

(place patient label here)

Patient Name: _____

Order Set Directions:

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PROVIDER ORDERS

Diagnosis: _____

Allergies with reaction type: _____

Impella Ventricular Assist Device

Version 1 05/14/2019

- ☐ CR
- ☐ 5
- ☐ 2.5
- ☐ RV

Patient Placement

- ☒ Admit to Intensive Care Unit

Activity

- ☒ Bed Rest
- ☒ Head of Bed 20-30 degrees
- ☒ Log Roll from Side to Side
 - Do NOT torque chest or hips
- ☐ Knee Immobilizer (Non-hinged) to keep leg straight

Vital Signs

- ☒ Vital signs per unit standard

Nursing Orders

- ☒ Assess Neurological Status with Vital Signs
- ☒ Assess Arterial Puncture Site with Vital Signs
- ☒ Monitor Peripheral Pulses with Vital Signs
- ☒ Indwelling Urinary Catheter with Protocol with Temperature Probe
- ☒ Intake and output Strict
- ☒ Document Urine output color
- ☒ Daily Weight
- ☒ Incentive spirometry every 1 hour while awake

Impella Orders

- Do NOT use Normal Saline in the Purge System
- Pressurize the NS bag with a pressure bag set at 300mmHg - 350mmHg
- Impella catheter dressing per Central Line Policy
- Do NOT clean the Impella catheter infusion filter or pressure reservoir with alcohol
- Do NOT Reposition Impella Catheter, this is only completed by a physician with Echo guidance
- IF, unable to contact the Provider for clinical support, call Abiomed Clinical Support Center 1-800-422-8666
- ☒ Maintain performance level (P Level) at _____ to keep flow at or above _____ Liters per Minute
- ☒ Adjust the pump performance level (P Level) to maintain flow greater than 1.5 Liters per Minute
- ☒ Impella catheter dressing per Central Line Policy
- ☐ ACT [Point of Care Activated Clotting Time] PRN for Impella Removal
 - ACT needs to be below 150 for the Provider to remove the catheter
- ☐ Impella Resuscitation measures while on Impella support in the event of Cardiac Arrest
 - Chest compressions and defibrillation can be administered during Impella support
 - Decrease P-level to P2 prior to chest compressions (Levels below P-2 may result in retrograde flow)
 - Do NOT stop or unplug the Impella device to perform Defibrillation
 - Do NOT stop or unplug the Impella device to perform Chest Compressions
 - After Return of Circulation has been established, obtain STAT ECHO, Transthoracic Complete to confirm Impella Catheter placement
 - Return P-Level to previous P-Level once placement is confirmed and cardiac function is restored

Provider Signature _____ Time: _____ Date: _____

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Allergies with reaction type: _____

Notify Provider

- ☒ IF, bleeding at access site
- ☒ IF, evidence of Systemic Bleeding
- ☒ IF, change in Impella flow
- ☒ IF, change in the Impella waveform
- ☒ IF, unable to resolve high or low purge pressure alarms
- ☒ IF, Impella Catheter is displaced
- ☒ IF, any changes in Neurological status
- ☒ IF, Circulation, Sensation, Movement CSM Changes to Affected Extremity
- ☒ IF, Evidence of neurovascular compromise
- ☒ IF, Urine Output is less than 15 milliliters per hour x 1 hour
- ☒ IF, Urine is pink tinged or brown
- ☒ IF, aPTT goal of 50-70 is **EXCEEDED** with the Purge Solution
- ☒ IF, aPTT goal of 50-70 is **NOT** met with Purge Solution
- ☒ IF, Impella is Discontinued, Implement Indwelling Urinary Catheter Management Protocol

Respiratory

ABG [Blood Gas Study (RT)]

- ☐ Stat
- ☐ Routine

Purge Fluids - Maintenance Specific Fluid

Negative History of HIT

- Connect Purge solution to infuse via the yellow sidearm of the Impella Device. The solution should ALWAYS be infused by the Automated Impella Controller Console.
 - ☐ Dextrose 5%- Water 1000 milliliters with Heparin 50,000 units
(Concentration = 50 units per milliliters)

Positive History of HIT

- Connect Purge solution to infuse via the yellow sidearm of the Impella Device. The solution should ALWAYS be infused by the Automated Impella Controller Console.
 - ☐ Dextrose 5%-Water 1000 milliliters with 100 milligrams Argatroban
(Concentration = 0.1 milligrams/milliliters)

Medications

Antiplatelets

- Discontinue all other forms of HEPARIN, LOVENOX (enoxaparin), WARFARIN, XARELTO (rivaroxaban), ELIQUIS (apixaban), PRADAXA (dabigatran), ARIXTRA (fondaparinux)
 - Aspirin [Ecotrin EC]
 - ☐ 81 mg PO Daily
 - Clopidogrel Bisulfate [Plavix]
 - ☐ 75 mg PO Daily
 - Ticagrelor [Brilinta]
 - ☐ 90 mg PO BID tablet
 - Prasugrel Hydrochloride [Effient]
 - ☐ 10 mg PO Daily tablet

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BENEFIS HEALTH SYSTEM

Benefis
HOSPITALS



PROVIDER ORDERS

Diagnosis: _____

Allergies with reaction type: _____

Laboratory

CBC/ NO DIFF

- ☐ Stat
- ☐ Routine
- ☐ MORNING DRAW

BMP [BASIC METABOLIC PANEL (BCS7)]

- ☐ Stat
- ☐ Routine
- ☐ MORNING DRAW

MAGNESIUM LEVEL, PLASMA

- ☐ Stat
- ☐ Routine
- ☐ Timed
- ☐ MORNING DRAW

PT (PROTIME AND INR)

- ☐ Stat
- ☐ Routine
- ☐ MORNING DRAW

PTT [KO]

- ☐ Stat
- ☐ Routine
- ☐ Timed
- ☐ MORNING DRAW

TROPONIN I

- ☐ Stat
- ☐ Routine
- ☐ Timed
- ☐ MORNING DRAW

CKMB (CARDIAC)

- ☐ Stat
- ☐ Routine
- ☐ MORNING DRAW

LIVER PANEL

- ☐ Stat
- ☐ Routine
- ☐ MORNING DRAW

Radiology and Diagnostic Tests

XR Chest Single AP View Only [RAD]

Reason for exam: _____

- ☐ Stat
- ☐ Routine
- ☐ IN AM (RAD ONLY)

ECHO, Transthoracic Complete

Reason for exam: Impella Placement

- ☐ Stat
- ☐ Routine

Consult Provider

☒ Consult Intensivist re: _____

Provider Signature _____ Time: _____ Date: _____