

HOSP: ISCHEMIC STROKE / TRANSIENT ISCHEMIC ATTACK ADMISSION ORDERSET [1036]

6/9/10 PT OT ST start time restriction removed
 6/8/10 telemetry order name change
 5/4/10 revised VTE prophylaxis
 4/13/10 new dept order, questionnaire revised
 12/22/09 stroke coordinator consult added

[ASA Ischemic Stroke Guidelines Stroke 2007](#)

URL: Q:\Micromedex\PDF\ASA Ischemic Stroke Guidelines Stroke 2007.pdf

[Lancet: PREVAIL Study](#)

URL: Q:\Micromedex\PDF\PREVAIL Lancet 2007.pdf

[Expansion of Time Window for Tx Acute Ischemic Stroke with tPA](#)

URL: Q:\Micromedex\PDF\del Zoppo et al Expansion of Window Stroke 2009.pdf

Information

Announcements

ADMIT order REQUIRED to be entered to complete admission process for all appropriate ordersets.

QUESTIONNAIRE

Alteplase Questionnaire

Alteplase EXCLUSION Questionnaire TPA not given due to:

Step #1: Place Resuscitations Orders. Complete Step #2 and #3, (if applicable) Step #4: Complete Extent of Care note.

STEP 1: Place order for Resuscitation Orders,

[U.S. Living Will Registry](#)

URL: <http://www.uslivingwillregistry.com/>

[America Living Will Registry](#)

URL: <http://www.alwr.com/>

- | | |
|---|---------|
| <input type="radio"/> FULL CODE-CODE BLUE TEAM WILL BE CALLED | Details |
| <input type="radio"/> DNR-CODE BLUE TEAM WILL NOT BE CALLED | Details |
| <input type="radio"/> COMFORT MEASURES- DNR | Details |

STEP 2: Limitations of Care

- | | |
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| <input type="checkbox"/> DO NOT GIVE ANTIBIOTICS | Details |
| <input type="checkbox"/> DO NOT PERFORM BLOOD DRAWINGS | Details |
| <input type="checkbox"/> DO NOT GIVE BLOOD/ BLOOD PRODUCTS | Details |
| <input type="checkbox"/> DO NOT GIVE CHEMOTHERAPY | Details |
| <input type="checkbox"/> DO NOT PERFORM DIALYSIS | Details |
| <input type="checkbox"/> DO NOT INTUBATE | Details |
| <input type="checkbox"/> DO NOT GIVE IV FLUIDS | Details |
| <input type="checkbox"/> DO NOT PERFORM SURGERY | Details |
| <input type="checkbox"/> DO NOT TRANSFER TO INTENSIVE CARE | Details |
| <input type="checkbox"/> DO NOT GIVE TUBE FEEDINGS OR TPN | Details |
| <input type="checkbox"/> PATIENT DOES NOT WISH SUPPORT FOR PERSISTENT VEGETATIVE STATE OR PERMANENT COMA | Details |

Step #3: Extent of Care

<input type="checkbox"/> REQUESTED BY PATIENT WITH DECISION-MAKING CAPACITY- DNR order cannot be revoked by family or legal surrogate or Health Agent	Details
<input type="checkbox"/> REQUESTED BY HEALTHCARE AGENT OR SURROGATE FOR PATIENT WITHOUT CAPACITY- (must document lack of decision capacity)	Details
<input type="checkbox"/> EMERGENT AND UNABLE TO LOCATE ANY FAMILY- Second Physician on Medical Staff (not in same medical practice) concurs with need for DNR (both must chart their rationale)	Details

VTE Prophylaxis[VTE Prevention: Chest Journal](#)

URL: Q:\Micromedex\PDF\VTE Chest Guidelines 08.pdf

No VTE Prophylaxis Needed

<input type="checkbox"/> No VTE Prophylaxis Needed	Routine, UNTIL DISCONTINUED, Starting today For Until specified, Mechanical/pharmacological prophylaxis contraindicated. Applicable to ambulatory patients or patients already anticoagulated
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Heparin SQ

<input type="checkbox"/> heparin 5000 units SQ q8h- preferred	5000 Units, Subcutaneous, EVERY 8 HOURS Starting today at 5:00 AM
<input type="checkbox"/> heparin 5000 units SQ q12h	5000 Units, Subcutaneous, EVERY 12 HOURS Starting today at 2:32 PM
<input type="checkbox"/> CBC	Routine, EVERY OTHER DAY, Starting tomorrow at 4:00 AM For Until specified, Lab Performed, Discontinue when SQ heparin prophylaxis discontinued

Enoxaparin (LOVENOX) SQ

<input type="checkbox"/> enoxaparin (LOVENOX) SQ	40 mg, Subcutaneous, DAILY Starting today at 9:00 AM
<input type="checkbox"/> CBC	Routine, EVERY OTHER DAY, Starting tomorrow at 4:00 AM For Until specified, Lab Performed, Discontinue when enoxaparin (LOVENOX) discontinued

NON-PHARMACOLOGIC ANTIEMBOIC THERAPIES

<input type="checkbox"/> SEQUENTIAL COMPRESSION STOCK	Routine, CONTINUOUS, Starting today For Until specified, AT ALL TIMES while in bed
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Vital Signs, Neuro Checks and Pulse Oximetry**VITAL SIGNS**

<input type="checkbox"/> VITAL SIGNS	Routine, UNTIL DISCONTINUED, Starting today For Until specified, Per nursing unit routine
<input type="checkbox"/> VITAL SIGNS- every hour	Routine, EVERY HOUR, Starting today For Until specified, Temperature every 4 hours
<input type="checkbox"/> VITAL SIGNS- every 2 hours	Routine, EVERY 2 HOURS, Starting today For Until specified, And PRN. Temperature every 4 hours

<input checked="" type="checkbox"/> VITAL SIGNS- every 4 hours	Routine, EVERY 4 HOURS, Starting today For Until specified, And PRN. Temperature every 4 hours
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NEURO CHECKS

<input type="checkbox"/> NEUROLOGICAL CHECKS	Routine, UNTIL DISCONTINUED, Starting today For Until specified, With vital signs
<input type="checkbox"/> NEUROLOGICAL CHECKS- every hour	Routine, EVERY HOUR, Starting today For Until specified, And PRN
<input type="checkbox"/> NEUROLOGICAL CHECKS- every 2 hours	Routine, EVERY 2 HOURS, Starting today For Until specified, And PRN
<input checked="" type="checkbox"/> NEUROLOGICAL CHECKS- every 4 hours	Routine, EVERY 4 HOURS, Starting today For Until specified, And PRN

PULSE OXIMETRY

<input checked="" type="checkbox"/> PULSE OXIMETRY	Routine, UNTIL DISCONTINUED, Starting today For Until specified, Check with Vital Signs
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Activity

Activity

<input type="checkbox"/> BEDREST	Routine, PRN, Starting today, Keep on BEDREST until systolic BP GREATER than 110 mmHg. Head of bed elevated LESS than or EQUAL to 30 degrees.
<input checked="" type="checkbox"/> OUT OF BED	Routine, PRN, Starting today For Until specified, As tolerated. First time out of bed, CHECK sitting blood pressure. If systolic blood pressure LESS than 110 mmHg. Keep on BEDREST until systolic BP GREATER than 110 mmHg. Head of bed elevated LESS than or EQUAL to 30 degrees.

Dietary

Nurse Swallow Screen

<input checked="" type="checkbox"/> Nurse Swallow Screen	STAT, UNTIL DISCONTINUED, Starting today For Until specified, PRIOR TO ANY ORAL INTAKE
<input checked="" type="checkbox"/> If patient PASSES Nurse Swallow Screen...	Routine, UNTIL DISCONTINUED, Starting today For Until specified, Order dysphagia tray until diet order can be obtained from MD
<input checked="" type="checkbox"/> If patient FAILS Nurse Swallow Screen...	Routine, UNTIL DISCONTINUED, Starting today For Until specified, Keep NPO with IV fluids and Head of bed elevated at least 30 degrees. Place order Speech Therapy consult.

IV Therapy

IV Access (order saline flush with saline lock)

<input type="checkbox"/> SALINE LOCK AND FLUSH PANEL	Panel
<input type="checkbox"/> SALINE LOCK	Routine, CONTINUOUS, Starting today at 2:32 PM
<input type="checkbox"/> NS	10 mL, Injection, PRN Starting today at 12:00 AM

IV Fluids

<input checked="" type="checkbox"/> NS infusion	100 mL/hr, Intravenous, CONTINUOUS Starting today at 2:32 PM For 24 Hours
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<input type="checkbox"/> NS with KCl 20 mEq/L infusion	100 mL/hr, Intravenous, CONTINUOUS Starting today at 2:32 PM For 24 Hours
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Lab Orders

Hematology

<input checked="" type="checkbox"/> CBC	STAT, ONE TIME, Starting today For 1 Occurrences, Lab Performed, If not done within the last 24 hours.
<input checked="" type="checkbox"/> PT-INR	STAT, ONE TIME, Starting today For 1 Occurrences, Lab Performed, If not done within the last 24 hours.
<input checked="" type="checkbox"/> APTT	STAT, ONE TIME, Starting today For 1 Occurrences, Lab Performed, If not done within the last 24 hours.

CHEMISTRY

<input checked="" type="checkbox"/> BASIC METABOLIC PANEL	STAT, ONE TIME, Starting today For 1 Occurrences, Lab Performed, If not done within last 24 hours
<input checked="" type="checkbox"/> COMPREHENSIVE METABOLIC PANEL	Routine, ONCE TOMORROW AM, Starting today at 2:32 PM For 1 Occurrences, Lab Performed
<input checked="" type="checkbox"/> HEMOGLOBIN A1C	Routine, ONCE TOMORROW AM, Starting today at 2:32 PM For 1 Occurrences, Lab Performed
<input type="checkbox"/> HOMOCYSTEINE	Routine, ONCE TOMORROW AM, Starting today at 2:32 PM For 1 Occurrences, Lab Performed
<input checked="" type="checkbox"/> Lipid Complete Panel	Routine, ONCE TOMORROW AM, Starting today at 2:32 PM For 1 Occurrences, Lab Performed

Occult Blood

<input type="checkbox"/> OCCULT BLOOD STOOL IP	STAT, ONE TIME, Starting today For 1 Occurrences, Lab Performed
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Urine Tests

<input checked="" type="checkbox"/> URINALYSIS	Routine, ONE TIME, Starting today For 1 Occurrences, Lab Performed, If not done within the last 24 hours.
<input type="checkbox"/> DRUG SCREEN URINE-6	Routine, ONE TIME, Starting today For 1 Occurrences, Lab Performed, If not done within last 24 hours

GLUCOSE CHECKS

<input type="checkbox"/> GLUCOSE- q6h	Routine, EVERY 6 HOURS, Starting today For 48 Hours, Unit Performed, If on tubefeeding for 48 hours
<input checked="" type="checkbox"/> GLUCOSE- ac and hs	Routine, 4 TIMES DAILY AC AND @ BEDTIME, Starting today with First Occurrence As Scheduled For 48 Hours, Unit Performed, If taking oral diet

Diagnostic Tests

Cardiac Tests

<input type="checkbox"/> EKG 12 LEAD UNIT PERFORMED	STAT, ONE TIME, Starting today For 1 Occurrences Indication for Exam: OTHER (SEE COMMENTS BOX) Indication: ischemic stroke If not performed since system onset
<input checked="" type="checkbox"/> ECHO PER STROKE PROTOCOL	Routine, ONE TIME, Starting today For 1 Occurrences Portable Exam @ Bedside?:

Indication for Exam: STROKE

Radiology Tests

<input type="checkbox"/> CHEST PA AND LATERAL	STAT, ONCE, Starting today For 1 Occurrences Indication for exam: OTHER(SEE COMMENTS BOX) Wet Read-Call Report?: No Portable Exam @ Bedside?: No If not done within the last 24 hours. Indication: Stroke, Aspiration Pneumonia.
<input type="checkbox"/> CHEST AP PORTABLE	STAT, ONCE, Starting today For 1 Occurrences Wet Read-Call Report?: No Portable Exam @ Bedside?: Yes Indication for exam: OTHER(SEE COMMENTS BOX) Indications:stroke, aspiration pneumonnia If not done in last 24 hours

MRI and MRA

<input type="checkbox"/> MRI HEAD with and without CONTRAST	Panel
<input type="checkbox"/> MR HEAD W/WO CONTRAST	Routine, ONCE, Starting today at 2:32 PM
<input checked="" type="checkbox"/> MRI HEAD without CONTRAST	Routine, ONCE, Starting today For 1 Occurrences Indication for Exam: STROKE Wet Read-Call Report?: No If not performed since symptom onset Complete Safety Screening form
<input checked="" type="checkbox"/> MRA HEAD without CONTRAST	Routine, ONCE, Starting today For 1 Occurrences Wet Read-Call Report?: No Indication for Exam: STROKE If not performed since symptom onset Complete Safety Screening form
<input checked="" type="checkbox"/> MRA NECK with CONTRAST	Routine, ONCE, Starting today For 1 Occurrences Indication for Exam: STROKE Wet Read-Call Report?: No If not performed since symptom onset Complete Safety Screening form

CTA's

<input type="checkbox"/> CT CTA HEAD, NECK	STAT, ONCE, Starting today For 1 Occurrences Indication for Exam: OTHER (SEE COMMENTS BOX) Wet Read-Call Report?: No
<input type="checkbox"/> CT CTA HEAD, NECK	Routine, ONCE, Starting today at 2:32 PM For 1 Occurrences Indication for Exam: OTHER (SEE COMMENTS BOX) Wet Read-Call Report?: No

Peripheral Vascular Labs

<input type="checkbox"/> PVL CAROTID ARTERY BILAT STROKE PROTOCOL	Routine, ONCE, Starting today For 1 Occurrences Indication for Exam: STROKE Order ONLY if the MRA or CTA is inconclusive or unable to be obtained. After 5 PM weekdays and ALWAYS on weekends, NOTIFY tech on call.
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Consults

MD Consults

<input type="checkbox"/> PHYSICIAN CONSULT- Neurology	Routine, ONE TIME, Starting today For 1 Occurrences Consult Reason:
<input type="checkbox"/> PHYSICIAN CONSULT- Rehab (SVBGH)	Routine, ONE TIME, Starting today at 2:32 PM Consult Reason:
<input type="checkbox"/> PALLIATIVE CARE CONSULT	Routine Indication for Consult: Did a specific event trigger this consult?: YES- SEE COMMENTS
<input type="checkbox"/> PHYSICIAN CONSULT	Routine, ONE TIME, Starting today at 2:32 PM Consult Reason:

Department Consults

<input checked="" type="checkbox"/> Care Coordination	STAT, ONE TIME, Starting today For 1 Occurrences Reason for CM Consult/Care Coordination?: SERVICES TO BE DETERMINED AT DISCHARGE COMPLETE WITHIN 24 HOURS OF ADMISSION/ INITIATION OF THIS ORDERSET
<input checked="" type="checkbox"/> OCCUPATIONAL THERAPY: EVALUATE (must order with OT Tx)	STAT, ONE TIME (REHAB), Starting today For 1 Occurrences Indications?: Weakness Restrictions? Please add details in Comments: NONE Weight Bearing Status: Please add Percentage in Comments for PWB: WEIGHT BEARING AS TOLERATED (WBAT) Indications: Stroke consult. May be out of bed for treatment if systolic BP GREATER than 110 mmHg
<input checked="" type="checkbox"/> OCCUPATIONAL THERAPY: TREAT (must order with OT eval)	STAT, PER THERAPIST DISCRETION, Starting today at 2:32 PM Indications?: Weakness Restrictions? Please add details in Comments: NONE Weight Bearing Status: Please add Percentage in Comments for PWB: WEIGHT BEARING AS TOLERATED (WBAT) Indications: Stroke consult. May be out of bed for treatment if systolic BP GREATER than 110 mmHg
<input checked="" type="checkbox"/> PHYSICAL THERAPY: EVALUATE (must order with PT Tx)	STAT, ONE TIME (REHAB), Starting today For 1 Occurrences Indications?: stroke consult Restrictions? Please add details in Comments: May be out of bed for treatment if systolic BP GREATER than 110 mmHg
<input checked="" type="checkbox"/> PHYSICAL THERAPY: TREAT (must order with PT eval)	STAT, PER THERAPIST DISCRETION, Starting today For 1 Occurrences Indications?: stroke consult Restrictions? Please add details in Comments: May be out of bed for treatment if systolic BP GREATER than 110 mmHg
<input checked="" type="checkbox"/> SPEECH EVALUATION (must order with Speech Tx)	STAT, ONE TIME (REHAB), Starting today For 1 Occurrences Reason for SLP?: language pathology: stroke-aphasia, cognition, dysphagia Notify DIETICIAN patient FAILS swallow evaluation
<input checked="" type="checkbox"/> SPEECH TREATMENT (must order with Speech	STAT, PER THERAPIST DISCRETION, Starting

Eval)	today For 1 Occurrences Reason for SLP?: language pathology: stroke-aphasia, cognition, dysphagia
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<input type="checkbox"/> PT/ST/OT NOT ORDERED DUE TO:	Reason:
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Stroke Coordinator Consult (Required)

<input checked="" type="checkbox"/> STROKE COORDINATOR CONSULT	Routine, ONE TIME, Starting today For Until specified
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Rehab Consults

<input type="radio"/> REHAB 9TH FLOOR CONSULT (SNGH)- IP Rehab	Routine, Indication: stroke. COMPLETE WITHIN 24 HOURS OF ADMISSION/ INITIATION OF THIS ORDERSET SNGH- Nursing to call inpatient Rehab Unit
<input type="radio"/> PHYSICAL MEDICINE REHAB CONSULT (SVBGH)- IP Rehab	Routine, COMPLETE WITHIN 24 HOURS OF ADMISSION/ INITIATION OF THIS ORDERSET SVBGH- Nursing to call Neuro Rehab Consult
<input type="radio"/> INPATIENT REHAB CONSULT (SWRMC)	Routine, Indication: stroke. COMPLETE WITHIN 24 HOURS OF ADMISSION/ INITIATION OF THIS ORDERSET

Nursing Orders**Nursing Interventions**

<input type="checkbox"/> COOLING BLANKET	Routine, PRN, Starting today For Until specified, For temperature GREATER than 100.4 F (Target NOT LESS than 98.6 F)
<input checked="" type="checkbox"/> INTAKE AND OUTPUT	Routine, UNTIL DISCONTINUED, Starting today For Until specified, Per nursing unit routine

Medications

Blood Pressure Management- Patients WITH NO CHF or COPD- for patients exhibiting systolic blood pressure GREATER THAN 220 mmHg or diastolic blood pressure GREATER than 120 mmHg. Choose ONE of the following:

<input type="radio"/> labetalol (NORMODYNE) injection-q10min prn	10 mg, IV PUSH, EVERY 10 MIN PRN Starting today at 2:32 PM For 30 Dose(s)
<input type="radio"/> nicardipine (CARDENE) in 20 mg/200 mL IV	5 mg/hr, Intravenous, CONTINUOUS Starting today at 2:32 PM

Blood Pressure Management- Patients WITH CHF or COPD- for patients exhibiting systolic blood pressure GREATER THAN 220 mmHg or diastolic blood pressure GREATER than 120 mmHg. Choose ONE of the following:

<input type="radio"/> enalaprilat (VASOTEC) injection	1.25 mg, IV PUSH, EVERY 6 HOURS PRN Starting today at 2:32 PM
<input type="radio"/> nitroPRUSSide (NIPRIDE) 50 mg in D5W 250 mL Infusion	0.5 mcg/kg/min, Intravenous, CONTINUOUS Starting today at 2:32 PM

Antihyperlipidemic Medications

<input type="checkbox"/> atorvastatin (LIPITOR) tablet - 80 mg	80 mg, Oral, EVERY NIGHT AT BEDTIME Starting today at 9:00 PM
<input type="checkbox"/> simvastatin (ZOCOR) tablet - 10 mg	10 mg, Oral, EVERY NIGHT AT BEDTIME Starting today at 9:00 PM
<input type="checkbox"/> simvastatin (ZOCOR) tablet - 20 mg	20 mg, Oral, EVERY NIGHT AT BEDTIME Starting today at 9:00 PM

<input type="checkbox"/> simvastatin (ZOCOR) tablet - 30 mg	30 mg, Oral, EVERY NIGHT AT BEDTIME Starting today at 9:00 PM
<input type="checkbox"/> simvastatin (ZOCOR) tablet - 40 mg	40 mg, Oral, EVERY NIGHT AT BEDTIME Starting today at 9:00 PM

Antithrombotic Therapy Agents

<input checked="" type="checkbox"/> aspirin chew tab	162 mg, Oral, DAILY Starting today at 9:00 AM
<input type="checkbox"/> aspirin tablet	325 mg, Oral, DAILY Starting today at 9:00 AM
<input type="checkbox"/> aspirin suppository	150 mg, Rectal, DAILY Starting today at 9:00 AM
<input type="checkbox"/> clopidogrel (PLAVIX) tablet	75 mg, Oral, DAILY Starting today at 9:00 AM
<input type="checkbox"/> dipyridamole-aspirin (AGGRENEX) 200-25 mg capsule	1 Cap, Oral, 2 TIMES DAILY Starting today at 9:00 AM
<input type="checkbox"/> Warfarin 1st Dose and Pharmacy Consult PANEL	Panel
<input type="checkbox"/> warfarin	5 mg, Oral, EVERY EVENING AT 1800 Starting today at 6:00 PM For 1 Doses
<input type="checkbox"/> WARFARIN DOSING PER PHARMACY	Details
<input type="checkbox"/> ANTITHROMBOTIC THERAPY CONTRAINDICATED	Details

Antiemetics

<input type="checkbox"/> metoCLOPramide (REGLAN) 10mg inj- not used in pregnancy	10 mg, IV PUSH, EVERY 6 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> ondansetron (ZOFTRAN) 4mg tablet	4 mg, Oral, EVERY 6 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> ondansetron (ZOFTRAN)4 MG tab, RAPID DISSOLVE	4 mg, Oral, EVERY 6 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> ondansetron (PF) (ZOFTRAN) 4 mg/2 mL injection	4 mg, IV PUSH, EVERY 6 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> prochlorperazine (COMPAZINE) 10mg tablet	10 mg, Oral, EVERY 6 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> prochlorperazine (COMPAZINE) 25mg suppository	25 mg, Rectal, EVERY 6 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> prochlorperazine (COMPAZINE) 10mg injection	10 mg, IV PUSH, EVERY 6 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> promethazine (PHENERGAN) 25mg tablet	25 mg, Oral, EVERY 6 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> promethazine (PHENERGAN) 12.5mg suppository	12.5 mg, Rectal, EVERY 6 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> promethazine (PHENERGAN) 25mg suppository	25 mg, Rectal, EVERY 6 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> promethazine (PHENERGAN) 12.5mg injection-preferred drug and dose in pregnancy	12.5 mg, IV PUSH, EVERY 6 HOURS PRN Starting today at 2:32 PM

General Medications

<input checked="" type="checkbox"/> acetaminophen (TYLENOL) tablet	650 mg, Oral, EVERY 4 HOURS PRN Starting today at 2:32 PM
<input checked="" type="checkbox"/> acetaminophen (TYLENOL) suppository	650 mg, Rectal, EVERY 4 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> famotidine (PEPCID) tablet	20 mg, Oral, 2 TIMES DAILY Starting today at 9:00 AM
<input type="checkbox"/> famotidine (PEPCID) injection	20 mg, IV PUSH, 2 TIMES DAILY Starting today at 9:00 AM
<input type="checkbox"/> omeprazole (PRILOSEC) capsule	40 mg, Oral, EVERY MORNING BEFORE BREAKFAST Starting today at 8:00 AM

<input type="checkbox"/> magnesium hydroxide (MILK OF MAGNESIA) 400mg/5ml suspension	30 mL, Oral, EVERY 24 HOURS PRN Starting today at 2:32 PM
<input type="checkbox"/> senna 6.5 % liquid	10 mL, Per NG tube, DAILY Starting today at 9:00 AM
<input type="checkbox"/> senna-docusate (SENOKOT-S) 8.6-50 mg	1 Tab, Oral, DAILY Starting today at 9:00 AM

Vaccines - consider in stroke patient with comorbidities (diabetes, CAD, PVD, COPD)

<input type="checkbox"/> influenza vaccine syringe (October 1 - March 31)	0.5 mL, Intramuscular, ONCE Starting today at 2:32 PM For 1 Dose(s)
<input type="checkbox"/> Influenza vaccine NOT indicated	Influenza vaccine NOT indicated
<input type="checkbox"/> pneumococcal vaccine (PNEUMOVAX) injection	0.5 mL, Intramuscular, ONCE Starting today at 2:32 PM For 1 Dose(s)
<input type="checkbox"/> Pneumococcal vaccine NOT indicated	Pneumococcal vaccine NOT indicated

Respiratory Orders

Respiratory

<input type="checkbox"/> OXYGEN (CANNULA)	Oxygen device: CANNULA Liters per minute: 2 LPM To keep oxygen saturation EQUAL to or GREATER than 95% (for COPD Patient oxygen saturation 90-94%).
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Telemetry Orders

TELEMETRY

<input checked="" type="checkbox"/> TELEMETRY	Now, UNTIL DISCONTINUED, Starting today at 2:32 PM For Until specified
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TELEMETRY SPECIFIC PROCEDURE ORDERS

<input checked="" type="checkbox"/> atropine 0.5mg inj	0.5 mg, IV PUSH, PRN Starting today at 12:00 AM
<input checked="" type="checkbox"/> nitroglycerin (NITROSTAT) tablet	0.4 mg, Sublingual, EVERY 5 MIN PRN Starting today
<input checked="" type="checkbox"/> EKG 12-LEAD	STAT, PRN, Starting today For Until specified Indication for Exam: OTHER (SEE COMMENTS BOX) For heart rate GREATER than 140 or LESS than 40, lasting GREATER than 30 seconds or patient with persistent chest pain after receiving nitroglycerin per protocol

NURSE TO NOTIFY PHYSICIAN

<input checked="" type="checkbox"/> NOTIFY MD... for chest pain	ASAP, ONE TIME, Starting today For 1 Occurrences, If sublingual Nitroglycerin does NOT relieve chest pain, if GREATER than ONE episode of chest pain even if first dose of Nitroglycerin is effective.
<input checked="" type="checkbox"/> NOTIFY MD... for vital signs	ASAP, UNTIL DISCONTINUED, Starting today For Until specified, Systolic BP is LESS than 90 mmHG.

For Administrative Purpose Only

DO NOT de-select item(s)

<input checked="" type="checkbox"/> ISCHEMIC STROKE TRANSIENT ISCHEMIC ATTACK ADMISSION ORDERSET- Version 6 released 5/4/10	Details
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