

View Orders Active Orders (includes Pending & Recent Activity) - ALL SERVICES

Active Orders includes Service Order Start / Stop Provider Nurse Clerk Chart Status Location

PHYSICIAN MENU				Done
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- Write Delayed C
- Write Orders
- PHYSICIAN ME
- Allergies
- NURSE MENU
- CBOC PHYSICI
- CBOC NURSIN
- ER MENU

	MAH	active	4 S-M
	MAH	active	4 S-M
	MAH	active	4 S-M
	MAH	active	4 S-M
	MDC	active	4 S-M
		active	4 S-M
		active	4 S-M
		active	4 S-M
		active	4 S-M
	ERU	active	4 S-M
		active	4 S-M
		active	4 S-M

	>> PCA Morphine: After the initial set-up and after each increase in incremental dose or each decrease in lockout interval, monitor and record levels of sedation, pain and vital signs q 15 minutes x 4, then q	Start: 03/03/11 03:48	Mirza, Mohammad R				active	4 S-M
	>> PCA Morphine: If respiratory rate falls below 10/minute OR BP systolic is less than 90 mmHg: Stop PCA administration and Call Physician immediately.	Start: 03/03/11 09:48	Mirza, Mohammad R				active	4 S-M

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CHF Admission Done

The following orders will be auto generated

- BNP Lab Collect x3
- Daily Room Air Pulse Oximeter Check
- I&O QShift
- Nutrition Consult
- Pharmacy Consult
- Social Work Consult
- Weight Daily

>> Click here to initiate CHF Admission orders

- Write Delayed C
- Write Orders
- PHYSICIAN ME
- Allergies
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- CBOC NURSIN
- ER MENU

Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
						MAH	active	4 S-M
						MAH	active	4 S-M
						MAH	active	4 S-M
						MAH	active	4 S-M
						MDC	active	4 S-M
							active	4 S-M
							active	4 S-M
							active	4 S-M
							active	4 S-M
						ERU	active	4 S-M
							active	4 S-M

>> PCA morphine. After the initial set-up and after each increase in incremental dose or each decrease in lockout interval, monitor and record levels of sedation, pain and vital signs q 15 minutes x 4, then q

Start: 05/05/11 05:48 Mirza, Mohammad H

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Active Orders (includes	Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location			
<div style="border: 1px solid gray; padding: 5px;"> <p style="text-align: center; margin: 0;">Medicine Admission Menu Done</p> <p>CHF Admission</p> <p>ICU Admission</p> <p>Medicine (Non ICU) Admission</p> <p>Simple Direct Admit</p> </div>							MAH	active	4 S-M			
						MAH	active	4 S-M				
						MAH	active	4 S-M				
						MAH	active	4 S-M				
						MDC	active	4 S-M				
							active	4 S-M				
							active	4 S-M				
							active	4 S-M				
							active	4 S-M				
						ERU	active	4 S-M				
		>> PCA Morphine: After the initial set-up and after each increase in incremental dose or each decrease in lockout interval, monitor and record levels of sedation, pain and vital signs q 15 minutes x 4, then q	Start: 03/03/11 09:48	Mirza, Mohammad R				active	4 S-M			
		>> PCA Morphine: If respiratory rate falls below 10/minute OR BP systolic is less than 90 mmHg: Stop PCA administration and Call	Start: 03/03/11 09:48	Mirza, Mohammad R				active	4 S-M			
		>> PCA Morphine: If patient is somnolent and difficult to arouse, OR for respiratory rate less than 8 - Administer oxygen 4L/min by nasal cannula or face mask, AND administer Narcan 0.1 mg IV bolus q 3 minutes (max. 0.4 mg) until respiratory rate is greater than 10 and patient is easy to arouse. AND stop PCA	Start: 03/03/11 09:48	Mirza, Mohammad R				active	4 S-M			

Cover Sheet Problems Meds Orders Notes Consults Surgery D/C Summ Labs Reports

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Active Orders (includes Pending & Recent Activity)	Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
CHF Admission Done									
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Daily Room Air Pulse Oximeter Check									
I&D QShift									
Nutrition Consult									
Pharmacy Consult									
<div style="border: 1px solid gray; padding: 5px;"> Admit to Team <p>Order: ADMIT TO TEAM</p> <p>Admit to Team: Medicine One</p> <p>Start Date/Time: NOW</p> <p>Order Sig: ADMIT TO TEAM Medicine One</p> <p>Accept Order</p> <p>Quit</p> </div>									
							MAH	active	4 S-M
							MAH	active	4 S-M
							MAH	active	4 S-M
							MAH	active	4 S-M
							MDC	active	4 S-M
								active	4 S-M
								active	4 S-M
								active	4 S-M
								active	4 S-M
							ERU	active	4 S-M
		>> PCA Morphine: After the initial setup and after each increase in incremental dose or each decrease in lockout interval, monitor and record levels of sedation, pain and vital signs q 15 minutes x 4, then q	Start: 03/03/11 09:48	Mirza, Mohammad R				active	4 S-M
		>> PCA Morphine: If respiratory rate falls below 10/minute OR BP systolic is less than 90 mmHg: Stop PCA administration and Call Physician for assist.	Start: 03/03/11 09:48	Mirza, Mohammad R				active	4 S-M
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CHF New Admissi...

- Admit to Team
- Diagnosis: CH
- Condition
- CODE STATL
- Vital/Measure
- ACTIVITY OR
- DIETETIC ME
- NT PROBPN
- LABORATOR
- RADIOLOGY
- DVT/GI Prop
- CHF Weight C

Stop Order Set

ms | Meds | Orders | Notes | Consults | Surgery | D/C Summ | Labs | Reports

Start CPRS - Patient Chart Document1 - Microsoft ... 7:18 PM LOCK

Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
	CHF Admission						unreleas	Inpatie
<p>The following orders will be auto generated</p> <ul style="list-style-type: none"> BNP Lab Collect x3 Daily Room Air Pulse Oximeter Check I&O QShift Nutrition Consult Pharmacy Consult 								
						MAH	active	4 S-M
						MAH	active	4 S-M
						MAH	active	4 S-M
						MAH	active	4 S-M
						MDC	active	4 S-M
							active	4 S-M
							active	4 S-M
							active	4 S-M
							active	4 S-M
	for respiratory rate less than 8 - Administer oxygen 4L/min by nasal cannula or face mask, AND administer Narcan 0.1 mg IV bolus q 3 minutes (max. 0.4 mg) until respiratory rate is greater than 10 and patient is easy to arouse, AND stop PCA administration and Call Physician Immediately.							
	>> PCA Morphine: For severe respiratory depression: Support respirations with O2/Ambu as needed AND administer Narcan 0.4 mg IV bolus, AND Stop PCA administration and Call Physician Immediately.	Start: 01/10/11 15:20	Gillum,Jillanna J			ERU	active	4 S-M

Condition

Condition:

Order Sig

Condition

- CHF New Admissi...
- Admit to Team
 - Diagnosis: CHF
 - Condition
 - CODE STATL
 - Vital/Measure
 - ACTIVITY OR
 - DIETETIC ME
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 - LABORATOR
 - RADIOLOGY
 - DVT/GI Prop
 - CHF Weight D

CODE STATUS MENU Next

1 Full Code

If you are entering the INITIAL DNR order for this hospitalization make sure the required progress note documentation has been completed.

Resident DNR order expire in 24 hours. Residents must order #2.

← 2 DNR

Attending DNR orders do not expire. Attendings order #3.

← 3 DNR

								unreleas	Inpatient
								unreleas	Inpatient
								unreleas	Inpatient
							MAH	active	4 S-M
							MAH	active	4 S-M
							MAH	active	4 S-M
							MAH	active	4 S-M
							MDC	active	4 S-M
								active	4 S-M
								active	4 S-M
								active	4 S-M
								active	4 S-M
								active	4 S-M

- CHF New Adm
- Admit to Te...
 - Diagnosis: C...
 - Condition
 - CODE STATU...**
 - Vital/Measure
 - ACTIVITY OR
 - DIETETIC ME
 - NT PROBPN
 - LABORATORY
 - RADIOLOGY
 - DVT/GI Prop
 - CHF Weight D

	systemic is less than 30 mmHg. Stop PCA administration and Call Physician Immediately.								
	>> PCA Morphine: If patient is somnolent and difficult to arouse, OR for respiratory rate less than 8 - Administer oxygen 4L/min by nasal cannula or face mask, AND administer Narcan 0.1 mg IV bolus q 3 minutes (max. 0.4 mg) until respiratory rate is greater than 10 and patient is easy to arouse, AND stop PCA administration and Call Physician Immediately.	Start: 01/10/11 15:20	Gillum,Jillanna J	ERU				active	4 S-M
	>> PCA Morphine: For severe respiratory depression: Support respirations with O2/Ambu as needed AND administer Narcan 0.4 mg	Start: 01/10/11 15:20	Gillum,Jillanna J			ERU		active	4 S-M

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Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
Vital/Measurements								
	1	TPR B/P DAILY	13	TEMPERATURE			unreleas	Inpatie
	2	TPR B/P Q SHIFT	14	Oral Temps Only			unreleas	Inpatie
	3	TPR B/P Q4HRx24HRS	15	Rectal Temps Only			unreleas	Inpatie
	4	O2 Saturations with Vital Signs					unreleas	Inpatie
	6	TPR B/P	30	WEIGHT...			unreleas	Inpatie
	7	B/P				MAH	active	4 S-M
	8	Do Not take BP in Right Arm	99	Nursing Free Text Order		MAH	active	4 S-M
	9	Do Not Take BP in Left Arm				MAH	active	4 S-M
	10	Orthostatic BP				MAH	active	4 S-M
	12	Call HO on				MAH	active	4 S-M
						MDC	active	4 S-M
							active	4 S-M
							active	4 S-M

		1 hour x 4, then q 4 hours, if stable.						
		>> PCA Morphine: If respiratory rate falls below 10/minute OR BP systolic is less than 90 mmHg: Stop PCA administration and Call Physician Immediately.	Start: 01/10/11 15:20	Gillum,Jillanna J			active	4 S-M
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Stop Order Set | ns | Meds | Orders | Notes | Consults | Surgery | D/C Summ | Labs | Reports | LOCK

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ACTIVITY ORDERS Next									
1	Up Ad Lib	10	Assist with Transfers					unreleas	Inpatient
2	Ambulate With Assistance	11	Turn Q2H					unreleas	Inpatient
3	Bed Rest	12	Keep off Back					unreleas	Inpatient
4	Bed Rest with BRP	13	Keep off Right Side					unreleas	Inpatient
5	Bed Rest with Bedside Commode	14	Keep off Left Side					unreleas	Inpatient
6	Up in Chair								
7	Head of Bed Elevated 45 Degrees						MAH	active	4 S-M
8	Head of Bed Elevated 90 Degrees	99	Activity...				MAH	active	4 S-M
9	Foot of Bed Elevated						MAH	active	4 S-M
							MAH	active	4 S-M
							MAH	active	4 S-M
							MAH	active	4 S-M
							MDC	active	4 S-M
								active	4 S-M
								active	4 S-M
		1 hour x 4, then q 4 hours, if stable.							
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CHF New Adm
 Admit to Te.
 Diagnosis: C
 Condition
 CODE STATL
 Vital/Measure
 ACTIVITY DR
 DIETETIC ME
 NT PROBPNP
 LABORATORY
 RADIOLOGY
 DVT/GI Prop
 CHF Weight C

ms Meds Orders Notes Consults Surgery D/C Summ Labs Reports

Stop Order Set

Start CPRS - Patient Chart Document1 - Microsoft ... LOCK 7:20 PM

Active Orders	Includes	Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
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DIETETIC MENU Next

1 Diet Order N1 NPO Now

2 NPO N2 NPO Now Except Meds

4 Tubefeeding

7 Isolation/Precautions N3 NPO at Midnight
N4 NPO at Midnight Except Meds

RG Regular Diet

9 Additional Orders

DO NOT use additional orders to order diet changes/tubefeedings/ Isolation/Precautions/ or late trays. Use the appropriate number listed above to order these items.

- Write Delayed Orders
- Write Orders
- PHYSICIAN MENU
- Allergies
- NURSE MENU
- CBOC PHYSICIAN
- CBOC NURSING
- ER MENU

- CHF New Adm
- Admit to Telemetry
 - Diagnosis: CHF
 - Condition: CHF
 - CODE STAT
 - Vital/Measure
 - ACTIVITY ORDER
 - DIETETIC MENU
 - NT PROBNG
 - LABORATORY
 - RADIOLOGY
 - DVT/GI Prophylaxis
 - CHF Weight Control

	1 hour x 4, then q 4 hours, if stable.								unreleased	Inpatient
	>> PCA Morphine: If respiratory rate falls below 10/minute OR BP systolic is less than 90 mmHg: Stop PCA administration and Call Physician Immediately.	Start: 01/10/11 15:20	Gillum,Jillanna J						active	4 S-M
	>> PCA Morphine: If patient is somnolent and difficult to arouse, OR for respiratory rate less than 8 - Administer oxygen 4L/min by nasal cannula or face mask, AND administer Narcan 0.1 mg IV bolus q 3 minutes (max. 0.4 mg) until respiratory rate is greater than 10 and patient is easy to arouse, AND stop PCA administration and Call Physician Immediately.	Start: 01/10/11 15:20	Gillum,Jillanna J	ERU					active	4 S-M

Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
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- Write Delayed C
- Write Orders
- PHYSICIAN ME
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- CBOC PHYSICI
- CBOC NURSIN
- ER MENU

LABORATORY MENU

<p>CHEMISTRY</p> <ul style="list-style-type: none"> ALT/AST BUN/Creatinine w/eGFR B12 ELECTROLYTE 7 FOLATE FT4 GLUCOSE HGBA1C (HPLC) Iron Group w/ Ferritin LIPID PROFILE (FASTING) LIVER PROFILE PSA TSH <p>FLUIDS</p> <ul style="list-style-type: none"> BODY FLUID PROFILES CEREBROSPINAL FLUID PROFILES URINALYSIS 24 HR URINE CREATININE CLEARANCE 24 HR URINE CRCL/TOTAL PROTEIN 24 HR URINE TOTAL PROTEIN 	<p>HEMATOLOGY/COAG</p> <ul style="list-style-type: none"> CBC PT/INR PTT <p>MICROBIOLOGY</p> <ul style="list-style-type: none"> MICROBIOLOGY MENU <p>SPECIALTY TESTING</p> <ul style="list-style-type: none"> CD4 PROFILE FLOW CYTOMETRY:LYMPHOMA/LEUKEMIA (ONCOLOGY) FISH ONCOLOGY CML <p>OTHER</p> <ul style="list-style-type: none"> DIALYSIS HEPATITIS/HIV PROFILE NURSING HOME PROFILE WWH PROFILE EMPLOYEE POST EXPOSURE WOMEN'S HEALTH CLINIC ICU Lab Set for Surgery <p>OTHER LAB TESTS</p>
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							unreleas	Inpatie
							unreleas	Inpatie
							unreleas	Inpatie
							unreleas	Inpatie
					MAH		active	4 S-M
					MAH		active	4 S-M
					MAH		active	4 S-M
					MAH		active	4 S-M
					MDC		active	4 S-M
							active	4 S-M
							active	4 S-M

- CHF New Adm
- Admit to Te
- Diagnosis: C
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- ACTIVITY OR
- DIETETIC ME
- NT PROBPN
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- RADIOLOGY
- DVT/GI Prop
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Stop Order Set ns Meds Orders Notes Consults Surgery D/C Summ Labs Reports LOCK

- Active Orders (includes Pending & Recent Activity) - ALL SERVICES
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CHF Admission Done

The following orders will be auto generated

- BNP Lab Collect x3
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- Nutrition Consult
- Pharmacy Consult
- Social Work Consult
- Weight Daily

[>> Click here to initiate CHF Admission orders](#)

Order a Lab Test X

Available Lab Tests: **NT-proBNP**

NT-proBNP

Collect Sample: SERUM SERUM

Specimen: SERUM

Urgency: ROUTINE

Collection Type: Lab Collect Collection Date/Time: Next scheduled lab collection How Often?: QAM How Long?: 3

N Draw specimen in gel-barrier (gold) top tube. Deliver to the lab ASAP.

Accept Order Quit

- CHF New Adm**
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 - CHF Weight D
- Stop Order Set

							unreleas	Inpatie	
							unreleas	Inpatie	
							unreleas	Inpatie	
							unreleas	Inpatie	
						MAH	active	4 S-M	
						MAH	active	4 S-M	
						MAH	active	4 S-M	
						MAH	active	4 S-M	
						MAH	active	4 S-M	
						MDC	active	4 S-M	
							active	4 S-M	
							active	4 S-M	
							active	4 S-M	
						nna J	active	4 S-M	
						nna J	ERU	active	4 S-M

Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
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RADIOLOGY PROCEDURES PHYSICIAN Next

Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
	ABDOMEN 1 VIEW SUPINE	HAND MIN 3 VIEWS					unreleas	Inpatie
	ABDOMEN 2 VIEWS SUPINE & UPRIT	HANDS BILATERAL					unreleas	Inpatie
	ABD 2 VIEWS + AP CHEST						unreleas	Inpatie
	ANKLE 3 OR MORE VIEWS	HIP UNIL. MIN 2 VIEWS					unreleas	Inpatie
	ANKLES BILATERAL	HIPS BILATERAL/PELVIS					unreleas	Inpatie
	BONE SURVEY LTD(MULTIPLE MYE	KNEES BILATERAL					unreleas	Inpatie
	CHEST SINGLE VIEW	KNEE 2 VIEWS				MAH	active	4 S-M
	CHEST 2 VIEWS PA & LAT	KNEES B/L STANDING WI/LAT				MAH	active	4 S-M
	CHEST APICAL LORDOTIC	PELVIS 1 VIEW				MAH	active	4 S-M
	CHEST W/OBLIQUES	RIBS UNILATERAL W/PA CHEST				MAH	active	4 S-M
	CHEST w/ NIPPLE MARKERS	RIBS BILATERAL W/PA CHEST				MAH	active	4 S-M
	DECUBITUS CHEST UNILATERAL	SHOULDER 2 OR MORE VIEWS				MDC	active	4 S-M
	DECUBITUS CHEST BILATERAL	SHOULDERS BILATERAL					active	4 S-M
	ELBOW MIN 3 VIEWS	SINUSES MIN 3 VIEWS					active	4 S-M
	ELBOWS BILATERAL	SKULL 4 VIEWS					active	4 S-M
	FEMUR 2 VIEWS	SPINE CERVICAL MIN 4 VIEWS					active	4 S-M
	FEMUR BILATERAL	SPINE THORACIC 2 VIEWS					active	4 S-M
	FOOT 3 OR MORE VIEWS	SPINE LUMBOSACRAL MIN 4 VIEWS					active	4 S-M
	FEET BILATERAL						active	4 S-M
	FINGER MIN 2 VIEWS						active	4 S-M

DO NOT ORDER CTS UNDER THIS
Order all CTs under Cat Scan Proc

** Other Radiology Procedures

- Write Delayed C
- Write Orders
- PHYSICIAN ME
- Allergies
- NURSE MENU
- CBOC PHYSICI
- CBOC NURSIN
- ER MENU

CHF New Adm

- Admit to Te
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- CHF Weight D

incremental dose or each decrease in lockout interval, monitor and record levels of sedation, pain and vital signs q 15 minutes x 4, then q 1 hour x 4, then q 4 hours, if stable.

>> PCA Morphine: If respiratory rate falls below 10/minute OR BP systolic is less than 90 mmHg: Stop PCA administration and Call Physician Immediately.

>> PCA Morphine: If patient is somnolent and difficult to arouse, OR for respiratory rate less than 8 - Administer oxygen 4L/min by nasal cannula or face mask, AND administer Narcan 0.1 mg IV bolus q 3

Start: 01/10/11 15:20	Gillum,Jillanna J			active	4 S-M
Start: 01/10/11 15:20	Gillum,Jillanna J	ERU		active	4 S-M

ms Meds Orders Notes Consults Surgery D/C Summ Labs Reports

Stop Order Set LOCK

DVT/GI Prophylaxis Menu [New] [Next]

DVT PROPHYLAXIS

Heparin 5000 Units subcutaneous Q8H
Enoxaparin 40mg subcutaneous QAM
Do not use Enoxaparin if CrCl < 30ml/min...order Heparin
Warfarin
← Place sequential compression device on patient

GI PROPHYLAXIS

If CrCl > 50ml/min
← Ranitidine 150mg PO Q12H
← Ranitidine 50mg IV Q8H

If CrCl < 50ml/min
← Ranitidine 150mg PO Q24H
← Ranitidine 50mg IV Q24H
← Omeprazole 20mg PO Daily
← Pantoprazole 40mg IV Daily

Chart	Status	Location
	unreleas	Inpatient
	unreleas	Inpatient
	unreleas	Inpatient
	unreleas	Inpatient
MAH	active	4 S-M
MAH	active	4 S-M
MAH	active	4 S-M
MAH	active	4 S-M
MDC	active	4 S-M
	active	4 S-M
	active	4 S-M
	active	4 S-M

- Admit to Te...
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Order	Start	Stop	Provider	Nurse	Clerk	Chart	Status	Location
>> PCA Morphine: Give the initial bolus and order each increase in incremental dose or each decrease in lockout interval, monitor and record levels of sedation, pain and vital signs q 15 minutes x 4, then q 1 hour x 4, then q 4 hours, if stable.								
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View Orders Active Orders (includes Pending & Recent Activity) - ALL SERVICES

Active Orders Includes	Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
CHF Medication Menu									unreleas: Inpatie
Beta Blocker for EF less than or equal to 40%									unreleas: Inpatie
Carvedilol: Starting dose 3.125mg BID/Target dose 25mg BID (50mg BID if greater than 85kg)									unreleas: Inpatie
Metoprolol succinate (Toprol XL)/Suggested dose is 200mg daily if tolerated									unreleas: Inpatie
Beta Blocker for EF greater than 40%									unreleas: Inpatie
Metoprolol tartrate: Suggested dose is 50 to 100mg BID if tolerated									unreleas: Inpatie
Spirolactone: For Class III/IV if Creat <2 and K+<5									unreleas: Inpatie
Spirolactone: Suggested dose is 25mg daily and minimize any HCTZ dose									unreleas: Inpatie
Digoxin: Class IV CHF if indicated									unreleas: Inpatie
Digoxin									unreleas: Inpatie
Potassium									unreleas: Inpatie
"If K+ >3.6 but <4 mEq suggest 40 mEq PO Once"									
"If K+ <3.6 mEq suggest 40 mEq PO every 8hrs x 3 doses"									
Potassium									MAH active 4 S-M
Nitroglycerin									MAH active 4 S-M
Nitroglycerin: Suggest 0.4mg SL PRN for Chest Pain									MAH active 4 S-M
Lasix									MAH active 4 S-M
Lasix: IV order x 48 hrs then start PO after 48 hrs									MDC active 4 S-M

Write Delayed

Write Orders

PHYSICIAN ME

Allergies

NURSE MENU

CBQC PHYSICI

CBQC NURSIN

ER MENU

CHF New Adm

Vital/Meas

ACTIVITY C

DIETETIC

NT PROBNP

LABORATOR

RADIOLOGY

DVT/GI Prop

CHF Weight

I&O QShift

CHF Telectr

CHF Pulse Ox

CHF Medicat

Inpatient

Stop Order Set

ns Meds Orders Notes Consults Surgery D/C Summ Labs Reports

LOCK

Start CPRS - Patient Chart Document1 - Microsoft ...

7:23 PM

Active Orders (includes	Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
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INPATIENT MEDS MENU Next

INPATIENT MEDICATIONS	PHARMACY QUICK ORDERS				
1 Inpatient Medications	20 Inpatient Antibiotics				unreleas Inpatie
	30 Abatacept 250mg/vial Inj				unreleas Inpatie
	31 Hepatitis Immune Globulin				unreleas Inpatie
	32 Immune Globulin IV (Flebogamma)				unreleas Inpatie
	33 Rho (D) Immune Globulin IV				unreleas Inpatie
	40 Sliding Scale/Fingerstick Glucose				unreleas Inpatie
	41 Inpatient Insulin Pump				unreleas Inpatie
	42 Insulin Drip Menu				unreleas Inpatie
	43 Insulin U500 Concentrate				unreleas Inpatie
	45 Intrathecal Morphine				unreleas Inpatie
	46 Morphine/Fentanyl Orders				unreleas Inpatie
	47 PCA Morphine				
	50 Sedation Menu			MAH	active 4 S-M
	60 Critical Care Agents			MAH	active 4 S-M
	65 Anticoagulation Therapy Protocols			MAH	active 4 S-M
				MAH	active 4 S-M
				MDC	active 4 S-M

	for respiratory rate less than 8 - Administer oxygen 4L/min by nasal cannula or face mask, AND administer Narcan 0.1 mg IV bolus q 3 minutes (max. 0.4 mg) until respiratory rate is greater than 10 and patient is easy to arouse, AND stop PCA administration and Call Physician Immediately.				
	>> PCA Morphine: For severe respiratory depression: Support respirations with O2/Ambu as needed AND administer Narcan 0.4 mg IV bolus, AND Stop PCA administration and Call Physician Immediately.	Start: 01/10/11 15:20	Gillum,Jillanna J	MAH	active 4 S-M
	>> PCA Morphine: After the initial set up and after each increase in	Start: 01/10/11 15:20	Gillum,Jillanna J	AAA	active 4 S-M

CHF Consult

View Orders		Active Orders (includes Pending & Recent Activity) - ALL SERVICES																																																																																																																																																																																																																									
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CHF Consult

View Orders	Active Orders (includes Pending & Recent Activity) - ALL SERVICES				Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location																																									
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<div style="display: flex; justify-content: space-between;"> <div style="width: 70%;"> <p>Consult/Procedure Menu Done</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>CONSULTS</p> <p>Consults</p> <p>CHF consult set</p> <p>OR Request consult</p> </td> <td style="width: 50%; vertical-align: top;"> <p>PROCEDURES</p> <p>Cardiology Procedures</p> <p>EMG</p> <p>Outpatient GI Procedures</p> <p>Respiratory Procedures</p> </td> </tr> </table> </div> <div style="width: 25%; border-left: 1px solid black; padding-left: 5px;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td> </td><td>MAH</td><td>active</td><td>4 S-M</td></tr> <tr><td> </td><td>MAH</td><td>active</td><td>4 S-M</td></tr> <tr><td> </td><td>MAH</td><td>active</td><td>4 S-M</td></tr> <tr><td> </td><td> </td><td>active</td><td>Nutrition.</td></tr> <tr><td> </td><td> </td><td>active</td><td>Nutrition.</td></tr> <tr><td> </td><td> </td><td>active</td><td>Nutrition.</td></tr> <tr><td> </td><td> </td><td>active</td><td>Nutrition.</td></tr> <tr><td> </td><td>MAH</td><td>active</td><td>4 S-M</td></tr> <tr><td> </td><td>MDC</td><td>active</td><td>4 S-M</td></tr> <tr><td> </td><td> </td><td>active</td><td>4 S-M</td></tr> </table> </div> </div>											<p>CONSULTS</p> <p>Consults</p> <p>CHF consult set</p> <p>OR Request consult</p>	<p>PROCEDURES</p> <p>Cardiology Procedures</p> <p>EMG</p> <p>Outpatient GI Procedures</p> <p>Respiratory Procedures</p>		MAH	active	4 S-M		MAH	active	4 S-M		MAH	active	4 S-M			active	Nutrition.			active	Nutrition.			active	Nutrition.			active	Nutrition.		MAH	active	4 S-M		MDC	active	4 S-M			active	4 S-M
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Write Orders
PHYSICIAN ME
Allergies
NURSE MENU
CBOC PHYSICI
CBOC NURSIN
ER MENU

CHF Consult

Reason for Request: CHF

New onset CHF Acute decompensation

* Indicates a Required Field

Preview OK Cancel

Start | Inbox - Microsoft Outlook | 13 Reminders | RE: Improving CHF tran... | CPRS - Patient Chart | CHF Consult Screen Sho... | 2:52 PM

CHF Consult

view Orders Active Orders (includes Pending & Recent Activity) - ALL SERVICES

Active Orders (includes Pending & Recent Activity)	Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
								unreleas	Inpatie
								unreleas	Inpatie
								unreleas	Inpatie

Consult/Procedure Menu Done

CONSULTS **PROCEDURES**

Cardiology Procedures

EMC

Consults

[CHF consult set](#)

OR Request consult

Order a Consult X

Consult to Service/Specialty

CHF

CHF

Urgency: ROUTINE Attention: []

Earliest appropriate date: TODAY ...

Patient will be seen as an: Inpatient Outpatient Place of Consultation: CONSULTANT'S CHOICE

Provisional Diagnosis: [] Lexicon

Reason for Request

New onset CHF

CHF Cons CONSULTANT'S CHOICE

Accept Order Quit

CHF

Cardiology

Medication Review

Nutrition CHF cor

Social Work

Care Coordinator

Palliative Care CH

minutes (max. 0.4 mg) until respiratory rate is greater than 10 and patient is easy to arouse, AND administration and Call Physician Immediately.

>> PCA Morphine: For severe respiratory depressions with O2/Ambu as needed AND administer IV bolus, AND Stop PCA administration and Call Physician Immediately.

>> PCA Morphine: After the initial set-up and after each increase in incremental dose or each decrease in lockout interval, monitor and

Start: 01/10/11 15:20	Gillum,Jillanna J	AAA	active	4 S-M
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Stop Order Set ns Meds Orders Notes Consults Surgery D/C Summ Labs Reports LOCK

CHF Consult

View Orders Active Orders (includes Pending & Recent Activity) - ALL SERVICES

Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
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							unreleas	Inpatie
							unreleas	Inpatie
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							ive	Nutrition.
							active	Nutrition.
							active	Nutrition.
							active	Nutrition.
							active	4 S-M
							active	4 S-M

Service Prerequisites - CARE COORDINATION HOME TELEHEALTH SCREENING

Print Continue Cancel Order

***** NOTE*****
 Patients to be monitored for obesity can only be placed on the WEIGHT MANAGEMENT program and CAN NOT be combined with any other diagnoses.

CHF

- Cardiology
- Medication Review
- Nutrition CHF cor
- Social Work
- Care Coordinator
- Palliative Care CH

frequency of CIWA scoring to every 4 hours.

>> Document each CIWA score as a separate note. Start: 04/25/12 12:35 Addeo,Carol A active Nutrition.

>> PCA Morphine: If respiratory rate falls below 10/minute OR BP systolic is less than 90 mmHg: Stop PCA administration and Call Physician Immediately. Start: 01/10/11 15:20 Gillum,Jillanna J MAH active 4 S-M

>> PCA Morphine: If patient is somnolent and difficult to arouse, OR for respiratory rate less than 8 - Administer oxygen 4L/min by nasal cannula or face mask. AND administer Narcan 0.1 mg IV bolus q 3 Start: 01/10/11 15:20 Gillum,Jillanna J MDC MDC active 4 S-M

Stop Order Set ns | Meds | Orders | Notes | Consults | Surgery | D/C Summ | Labs | Reports LOCK

Start | Inbox - Microsoft Outlook | 13 Reminders | RE: Improving CHF tran... | CPRS - Patient Chart | CHF Consult: Screen Sho... | 2:53 PM

CHF Consult

Template: CARE COORDINATION HOME TELEHEALTH SCREENING

Does the patient have a phone? * Yes No
Does the patient have a internet service? * Yes No

Please place patient on CCHT program to be monitored for the following diagnoses:

Diagnosis:

- Congested Heart Failure
- Diabetes Mellitus
- COPD
- Hypertension
- Depression
- PTSD
- Substance Abuse

Obesity - Place on MOVE Program ***
(Stand alone program; cannot be combined with other diagnoses)

All None * Indicates a Required Field Preview OK Cancel

Start | Inbox - Microsoft Outlook | 13 Reminders | RE: Improving CHF tran... | CPRS - Patient Chart | CHF Consult Screen Sho... | 2:54 PM

CHF Consult

View Orders Active Orders (includes Pending & Recent Activity) - ALL SERVICES

Active Orders (includes)	Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
								unreleas	Inpatie
								unreleas	Inpatie
								unreleas	Inpatie

CONSULTS **PROCEDURES**

Cardiology Procedures

EMC

CHF consult set

OR Request consult

Order a Consult

Consult to Service/Specialty
 CARE COORDINATION HOME TELEHEALTH SCREEN

Urgency: **ROUTINE** Attention: _____

Earliest appropriate date: TODAY

Patient will be seen as an:
 Inpatient Outpatient

Place of Consultation: BEDSIDE

Provisional Diagnosis: _____ [Lexicon](#)

Reason for Request

Does the patient have a phone? Yes
 Does the patient have a internet service? Yes
 Please place patient on CCHT program to be monitored for the following diagnoses:
 Diagnosis: Congested Heart Failure, Diabetes Mellitus

CARE COORDINATION HOME TELEHEALTH SCREENING Cons BEDSIDE

[Accept Order](#) [Quit](#)

frequency of CIWA scoring to every 4 hours.									
>> Document each CIWA score as a separate not									
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CHF

- Cardiology
- Medication Review
- Nutrition CHF cor
- Social Work
- Care Coordinator
- Palliative Care CHF

Stop Order Set

ms Meds Orders Notes Consults Surgery D/C Summ Labs Reports

LOCK

Start Inbox - Microsoft Outlook 13 Reminders RE: Improving CHF tran... CPRS - Patient Chart CHF Consult Screen Sho... 2:54 PM

CHF Consult

Template: PALLIATIVE CARE

Diagnosis: End stage CHF

The patient lives with family .

The patient is alert and oriented.

Reason for Request:

- Pain control
- Symptom management List:
- Inpatient Hospice
- Ensure a safe and comfortable death
- Bereavement counseling
- Caregiver/family support
- Enhance psychological well-being
- Meet spiritual needs of the patient
- Multiple admissions within 6 months for same condition/symptoms
- Respite
- Other Describe:

All None * Indicates a Required Field Preview OK Cancel

Start | Inbox - Microsoft Outlook | 13 Reminders | RE: Improving CHF tran... | CPRS - Patient Chart | CHF Consult: Screen Sho... | 2:55 PM

CHF Consult

View Orders Active Orders (includes Pending & Recent Activity) - ALL SERVICES

Service	Order	Start / Stop	Provider	Nurse	Clerk	Chart	Status	Location
	Palliative Care CHF						unreleased	Inpatient
							unreleased	Inpatient
							unreleased	Inpatient

NOTE: A Palliative Care Consult is REQUIRED for Class III/IV Heart Failure patients

>> Click here to order Palliative Care consult for CHF patient
(If consult is not needed click NEXT located in upper right)

Order a Consult

Consult to Service/Specialty
 PALLIATIVE CARE
 PALLIATIVE CARE

Urgency: ROUTINE
 Attention: [Dropdown]

Earliest appropriate date: TODAY

Patient will be seen as an:
 Inpatient Outpatient

Place of Consultation: CONSULTANT'S CHOICE

Provisional Diagnosis: [Text Box] [Lexicon]

Reason for Request
 Diagnosis: End stage CHF

The patient lives with family.

The patient is alert and oriented.

Reason for Request:
 Pain control
 Caregiver/family support
 Enhance psychological well-being
 Multiple admissions within 6 months for same condition/symptoms

PALLIATIVE CARE Cons CONSULTANT'S CHOICE

Accept Order Quit

CHF

- Cardiology
- Medication
- Nutrition CH
- Social Work
- Care Coordination
- Palliative Care CH

drowsiness, ataxia noted.

>> After patient has gone 4 hours without medication frequency of CIWA scoring to every 4 hours.

>> Document each CIWA score as a separate note

>> PCA Morphine: If respiratory rate falls below 10/minute or if systolic is less than 90 mmHg: Stop PCA administration and Call Physician Immediately.

ms Meds Orders Notes Consults Surgery D/C Summ Labs Reports

Stop Order Set

Start Microsoft Outlook 13 Reminders RE: Improving CHF tran... CPRS - Patient Chart CHF Consult Screen Sho... 2:55 PM

View Orders		Active Orders (includes Pending & Recent Activity) - ALL SERVICES	
Active Orders (includes)	Service	Order	Start / Stop
	Consults	CHF Cons Consultant's Choice *UNSIGNED*	
		CHF MEDICATION REVIEW Cons Bedside *UNSIGNED*	
		NUTRITION (CHF) Cons Bedside *UNSIGNED*	
		SOCIAL WORK (CHF) Cons Bedside *UNSIGNED*	
		CARE COORDINATION HOME TELEHEALTH SCREENING Cons Bedside *UNSIGNED*	
		PALLIATIVE CARE Cons Consultant's Choice *UNSIGNED*	
		CHF MEDICATION REVIEW Cons Bedside *UNSIGNED*	
		NUTRITION (CHF) Cons Bedside *UNSIGNED*	
		SOCIAL WORK (CHF) Cons Bedside *UNSIGNED*	
	A/D/T	>> Diagnosis s/p TKA	Start: 01/10/11 15:20
		>> Condition good	Start: 01/10/11 15:20
	Vitals	>> Vital signs to include pulse oximetry, neuro-vascular checks every one hour X 4, then every 2 hours X 4, then every 4 hours X 3, then every shift.	Start: 03/03/11 09:48
	Nursing	>> Initiate SYMPTOM-TRIGGERED Alcohol Withdrawal Protocol. Complete CIWA within one hour.	Start: 04/25/12 12:35
		>> If CIWA score eight or higher, administer Benzodiazepine as ordered. Repeat CIWA every one-hour after administration of Benzodiazepine until score less than eight.	Start: 04/25/12 12:35
		>> Hold Benzodiazepine and notify physician if somnolence, drowsiness, ataxia noted.	Start: 04/25/12 12:35
		>> After patient has gone 4 hours without medication, reduce frequency of CIWA scoring to every 4 hours.	Start: 04/25/12 12:35
		>> Document each CIWA score as a separate note.	Start: 04/25/12 12:35
		>> PCA Morphine: If respiratory rate falls below 10/minute OR BP	Start: 01/10/11 15:20

Cover Sheet | Problems | Meds | Orders | Notes | Consults | Surgery | D/C Summ | Labs | Reports

Start | Inbox - Microsoft Outlook | 13 Reminders | RE: Improving CHF tran... | CPRS - Patie