*Routine, T;N, once, Type: Blood, Nurse Collect*  
*Comments: IN DIALYSIS*
- BUN  
*Routine, T;N, once, Type: Blood, Nurse Collect*  
*Comments: 30 SECONDS AFTER COMPLETION OF DIALYSIS*
- BUN  
*Routine, T;N, once, Type: Blood, Nurse Collect*  
*Comments: 15 MINUTES AFTER COMPLETION OF DIALYSIS*
- Lipid Profile  
*Routine, T;N, once, Type: Blood, Nurse Collect*  
*Comments: IN DIALYSIS*
- HIV Ab/Ag Screen  
*Routine, T;N, once, Type: Blood, Nurse Collect*
- Hepatitis B Surface Antigen  
*Routine, T;N, once, Type: Blood, Nurse Collect*  
*Comments: IN DIALYSIS*
- Hepatitis B Surface Antibody  
*Routine, T;N, once, Type: Blood, Nurse Collect*  
*Comments: IN DIALYSIS*
- Hepatitis C Antibody  
*Routine, T;N, once, Type: Blood*  
*Comments: IN DIALYSIS*
- Blood Culture  
*Routine, T;N, once, Specimen Source: Peripheral Blood, Nurse Collect*  
*Comments: IN DIALYSIS*
- Type and Crossmatch Pediatric >4 months  
*Routine, T;N, Type: Blood*
- Transfuse PRBC >4 Months  
*Routine, T;N*
- Hold PRBC >4 Months





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*Routine, T;N*

- Transfuse PRBC <4 Months  
*T;N*

**Consults/Notifications/Referrals**

- Notify Physician For Vital Signs Of  
*DURING DIALYSIS*

- Consult Clinical Dietitian

*Type of Consult: Nutrition Management, Special Instructions: Renal Diet*

**\*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

