

(place patient label here)

Patient Name: \_\_\_\_\_



**Order Set Directions:**

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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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**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: \_\_\_\_\_