

PEDS ED SEPSIS ORDER SET [11408]

Origination: 1/24/2020 Released: 1/3/2023

NURSING**VITALS [590542]** VITAL SIGNS
[6710020]Priority:
Frequency:On admission only:
Comments:**Defaults****Routine**
PER UNIT
STANDARD,
Starting today**1: Heart rate,**
respiratory rate,
oxygen
saturation, blood
pressure every 15
min until vital
signs stabilized,
then per protocol
2: Temperature
on intake and
every 60 min.**Available Buttons**[Routine] [ASAP]
[Per Unit Standard] [QShift] [Q4h]

[YES]

 CONTINUOUS
PULSE
OXIMETRY
[8610018]

Phase of Care:

Priority:
Frequency:
With vital signs?
With
Cardiopulmonary
monitoring?
While:Titrate FiO2 to keep
SaO2 between:
With exercise?
Comments:
Phase of Care:**Defaults****STAT**
CONTINUOUS**Available Buttons**[Routine]
[PRN] [QShift] [Continuous]
[YES]
[YES][AWAKE] [ASLEEP] [UNATTENDED]
[ATTENDED]

[YES]

 CARDIAC
MONITOR
[6710007]Priority:
Frequency:
Comments:
Phase of Care:**Defaults****STAT**
CONTINUOUS**Available Buttons**[Routine] [ASAP]
[Continuous] [Per Unit Standard] NEUROLOGICAL
CHECKS - Every
15 min until
stabilized, then
per protocol
[6710023]Priority:
Frequency:

Comments:

Phase of Care:

Defaults**Routine**
PER UNIT
STANDARD**Every 15 min**
until stabilized,
then per protocol**Available Buttons**[Routine] [ASAP]
[Once] [Daily] [QShift] [Continuous]
[Q1h] [Q2h] [Q4h] [Per Unit
Standard]**NURSING INTERVENTIONS [590538]**

<input checked="" type="checkbox"/> INITIATE OXYGEN BY RN [4410071]	Priority: Frequency: Comments: Phase of Care:	<u>Defaults</u> STAT CONTINUOUS	<u>Available Buttons</u> [Routine] [ASAP] [Daily] [QShift] [Continuous] [PRN] [Per Unit Standard] [Once]
<input type="checkbox"/> COLLECT POCT - BLOOD GLUCOSE [4410213]	Priority: Frequency: Comments: Phase of Care:	<u>Defaults</u> Routine ONCE	<u>Available Buttons</u> [Routine] [ASAP] [Q1h] [Q4s] [Q6s] [BID] [Daily] [ACHS]
<input checked="" type="checkbox"/> MD TO RN COMMUNICATION - Obtain blood culture of all lines and lumens including if peripheral line placed. Request additional blood culture orders as needed and label each culture accordingly [4410275]	Priority: Frequency: Phase of Care:	<u>Defaults</u> Routine CONTINUOUS	<u>Available Buttons</u> [Routine] [ASAP] [Daily] [QShift] [Continuous] [PRN] [Per Unit Standard] [Once]
<input checked="" type="checkbox"/> MD TO RN COMMUNICATION - Remind provider to order antibiotics. Goal first antibiotics within 60 minutes of huddle. [4410306]	Priority: Frequency: Phase of Care:	<u>Defaults</u> Routine CONTINUOUS	<u>Available Buttons</u> [Routine] [ASAP] [Daily] [QShift] [Continuous] [PRN] [Per Unit Standard] [Once]
<input checked="" type="checkbox"/> IV INSERT / MAINTENANCE PANEL [668157]			
<input checked="" type="checkbox"/> INSERT IV [6610018]	Priority: Frequency: Comments: Phase of Care:	<u>Defaults</u> Routine ONCE @CERMSGREFRESH (2091962:109710)@	<u>Available Buttons</u> [Routine] [ASAP] [STAT] [Once] [Continuous] [QShift]
<input checked="" type="checkbox"/> IV MAINTENANCE [6610019]	Priority: Frequency: Comments: Phase of Care:	<u>Defaults</u> Routine CONTINUOUS	<u>Available Buttons</u> [Routine] [ASAP] [STAT] [Once] [Continuous] [QShift]
<input type="checkbox"/> INSERT SALINE LOCK [6610008]	Priority: Frequency: Comments: Phase of Care:	<u>Defaults</u> Routine ONCE	<u>Available Buttons</u> [Routine] [ASAP] [STAT] [Once] [Continuous] [QShift]

SALINE LOCK
MAINTENANCE
[6610054]

Priority:
Frequency:
Comments:
Phase of Care:

Defaults
Routine
CONTINUOUS

Available Buttons
[Routine] [ASAP] [STAT]
[Once] [Continuous] [QShift]

lidocaine
injection
[7000214]

Dose:
Route:
Frequency:
PRN comment:
Frequency Start:
Frequency
Duration:
Phase of Care:

Defaults
0.2 mL
Intradermal
PRN
line maintenance

Available Buttons
[0.1 mL] [0.2 mL] [0.5 mL]
[Intradermal]
[once] [PRN]
[line maintenance] [other]

saline flush (NS)
0.9% NaCl inj
[124021]

Dose:
Route:
Frequency:
Frequency Start:
Frequency
Duration:
Phase of Care:

Defaults
5-80 mL
Intravenous
Q8H

Available Buttons
[5-80 mL]
[Intravenous]
[q8h] [q12h] [PRN]

NUTRITION

DIET (Single Response) [11871]

DIET NOTHING
BY MOUTH
[4310033]

Priority:
Frequency:

Base Diet Type?
Add'l Diet
Restrictions/Modifiers?
Base Diet Type?
Additional
Questions:

Defaults

Routine
START NOW

NPO
NPO - Sips with
Meds
NPO

Available Buttons

[Routine] [ASAP]
[Start Now] [Start at Breakfast] [Start
at Lunch] [Start at Dinner] [NPO after
Midnight] [Start at (specify time)]

if (answer = General/Age Appropriate)
Or (answer = Carb Control - Standard)
Or (answer = Carb Control - High) Or
(answer = Carb Control - Low) Or
(answer = Cardiac) Or (answer = Clear
Liquid) Or (answer = Full Liquid) Or
(answer = Low Fat) Or (answer = Low
Sodium) Or (answer = Renal Dialysis)
Or (answer = Renal No Dialysis)

Liquid Consistency?

AGE:

Tray Type:

Tray Type:

Tray Type:

if (answer = Dysphagia)

AGE:

Consistency of diet?

Liquid Consistency?

Tray Type:

Tray Type:

*This question has more cascading
questions which are not shown in the
report due to length

Add'l Diet
Restrictions/Modifiers?
Liquid Consistency?
Water or Fluid
Restriction?
Comments:
Phase of Care:

IV FLUIDS

Fluid Resuscitation [591090]

0.9 % NaCl (NS)
bolus solution
[4000852]

Dose:

Route:

Rate:

Duration:

Frequency:

Frequency Start:

Frequency Duration:

Phase of Care:

Defaults

20 mL/kg

Intravenous

for 20 Minutes

ONCE

Starting today

For 1 Doses

Available Buttons

[50 mL] [150 mL] [250 mL] [500 mL]
[1,000 mL]

[Intravenous]

[15 Minutes] [30 Minutes] [60 Minutes]

[once] [PRN]

<input type="checkbox"/> lactated ringers (LR) bolus solution [4000853]	Dose: Route: Rate: Duration: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 20 mL/kg Intravenous for 20 Minutes ONCE Starting today For 1 Doses	<u>Available Buttons</u> [250 mL] [500 mL] [1,000 mL] [Intravenous] [once] [PRN]
<input type="checkbox"/> 0.9 % NaCl (NS) bolus solution (for patients with depressed systolic function or heart failure) [4000852]	Dose: Route: Rate: Duration: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 10 mL/kg Intravenous for 20 Minutes ONCE Starting today For 1 Doses	<u>Available Buttons</u> [50 mL] [150 mL] [250 mL] [500 mL] [1,000 mL] [Intravenous] [15 Minutes] [30 Minutes] [60 Minutes] [once] [PRN]

MEDICATIONS

Vasoactive Medications, first line [591095]

Cold extremities, delayed capillary refill, and/or low blood pressure [591147]

<input type="checkbox"/> EPINEPHrine Pediatric IV infusion (<3 kg) [5000398]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.05-3 mcg/kg/min Intravenous CONTINUOUS	<u>Available Buttons</u> [0.05-2 mcg/kg/min] [continuous]
<input type="checkbox"/> EPINEPHrine Pediatric IV infusion (3-10 kg) [5000511]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.05-3 mcg/kg/min Intravenous CONTINUOUS	<u>Available Buttons</u> [0.05-2 mcg/kg/min] [continuous]
<input type="checkbox"/> EPINEPHrine Pediatric IV infusion (>10 kg) [5000510]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.05-3 mcg/kg/min Intravenous CONTINUOUS	<u>Available Buttons</u> [0.05-2 mcg/kg/min] [continuous]

<input type="checkbox"/> DOPamine IV infusion (<3 kg) [5000397]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 5-20 mcg/kg/min Intravenous	<u>Available Buttons</u> [1-5 mcg/kg/min] [5-20 mcg/kg/min]
<input type="checkbox"/> DOPamine IV infusion (3-10 kg) [5000509]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 5-20 mcg/kg/min Intravenous	<u>Available Buttons</u> [1-5 mcg/kg/min] [5-20 mcg/kg/min]
<input type="checkbox"/> DOPamine IV infusion (>10 kg) [5000508]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 5-20 mcg/kg/min Intravenous	<u>Available Buttons</u> [1-5 mcg/kg/min] [5-20 mcg/kg/min]
<input type="checkbox"/> Warm extremities, "flash" capillary refill, and/or low (typically diastolic) blood pressure [591148]			
<input type="checkbox"/> NORepinephrine Pediatric IV infusion (<3 kg) [5000415]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.01-2 mcg/kg/min Intravenous	<u>Available Buttons</u> [0.01-2 mcg/kg/min]
<input type="checkbox"/> NORepinephrine Pediatric IV infusion (3-10 kg) [5000538]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.01-2 mcg/kg/min Intravenous	<u>Available Buttons</u> [0.01-2 mcg/kg/min]
	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	CONTINUOUS	[continuous]

- NORepinephrine Pediatric IV infusion (>10 kg) [5000537]

Dose:
Route:
Rate:
Frequency:
Frequency Start:
Frequency
Duration:
Phase of Care:

Defaults

**0.01-2
mcg/kg/min
Intravenous**

CONTINUOUS**Available Buttons**

[0.01-2 mcg/kg/min]

[continuous]

- DOPamine IV infusion (<3 kg) [5000397]

Dose:
Route:
Rate:
Frequency:
Frequency Start:
Frequency
Duration:
Phase of Care:

Defaults

**5-20 mcg/kg/min
Intravenous**

CONTINUOUS**Available Buttons**

[1-5 mcg/kg/min] [5-20 mcg/kg/min]

[continuous]

- DOPamine IV infusion (3-10 kg) [5000509]

Dose:
Route:
Rate:
Frequency:
Frequency Start:
Frequency
Duration:
Phase of Care:

Defaults

**5-20 mcg/kg/min
Intravenous**

CONTINUOUS**Available Buttons**

[1-5 mcg/kg/min] [5-20 mcg/kg/min]

[continuous]

- DOPamine IV infusion (>10 kg) [5000508]

Dose:
Route:
Rate:
Frequency:
Frequency Start:
Frequency
Duration:
Phase of Care:

Defaults

**5-20 mcg/kg/min
Intravenous**

CONTINUOUS**Available Buttons**

[1-5 mcg/kg/min] [5-20 mcg/kg/min]

[continuous]

Additional Medications [591149]

- hydrocortisone (SOLU-CORTEF) 100 mg IV [204778]

Dose:
Route:
Frequency:
Frequency Start:
Frequency Duration:
Phase of Care:

Defaults

**2 mg/kg/DOSE
(Max: 100 mg)
Intravenous**

ONCE**Starting today****For 1 Doses****Available Buttons**

- dextrose 10 % (D10W) IV bolus [4001156]

Dose:
Route:
Rate:
Duration:
Frequency:
Frequency Start:
Frequency Duration:
Phase of Care:

Defaults

**5 mL/kg
Intravenous**

ONCE**Starting today****For 1 Doses****Available Buttons**[250 mL] [500 mL] [1,000 mL]
[Intravenous][15 Minutes] [30 Minutes] [60 Minutes]
[once] [PRN]

<input type="checkbox"/> dextrose 25 % (D25W) IV bolus [6383]	Dose: Route: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 2 mL/kg/DOSE Intravenous ONCE Starting today For 1 Doses	<u>Available Buttons</u> [0.25 g/kg/DOSE] [0.5 g/kg/DOSE] [1 g/kg/DOSE] [Intravenous] [once] [PRN] [per protocol]
<input type="checkbox"/> calcium gluconate in NS IV bolus (Peripheral Line) [5000476]	Dose: Route: Rate: Duration: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 100 mg/kg/DOSE (Max: 3,000 mg) Intravenous for 60 Minutes ONCE Starting today For 1 Doses	<u>Available Buttons</u> [60 Minutes] [once]
Additional Vasoactive Medications [591150]			
<input type="checkbox"/> vasopressin Pediatric IV infusion (<3 kg; for Shock/GI Hemorrhage) [5000420]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.0003-0.002 Units/kg/min Intravenous CONTINUOUS	<u>Available Buttons</u> [0.0003-0.002 Units/kg/min] [0.002-0.01 Units/kg/min] [continuous]
<input type="checkbox"/> vasopressin Pediatric IV infusion (3-10 kg; for Shock/GI Hemorrhage) [5000546]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.0003-0.002 Units/kg/min Intravenous CONTINUOUS	<u>Available Buttons</u> [0.0003-0.002 Units/kg/min] [0.002-0.01 Units/kg/min] [continuous]
<input type="checkbox"/> vasopressin Pediatric IV infusion (>10 kg; for Shock/GI Hemorrhage) [5000544]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.0003-0.002 Units/kg/min Intravenous CONTINUOUS	<u>Available Buttons</u> [0.0003-0.002 Units/kg/min] [0.002-0.01 Units/kg/min] [continuous]
<input type="checkbox"/> milrinone Pediatric IV infusion (<3 kg) [5000410]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.2-0.75 mcg/kg/min Intravenous CONTINUOUS	<u>Available Buttons</u> [0.2-0.75 mcg/kg/min] [continuous]

<input type="checkbox"/> milrinone Pediatric IV infusion (3-10 kg) [5000530]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.2-0.75 mcg/kg/min Intravenous	<u>Available Buttons</u> [0.2-0.75 mcg/kg/min]
<input type="checkbox"/> milrinone Pediatric IV infusion (>10 kg) [5000529]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.2-0.75 mcg/kg/min Intravenous	<u>Available Buttons</u> [0.2-0.75 mcg/kg/min]
<input type="checkbox"/> alprostadil Pediatric IV infusion (<3 kg) [5000392]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.05-0.2 mcg/kg/min Intravenous	<u>Available Buttons</u> [0.05-0.2 mcg/kg/min]
<input type="checkbox"/> alprostadil Pediatric IV infusion (3 kg and up) [5000121]	Dose: Route: Rate: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 0.05-0.2 mcg/kg/min Intravenous	<u>Available Buttons</u> [0.05-0.2 mcg/kg/min]
Pediatric Sepsis Antibiotics [591151]			
<input type="checkbox"/> Age < 4 weeks [591152]			
<input type="checkbox"/> cefoTAXime (CLAFORAN) IV [4000522]	Dose: Route: Rate: Duration: Frequency: Frequency Start: Frequency Duration: Phase of Care:	<u>Defaults</u> 50 mg/kg/DOSE Intravenous for 10 Minutes ONCE Starting today For 1 Doses	<u>Available Buttons</u> [Intravenous] [q8h] [q12h]

- ceftAZIDime (FORTAZ) IV (for cefoTAXime shortage) [4000608]

Dose: **50 mg/kg/DOSE**
 Route: **Intravenous**
 Rate:
 Duration: **for 10 Minutes**
 Frequency: **ONCE**
 Frequency Start: **Starting today**
 Frequency: **For 1 Doses**
 Duration:
 Phase of Care:

Available Buttons

[Intravenous]
 [q8h] [q12h]

- ampicillin 30 mg/mL in SW solution inj [4002480]

Dose: **100 mg/kg/DOSE**
 Route: **Intravenous**
 Rate:
 Duration: **for 15 Minutes**
 Frequency: **ONCE**
 Frequency Start: **Starting today**
 Frequency: **For 1 Doses**
 Duration:
 Phase of Care:

Available Buttons

- acyclovir (ZOVIRAX) IV [4010001]

Dose: **20 mg/kg/DOSE**
 Route: **Intravenous**
 Rate:
 Duration: **for 60 Minutes**
 Frequency: **ONCE**
 Frequency Start: **Starting today**
 Frequency: **For 1 Doses**
 Duration:
 Phase of Care:

Available Buttons

[5 mg/kg/DOSE] [10 mg/kg/DOSE]
 [15 mg/kg/DOSE] [20 mg/kg/DOSE]
 [Intravenous]
 [once] [q8h] [q12h]

- Age 4 to 8 weeks [591153]

- cefTRIAxone (ROCEPHIN) IV [4001251]

Dose: **100 mg/kg/DOSE**
 Route: **Intravenous**
 Rate:
 Duration:
 Frequency: **ONCE**
 Frequency Start: **Starting today**
 Frequency: **For 1 Doses**
 Duration:
 Phase of Care:

Available Buttons

[Intravenous]
 [q24h]

- Previously Healthy – No Central Line [591154]

- cefTRIAxone (ROCEPHIN) IV [4001251]

Dose: **100 mg/kg/DOSE**
 Route: **Intravenous**
 Rate:
 Duration:
 Frequency: **ONCE**
 Frequency Start: **Starting today**
 Frequency: **For 1 Doses**
 Duration:
 Phase of Care:

Available Buttons

[Intravenous]
 [q24h]

cefTRIAxone
(ROCEPHIN) IM
(Delayed
Access)
[6000355]

Dose:
Route:
Rate:
Duration:
Frequency:
Frequency Start:
Frequency
Duration:
Phase of Care:

Defaults

100 mg/kg/DOSE
Intramuscular

ONCE
Starting today
For 1 Doses

Available Buttons

[500 mg] [50 mg/kg/DOSE]
[Intramuscular]

[once]

vancomycin IV
[4000514]

Dose:
Route:
Rate:
Duration:
Frequency:
Frequency Start:
Frequency
Duration:
Phase of Care:

Defaults

20 mg/kg/DOSE
Intravenous

for 60 Minutes
ONCE
Starting today
For 1 Doses

Available Buttons

[Intravenous]

Severe Beta-Lactam Allergy [591155]

aztreonam
(AZACTAM) IV
syringe
[5000264]

Dose:
Route:
Rate:
Duration:
Frequency:
Frequency Start:
Frequency
Duration:
Phase of Care:

Defaults

30 mg/kg/DOSE
Intravenous

for 30 Minutes
ONCE
Starting today
For 1 Doses

Available Buttons

[30 mg/kg/DOSE] [50 mg/kg/DOSE]

[30 Minutes] [60 Minutes]
[q6h] [q8h] [q12h]

vancomycin IV
[4000514]

Dose:
Route:
Rate:
Duration:
Frequency:
Frequency Start:
Frequency
Duration:
Phase of Care:

Defaults

20 mg/kg/DOSE
Intravenous

for 60 Minutes
ONCE
Starting today
For 1 Doses

Available Buttons

[Intravenous]

Immunocompromised, ANC < 500 [591156]

cefEPime
(MAXIPIME) IV
syringe
[5000027]

Dose:
Route:
Rate:
Duration:
Frequency:
Frequency Start:
Frequency
Duration:
Phase of Care:

Defaults

50 mg/kg/DOSE
Intravenous

for 30 Minutes
ONCE
Starting today
For 1 Doses

Available Buttons

[30 mg/kg/DOSE] [50 mg/kg/DOSE]

[once] [q8h] [q12h]

vancomycin IV
[4000514]

Dose:
Route:
Rate:
Duration: for 60 Minutes
Frequency: ONCE
Frequency Start: Starting today
Frequency For 1 Doses
Duration:
Phase of Care:

Defaults

20 mg/kg/DOSE
Intravenous

Available Buttons

[Intravenous]

Suspected intra-abdominal source (Single Response) [393391]

cefTRIAxone (ROCEPHIN) IV and metronidazole (FLAGYL) IV [420414]

cefTRIAxone (ROCEPHIN) IV
[4001251]

Dose:
Route:
Rate:
Duration:
Frequency: ONCE
Frequency Start: Starting today
Frequency For 1 Doses
Duration:
Phase of Care:

Defaults

100 mg/kg/DOSE
Intravenous

Available Buttons

[Intravenous]

[q24h]

metronidazole (FLAGYL) IV
[4000687]

Dose:
Route:
Rate:
Duration: for 60 Minutes
Frequency: ONCE
Frequency Start: Starting today
Frequency For 1 Doses
Duration:
Phase of Care:

Defaults

10 mg/kg/DOSE
Intravenous

Available Buttons

[Intravenous]

piperacillin-tazobactam (ZOSYN) IV (order in place of ceftriaxone and metronidazole if immunocompromised or Pseudomonas suspected) [4000539]

Dose:
Route:
Rate:
Duration: for 30 Minutes
Frequency: ONCE
Frequency Start: Starting today
Frequency For 1 Doses
Duration:
Phase of Care:

Defaults

100 mg/kg/DOSE
Intravenous

Available Buttons

[Intravenous]

Suspected toxin mediated illness, ADD [591159]

clindamycin (CLEOCIN) IV syringe [4002629]

Dose:
Route:
Rate:
Duration: for 30 Minutes
Frequency: ONCE
Frequency Start: Starting today
Frequency For 1 Doses
Duration:
Phase of Care:

Defaults

13.3
mg/kg/DOSE
Intravenous

Available Buttons

[Intravenous]

Peds Sepsis Rapid Sequence Intubation [591160] Pre-treatment [591161] atropine 0.4
mg/mL inj
[196606]

Dose:

Route:

Frequency:

Frequency Start:

Frequency

Duration:

Phase of Care:

Defaults**0.02****mg/kg/DOSE
(Max: 0.5 mg)****Intravenous****ONCE****Starting today****For 1 Doses****Available Buttons**

[once] [PRN]

 Sedation [591162] ketamine
(KETALAR) 10
mg/mL inj
[11478]

Dose:

Route:

Frequency:

Frequency Start:

Frequency

Duration:

Phase of Care:

Defaults**2 mg/kg/DOSE****Intravenous****ONCE****Starting today****For 1 Doses****Available Buttons**

[1 mg] [2 mg]

[Intravenous] [Intramuscular]

[once] [PRN]

 fentanyl
(SUBLIMAZE) inj
[7000038]

Dose:

Route:

Frequency:

Frequency Start:

Frequency

Duration:

Phase of Care:

Defaults**2 mcg/kg/DOSE
(Max: 100 mcg)****Intravenous****ONCE****Starting today****For 1 Doses****Available Buttons** midazolam
(VERSED) 1
mg/mL (5 mL) inj
[4002310]

Dose:

Route:

Frequency:

Frequency Start:

Frequency

Duration:

Phase of Care:

Defaults**0.2 mg/kg/DOSE
(Max: 4 mg)****Intravenous****ONCE****Starting today****For 1 Doses****Available Buttons**

[Intravenous]

[once] [q2h PRN] [q4h PRN]

 Paralytic [591163] rocuronium
(ZEMURON) 10
mg/mL inj
[116084]

Dose:

Route:

Frequency:

Frequency Start:

Frequency

Duration:

Phase of Care:

Defaults**1 mg/kg/DOSE****Intravenous****ONCE****Starting today****For 1 Doses****Available Buttons**

[Intravenous]

[once]

LABS**BLOOD PRODUCTS [590547]** TYPE AND
SCREEN
[LO054]

Comments:

Priority:

Phase of Care:

Defaults**STAT****Available Buttons**

[Routine] [STAT]

CHEMISTRY [590544]

AMYLASE
[82150A]

Priority:

Frequency:
Release to patient :
Additional
Questions:

Comments:
Phase of Care:
Class:

Defaults
STAT

ONCE
Immediate

MHS IP Normal

Defaults
STAT

ONCE
Immediate

MHS IP Normal

Defaults
STAT

ONCE
Immediate

MHS IP Normal

Defaults
STAT

ONCE
Immediate

MHS IP Normal

Available Buttons

[Routine] [STAT] [Timed] [ASAP]
[Add-On Lab Order]
[Once] [Daily] [Daily AM] [Once am]
[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

Available Buttons

[Routine] [STAT] [Timed] [ASAP]
[Add-On Lab Order]
[Once] [Daily] [Daily AM] [Once am]
[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

Available Buttons

[Routine] [STAT] [Timed] [ASAP]
[Add-On Lab Order]
[Once] [Daily] [Daily AM] [Once am]
[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

Available Buttons

[Routine] [STAT] [Timed] [ASAP]
[Add-On Lab Order]
[Once] [Daily] [Daily AM] [Once am]
[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

BLOOD GAS
VENOUS
[82803L]

Priority:

Frequency:
Release to patient :
Additional
Questions:

Comments:
Phase of Care:
Class:

COMPREHEN
METABOLIC
PANEL [80053]

Priority:

Frequency:
Release to patient :
Additional
Questions:

Comments:
Phase of Care:
Class:

C-REACTIVE
PROTEIN
[86140A]

Priority:

Frequency:
Release to patient :
Additional
Questions:

Comments:
Phase of Care:
Class:

HCG [84703]

Priority:

Frequency:

Release to patient :

Additional

Questions:

Comments:

Phase of Care:

Class:

 LACTATE
[83605A]

Priority:

Frequency:

Release to patient :

Additional

Questions:

Comments:

Phase of Care:

Class:

 LIPASE
[83690A]

Priority:

Frequency:

Release to patient :

Additional

Questions:

Comments:

Phase of Care:

Class:

 PEDIATRIC
CHEMSCREEN
ONCOLOGY
[L00132]

Priority:

Frequency:

Release to patient :

Additional

Questions:

Comments:

Phase of Care:

Class:

Defaults**STAT****ONCE****Immediate****MHS IP Normal****Defaults****STAT****ONCE****Immediate****MHS IP Normal****Defaults****STAT****ONCE****Immediate****MHS IP Normal****Defaults****STAT****ONCE****Immediate****MHS IP Normal****Available Buttons**

[Routine] [STAT] [Timed] [ASAP]

[Add-On Lab Order]

[Once] [Daily] [Daily AM] [Once am]

[Immediate] [Manual release only]

if (answer = Manual release only)

Reason for preventing immediate
release:Additional details for preventing
immediate release:**Available Buttons**

[Routine] [STAT] [Timed] [ASAP]

[Add-On Lab Order]

[Once] [Daily] [Daily AM] [Once am]

[Immediate] [Manual release only]

if (answer = Manual release only)

Reason for preventing immediate
release:Additional details for preventing
immediate release:**Available Buttons**

[Routine] [STAT] [Timed] [ASAP]

[Add-On Lab Order]

[Once] [Daily] [Daily AM] [Once am]

[Immediate] [Manual release only]

if (answer = Manual release only)

Reason for preventing immediate
release:Additional details for preventing
immediate release:**Available Buttons**

[Routine] [STAT] [Timed] [ASAP]

[Add-On Lab Order]

[Once] [Daily] [Daily AM] [Once am]

[Immediate] [Manual release only]

if (answer = Manual release only)

Reason for preventing immediate
release:Additional details for preventing
immediate release:

PROCALCITONIN
[84145]

Priority:

 Frequency:
 Release to patient :
 Additional
 Questions:

 Comments:
 Phase of Care:
 Class:
Defaults**STAT****ONCE**
Immediate**MHS IP Normal****Available Buttons**
 [Routine] [STAT] [Timed] [ASAP]
 [Add-On Lab Order]
 [Once] [Daily] [Daily AM] [Once am]
 [Immediate] [Manual release only]

 if (answer = Manual release only)
 Reason for preventing immediate
 release:
 Additional details for preventing
 immediate release:
CSF [3040020116]
 CSF PANEL [3040020115]

 SPINAL FLUID
ANALYSIS
[L00043]

Priority:

 Frequency:
 Tube # to use cell
 count:
 Tube # to use
 protein:
 Tube # to use
 glucose:
 Release to patient :
 Additional
 Questions:

 Comments:
 Phase of Care:
Defaults**STAT****ONCE****Immediate****Defaults****STAT****ONCE**
**Cerebrospinal
fluid****Immediate****MHS IP Normal****Available Buttons**
 [Routine] [STAT] [Add-On Lab
 Order]
 [Once]

 [Immediate] [Manual release only]
 if (answer = Manual release only)
 Reason for preventing immediate
 release:
 Additional details for preventing
 immediate release:

 CULTURE AND
GRAM STAIN
[L00013]

Priority:

 Frequency:
 Specimen Source:

 Site or Additional
 Information:
 Release to patient :
 Additional
 Questions:

 Comments:
 Phase of Care:
 Class:
Available Buttons
 [Routine] [STAT] [Add-On Lab
 Order]
 [Once]

 [Immediate] [Manual release only]
 if (answer = Manual release only)
 Reason for preventing immediate
 release:
 Additional details for preventing
 immediate release:

HERPES/HSV
PCR [L00141]

Priority:
Frequency:

Specimen Source:

Site or Additional
Information:
Release to patient :
Additional
Questions:

Comments:
Phase of Care:
Class:

Defaults

STAT
ONCE, Starting
today
Cerebrospinal
fluid

Available Buttons

[Routine] [STAT] [Add-On Lab Order]
[Once]

[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

ENTEROVIRUS
PCR CSF
[87498A]

Priority:
Frequency:
Specimen Source:

Site or Additional
Information:
Release to patient :
Additional
Questions:

Comments:
Phase of Care:
Class:

MHS IP Normal

Defaults

STAT
ONCE
Cerebrospinal
fluid

Available Buttons

[Routine] [STAT] [Add-On Lab Order]
[Once]

[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

MISCELLANEOUS
GENOMICS TEST
[L00243]

Priority:
Frequency:
Release to patient :
Additional
Questions:

Comments:
Phase of Care:
Class:

MHS IP Normal

Defaults

STAT

ONCE
Immediate

Available Buttons

[Routine] [STAT] [Timed] [ASAP]
[Add-On Lab Order]
[Once]
[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

HEMATOLOGY [590545]

MHS IP Normal

CBC WITH
DIFF [85025A]

Priority:

Defaults
STAT

Frequency:
This is a test:

ONCE

Release to patient :
Additional
Questions:

Immediate

Available Buttons

[Routine] [STAT] [Timed] [ASAP]
[Add-On Lab Order]
[Once] [Daily] [Daily AM] [Once am]

[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

Comments:
Phase of Care:
Class:

MHS IP Normal
Defaults

FIBRINOGEN
[85384]

Priority:

STAT

Frequency:
Release to patient :
Additional
Questions:

ONCE
Immediate

Available Buttons

[Routine] [STAT] [Timed] [ASAP]
[Add-On Lab Order]
[Once] [Daily] [Daily AM] [Once am]
[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

Comments:
Phase of Care:
Class:

MHS IP Normal
Defaults

PROTHROMBIN
(PT) [85610B]

Priority:

STAT

Frequency:
Release to patient :
Additional
Questions:

ONCE
Immediate

Available Buttons

[Routine] [STAT] [Timed] [ASAP]
[Add-On Lab Order]
[Once] [Daily] [Daily AM] [Once am]
[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

Comments:
Phase of Care:
Class:

MHS IP Normal

PTT [85730]

Priority:
 Frequency:
 Release to patient :
 Additional
 Questions:

Defaults
STAT

ONCE
Immediate

Available Buttons

[Routine] [STAT] [Timed] [ASAP]
 [Add-On Lab Order]
 [Once] [Daily] [Daily AM] [Once am]
 [Immediate] [Manual release only]

if (answer = Manual release only)
 Reason for preventing immediate
 release:
 Additional details for preventing
 immediate release:

Comments:
 Phase of Care:
 Class:

MHS IP Normal

SED RATE
 (ESR) [85651]

Priority:
 Frequency:
 Release to patient :
 Additional
 Questions:

Defaults
STAT

ONCE
Immediate

Available Buttons

[Routine] [STAT] [Timed] [ASAP]
 [Add-On Lab Order]
 [Once] [Daily] [Daily AM] [Once am]
 [Immediate] [Manual release only]

if (answer = Manual release only)
 Reason for preventing immediate
 release:
 Additional details for preventing
 immediate release:

Comments:
 Phase of Care:
 Class:

MHS IP Normal

MICROBIOLOGY [590546]

BLOOD CULTURES PANEL [668158]

BLOOD
 CULTURE - #1:
 Peripheral line
 [87040]

Priority:
 Frequency:
 Specimen Source:
 Site or Additional
 Information:
 Comments:
 Phase of Care:
 Class:

Defaults
STAT

ONCE For 1
Occurrences
Blood
peripheral line

Available Buttons

[Routine] [STAT] [Add-On Lab
 Order]
 [Once]

BLOOD
 CULTURE - #2:
 Central catheter
 (first lumen)
 [87040]

Priority:
 Frequency:
 Specimen Source:
 Site or Additional
 Information:
 Comments:
 Phase of Care:
 Class:

MHS IP Normal
Defaults
STAT

ONCE For 1
Occurrences
Blood
Central catheter
(first lumen)

Available Buttons

[Routine] [STAT] [Add-On Lab
 Order]
 [Once]

MHS IP Normal

BLOOD
CULTURE - #3 :
Central catheter
(additional
lumen) [87040]

Priority:

Frequency:

Specimen Source:
Site or Additional
Information:

Comments:
Phase of Care:
Class:

Defaults
STAT

**ONCE For 1
Occurrences**
Blood
central catheter
(additional
lumen)

Available Buttons
[Routine] [STAT] [Add-On Lab
Order]
[Once]

RESPIRATORY
VIRUS PANEL
PCR [L00179]

Priority:

Frequency:
SPECIMEN
SOURCE:
Release to patient :
Additional
Questions:

Defaults
STAT

ONCE

Immediate

MHS IP Normal

Available Buttons
[Routine] [STAT] [Timed] [ASAP]
[Add-On Lab Order]
[Once] [Daily] [Daily AM] [Once am]
[Nasopharyngeal] [Midturbinate Nasal]

[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

Comments:
Phase of Care:
Class:

Defaults
STAT

ONCE

Immediate

MHS IP Normal

Available Buttons
[Routine] [STAT] [Add-On Lab Order]
[Once]

[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

RSV AND
INFLUENZA
A/B BY PCR
[L00256]

Priority:
Frequency:
Specimen Source:
Release to patient :
Additional
Questions:

Comments:
Phase of Care:
Class:

Defaults
STAT

ONCE

Feces

Immediate

MHS IP Normal

Available Buttons
[Routine] [STAT] [Add-On Lab Order]
[Once]

[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

STOOL
PATHOGEN
SCREEN BY
PCR [87505]

Priority:
Frequency:
Specimen Source:
Release to patient :
Additional
Questions:

Comments:
Phase of Care:
Class:

MHS IP Normal

LABS HSV [590688]

Order testing for patients with risk factors: < 14 days or < 21 days with (< 37 weeks gestation, ill appearing, seizures, vesicles, maternal history of HSV, postnatal HSV contact, maternal fever peripartum, hepatosplenomegaly)

HSV [591354]

HERPES/HSV
PCR -
Conjunctiva &
Nasopharynx
[L00141]

Priority:

Defaults
STAT

Available Buttons

[Routine] [STAT] [Add-On Lab
Order]

Frequency:

**ONCE For 1
Occurrences
Conjunctiva
Nasopharynx**

[Once]

Specimen Source:
Site or Additional
Information:

Comments:

Phase of Care:

Class:

MHS IP Normal

HERPES/HSV
PCR - Rectal
[L00141]

Priority:

Defaults
STAT

Available Buttons

[Routine] [STAT] [Add-On Lab
Order]

Frequency:

**ONCE, Starting
today For 1
Occurrences
Rectal**

[Once]

Specimen Source:
Site or Additional
Information:

Comments:

Phase of Care:

Class:

MHS IP Normal

HERPES/HSV
PCR - Vesicle
fluid [L00141]

Priority:

Defaults
STAT

Available Buttons

[Routine] [STAT] [Add-On Lab
Order]

Frequency:

**ONCE, Starting
today For 1
Occurrences
Lesion**

[Once]

Specimen Source:
Site or Additional
Information:

Comments:

Phase of Care:

Class:

MHS IP Normal

HERPES/HSV
PCR - Blood
[L00141]

Priority:

Defaults
STAT

Available Buttons

[Routine] [STAT] [Add-On Lab
Order]

Frequency:

**ONCE, Starting
today For 1
Occurrences
Blood**

[Once]

Specimen Source:
Site or Additional
Information:

Comments:

Phase of Care:

Class:

MHS IP Normal

POCT [590543]

P POCT
GLUCOSE
[82962]

Priority:
Frequency:
Release to patient :
Additional
Questions:

Defaults
Routine
ONCE
Immediate

Available Buttons

[Routine] [ASAP] [STAT] [Timed]
[Once] [Q4h] [Q8h]
[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

Comments:
Phase of Care:

URINE [590548]

UA CULTURE
IF INDICATED
[81003B]

Priority:
Frequency:
Release to patient :
Additional
Questions:

Defaults
STAT
ONCE
Immediate

Available Buttons

[Routine] [STAT] [Add-On Lab Order]
[Once]
[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

Comments:
Phase of Care:

URINE
CULTURE
[87086]

Priority:
Frequency:
Release to patient :
Additional
Questions:

Defaults
STAT
ONCE
Immediate

Available Buttons

[Routine] [STAT] [Add-On Lab Order]
[Once]
[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

Comments:
Phase of Care:
Class:

URINE
PREGNANCY
TEST [81025]

Priority:
Frequency:
Release to patient :
Additional
Questions:

MHS IP Normal
Defaults
STAT
ONCE
Immediate

Available Buttons

[Routine] [STAT] [Add-On Lab Order]
[Once]
[Immediate] [Manual release only]

if (answer = Manual release only)
Reason for preventing immediate
release:
Additional details for preventing
immediate release:

Comments:
Phase of Care: