Upper Rio Grande Regional Simulation Hospital

Physician Order Form

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| Date and Time | Orders | Verification |
| 19 Jan ‘16 | 1) Admit to ICU | 19 Jan ‘16 |
| 0400 | 2) Hourly vital signs with neuro checks | 0430 |
|  | 3) Cervical collar |  |
|  | 4) Chest tube to water seal drainage |  |
|  | 5) Venti-Mask at 24% |  |
|  | 6) Incentive spirometer every 2 hours while awake |  |
|  | 7) NPO except meds |  |
|  | 8) Lactated Ringer’s at 125 ml/hr |  |
|  | 9) Hourly I & O |  |
|  | 10) Foley catheter |  |
|  | 11) Foley cath care BID |  |
|  | 12) Sequential Compression Device to lower extremities |  |
|  | 13) Activity as tolerated |  |
|  | 14) Cast care to left arm |  |
|  | 15) levetiracetam, 500 mg in 100 ml NS, IVPB, every 12 hours over 15 minutes |  |
|  | 16) bisacodyl, 15 mg, po, daily |  |
|  | 17) morphine, 6 mg, IV push, every 4 hours PRN moderate to severe pain |  |
|  | 18) acetaminophen, 650 mg, po, every 4 hours PRN fever greater than 101°F or mild pain |  |
|  | 19) ondansetron, 4 mg, IV push over 2 –5 minutes, every 6 hours PRN nausea/vomiting |  |
|  | R. Cuomo, MD | Nancy Nails, RN |
|  | R. Cuomo, MD |  |
|  |  |  |
| 19 Jan ‘16 | 1) PT to evaluate and treat | 19 Jan ‘16 |
| 0600 | 2) OT to evaluate and treat | 0630 |
|  | 3) Social Work to evaluate |  |
|  | R. Cuomo, MD | Nancy Nails, RN |
|  | R. Cuomo, MD |  |
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Roll, Morgan

MR # 520054

Room: