

(place patient label here)

Patient Name: _____



PROVIDER ORDERS

Order Set Directions:

- > (✓) - Check orders to activate: Orders with pre-checked box will be followed unless lined out.
- > Initial each place in the pre-printed order set where changes such as additions, deletions or line outs have been made
- > Initial each page and Sign/Date/Time last page

Diagnosis: _____

Allergies with reaction type: _____

Chest Pain Observation

Version 2 3/24/15

- Use this order set with the Transition from the ED OR the Admission Comprehensive sets
- This order set is intended for patients placed in an observation status using one of the above sets
- Hold beta blockers during home medication reconciliation process if indicated

Nursing Orders

- Attending Cardiologist: _____
- Telemetry: Patient may be off telemetry for showering or transport for diagnostic tests [X] Yes [] No
- If patient has chest pain: obtain STAT ECG first. ** Do not give Nitroglycerin until after ECG is obtained**
- Notify provider: for ECG changes; abnormal Troponin results and when giving nitroglycerin for chest pain

Diet

- NPO (diet) NPO Modifications: [X] Except Meds [] Strict [X] With Ice Chips [X] With Sips
- Additional Instructions: Keep NPO until after stress test determined

Medications

- nitroglycerin 0.4 mg sublingual tablet (NITROSTAT)
 - 1 tablet sublingually as needed for chest pain Do not give until after ECG is obtained; May repeat every 5 minutes with MAX of 3 doses for a single chest pain episode within one hour; Hold for Systolic BP less than 90 mmHg; Notify provider
- acetaminophen (TYLENOL)
 - 650 milligram orally every 4 hours as needed for mild-to-moderate pain OR fever greater than 101 F
- aspirin
 - 325 milligram orally once a day

Laboratory

- Admission Labs:
 - Troponin-I 4 hours from last ED Troponin

Diagnostic Tests

- ECG
 - 4 hours from last ECG in ED; Reason for exam: Chest pain
- ECHO, Transthoracic Complete
 - routine ICD 9 Indications: Chest Pain; Contrast? [] Yes [] No Agitated Saline (Bubble Study) [] Yes [] No
 - Additional Instructions: _____

- ECHO, Treadmill Stress
 - routine Reason for exam: Chest Pain
- ECHO, Pharmacological Stress routine
 - Reason for exam: Chest Pain

- Nuclear Medicine: Cardiac
 - Stress, Cardiovacs Imag w/NM Routine (NM Heart Stress/RST Spect MLT [NM] reflexes when this order is placed) Reason for exam: Chest Pain
 - with DOBUTamine with Lexiscan with treadmill

Consult Provider

- Provider to provider notification preferred.
- Consult other provider _____ regarding _____
- Does nursing need to contact consulted provider? [] Yes [] No

Provider Signature: _____ Date: _____ Time: _____