Admission/Discharge/Transfer

	Admit to Inpatient				
	Place in Observation				
	Therapeutic Support Level form in front of paper chart				
_	Level / (DEF)*				
	Level II				
	Level III				
	Isolation				
Specify Organism and Precautions Vital Signs					
	Vital Signs				
	q4hr (DEF)*				
	q4hr while awake				
$\overline{\mathbf{\nabla}}$	Intake and Output				
	q8hr, strict				
$\overline{\mathbf{A}}$	Height/Length				
	Once, on admission				
$\overline{\mathbf{\nabla}}$	Weight				
$\overline{\mathbf{\nabla}}$	Once, on admission				
	Weight daily				
Patient					
	Blood Glucose Monitoring POC				
	Cardiac Monitor				
	Cath In Out				
	using 2% lidocaine gel				
$\overline{\checkmark}$	Provide St. Luke Hospital Tobacco Cessation Packet				
	unication Orders				
	Notify Provider				
Nutritic	***specify parameters*** on Services				
	Diet - Regular				
Ē	Diet - Toddler (age appropriate)				
Ы	Diet - T&A Full Liquid				
П	Diet - T&A Soft				
П	Diet - Pediatric Gastro				
	Diet - Pedialyte				
	Diet - NPO				
	Diet - NPO after midnight				
	Diet - Infant Nutrition				
	Breastmilk (DEF)*				
	Breastmilk if available, or formula				
	Similac Advance/Fe/20				
	Diet - Communication for Nursing				

Labora			
Hemat			
	CBC w/ Manual Diff (< 18 years old) Blood, ROUTINE, Routine		
	Platelet Count Blood, ROUTINE, Routine		
	Prothrombin Time		
	Blood, ROUTINE, Routine Partial Thromboplastin Time		
Chami	Blood, ROUTINE, Routine		
Chemi	-		
	Basic Metabolic Profile Blood, ROUTINE, Routine		
	Comprehensive Metabolic Profile Blood, ROUTINE, Routine		
	Hepatic Function Panel Blood, ROUTINE, Routine		
	C-Reactive Protein		
	Blood, ROUTINE, Routine		
	Glucose Level		
_	Blood, ROUTINE, Routine		
	Procalcitonin		
	Blood, ROUTINE, Routine Neonatal Bilirubin Profile		
	Blood, ROUTINE, Routine		
Microbiology			
	Blood Culture Blood, ROUTINE		
	RSV Rapid Screen		
	Nasal, ROUTINE, Routine Comments: respiratory syncytial virus		
	Influenza A/B Rapid Screen Nasal, ROUTINE, Routine		
	Culture - Respiratory Viral DFA Nasal, ROUTINE		
	Viral Culture		
	Blood, ROUTINE (DEF)*		
	Comments: To Rule Out Herpes Blood, ROUTINE		
CSF			
	CSF Glucose		
	Cerebrospinal Fluid, ROUTINE, Routine		
	Body Fluid w/ Gram Stain Body Fluid, ROUTINE		
	CSF Protein		
	Cerebrospinal Fluid, ROUTINE, Routine		

	CSF Cell Count Blood, ROUTINE, Routine					
	Comments: with differential					
	Enterovirus by PCR Cerebrospinal Fluid, ROUTINE, Routine Comments: cerebrospinal fluid					
	Herpes PCR (CSF) Cerebrospinal Fluid, ROUTINE, Routine					
\checkmark	Communication Order					
Urino	If needed, write "hold" on the cerebrospinal fluid tube label to hold the sample Urine Studies					
	Urinalysis w/ Reflex to Microscopic					
_	Urine, ROUTINE, Routine					
	Catheterized Urine Culture Urine Cath, ROUTINE					
	Void Urine Culture Urine Void, ROUTINE					
Serolo						
	HIV 1 Antibody w/ Confirmatory Test Blood, ROUTINE, Routine					
Thera	peutic Drug Levels/Toxicology					
	Gentamicin Random Blood, ROUTINE, Routine					
	Vancomycin, Random <i>T;N, Blood, ROUTINE, Routine</i>					
	Obtain Blood Specimen Vancomycin Trough 30min before third dose of Vancomycin					
	Obtain Blood Specimen					
Radio	Gentamicin Trough 30min before third dose of Gentamicin					
	CHEST 2 VIEWS					
	Fever, ROUTINE, STRETCHER					
Cardia	ac Services					
	EKG Cardiology ROUTINE, STRETCHER					
Respi	ratory Therapy					
	Oxygen Titrate as needed, PRN Order, Device and flow to achieve saturation goal of >= 92%					
	Oxygen					
	Via Nasal Prongs at L/minute (DEF)* Via High Humidity Nasal Prongs at L/minute Via Hood Oxygen at% oxygen					
	Continuous Pulse Oximetry <i>While sleeping</i>					
	Continuous Pulse Oximetry Pulse Ox Spot Check					

	q4hr			
Medications Analgesics				
	Communication Order			
	Give sucrose: 1 dose orally once 2 minutes prior to a painful procedure; use a pacifier or gloved			
	finger dipped in 24% solution; maximum 4 milliliters in 1 hour			
	LMX 4 topical cream			
	1 Applic, Cream, Topical, as needed, PRN, pain / discomfort			
	Comments: Prior to needlesticks			
	lidocaine topical 2% gel 1 Applic, Gel, Topical, Once, to UrinaryCatheter insertion, PRN, as ordered			
	Comments: for urinary catheter insertion.			
Antib	iotics/Anti-infectives			
	PED-cefoTAXime 100mg/ml intravenous solution			
_	50 mg/kg, Syringe, IV Piggyback, q8hours			
	PED-ampicillin 30mg/ml intravenous solution			
	50 mg/kg, Syringe, IV Piggyback, q6hours			
	PED-gentamicin 5 mg/1 mL intravenous solution 5 mg/kg, Syringe, IV Piggyback, q24h			
	PED-Vancomycin 5mg/ml intravenous solution			
	10 mg/kg, Syringe, IV Piggyback, q6hours			
	Comments: High alert medication- See Policy: Medication Administration Table - Pediatric &	, K		
A 45	Neonatal for instructions.			
Απτι-μ	<i>pyretics</i> ** ACETAMINOPHEN MAX DOSE = 650 MG/DOSE **(NOTE)*			
	Tylenol			
_	15 mg/kg, Susp, Oral, q4hours, PRN, pain / temperature			
_	Comments: Do Not exceed 3 GM Acetaminophen in 24 hours. MAX DOSE = 650 MG/DOSI	Ξ		
	Tylenol			
	15 mg/kg, Suppos, Per rectum, q4hours, PRN, pain / temperature Comments: Do Not exceed 3 GM Acetaminophen in 24 hours. MAX DOSE = 650 MG/DOSI	_		
Antivi	iral Agents	-		
	PED-Acyclovir 5mg/ml intravenous solution			
	20 mg/kg, Syringe, IV Piggyback, q8hours			
	Comments: High alert medication- See nursing protocol for instructions for administering thi	S		
Misca	medication. Illaneous agents			
	Communication Order			
	Desitin Apply topically to diaper area prn rash			
IV Sol	lutions			
	IV Start			
	insertion and management			
	sodium chloride 0.9% Flush (scheduled)			
	3 mL, Injection, IV SLOW Push, q4hours Comments: FLUSH PERIPHERAL IV LINE WITH 2-3 ML			
	sodium chloride 0.9% Flush (prn)			
	3 mL, Injection, IV SLOW Push, as needed, PRN, line patency			
		л		

		Comments: FLUSH PERIPHERAL IV LINE WITH 2-3 ML SLOWIVPUSH before and after IVP and IVPB medications and AS NEEDED		
	D51/4NS and KCI 10 mEq/500 mL intravenous solution			
		500 mL, IV Cont, mL/hr		
	NS			
	DENO	500 mL, IV Cont, 20 mL/kg		
	D5NS	500 mL, IV Cont, 20 mL/kg		
Consu	lts			
	Social So	ervices		
	Consult I	Physician		
		Pediatric infectious disease		
DEF - GOAL IND - T INT - T IVS - T NOTE Rx - Th	- This com his compo- his compo- his compo- This com his compo-	sentence is the default for the selected order apponent is a goal onent is an indicator onent is an intervention onent is an IV Set apponent is a note nent is a prescription onent is a sub phase		

Unique Plan Description: PED Febrile Infant Plan Selection Display: PED Febrile Infant PlanType: Medical Version: 1 Begin Effective Date: 1/31/2012 4:25 PM End Effective Date: Current Available at all facilities

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