(place patient label here)

Patient Name:

Emergency Department Standing Orders Version 2 6/1/14 Patient Weight:_____



Allergies:			Check for Allergies before Medication Delivery!	
implemented	1	General Nursing Orders		
Date / Time / Init	a	<u> </u>	nt and over 12 weeks gestation	
	C	If EMS IV in place, may continue at KVO rate	The unit over 12 weeks gestation	
	d	CBG on known diabetics or patients showing any signs a	and symptoms of hypo- or hyperglycemia	
	e	Patients to US or CT in need of critical telemetry should be escorted by RN on monitor.		
	f	Oxygen as needed to decrease work of breathing or to maintain saturations over 92%		
Imp lemented	2	Chest Pain (age <u>></u> 30 years)		
Date / Time / Init	а		Chest Pain Panel	
	d		ASA - 325 mg by mouth x 1 now, if not already taken	
	a	Nitro SL 0.4 mg sublingual x 1 now; may repeat every 5 r		
implemented		Abdominal Pain (age ≥14)If under the age of 14, consult MD for pain medications		
Date / Time / Init	а		CBC, CMP, Lipase, UACIF, Serum Pregnancy (if	
	٦		female and of child bearing age / capability)	
	d		NPO	
Imp le mented	4	HR > 90 & Temp > 100.5 with Respiratory Rate >		
Date / Time / Init	а	<u> </u>	d draw and Blood Cultures x 2, Lactic Acid	
	C		Oxygen to keep saturations > 92 %	
	е		Physiologic Monitoring	
imp lemented	5	Unilateral Weakness or Signs and Symptoms of		
Date / Time / Init	а		Labs - Stroke Panel & Troponin	
	С		Oxygen - 2L NC	
1	е	12 lead ECG f	70	
Imp le mented	6	Flank Pain (signs and symptoms of possible kid	nev stone and age > 16 years)	
Date / Time / Init	а	Toradol 30 mg IV x 1 for pain - if no NSAID allergy; histo		
	b		CBC, CMP, Serum Pregnancy (if female and of child	
			bearing age / capability)	
	е	IV NS at 125 ml/hr with blood draw	Zofran 4 mg IV x 1 prn for nausea/vomiting	
Implemented	7	Shortness of Breath with Wheezing (age > 6)		
Date / Time / Init	а	Nebulized Albuterol 2.5 mg / Atrovent 0.5 mg. May repea		
	b	Saline Lock if dyspnea persists after first medication treat	ment and O2 saturations < 92%.	
Implemented	8	Vomiting or Diarrhea (age > 16 & over 2 instanc	es past 4 hours)	
Date / Time / Init	а	NPO b Postural VS c	Stool Specimen - do not send	
	d	IV NS @ 125 ml/hr e	CBC, CMP, Lipase, UACIF, Serum Pregnancy $_{(if\ female)}$	
	f	Zofran 4 mg IV x 1 for nausea / vomiting		
imp ie men ted	9	Simple Lacerations		
Date / Time / Init	а		LAT Gel - for pediatric wounds	
	С	infiltrate wound edges with 1% xylocaine with 1% epineph	•	
	d	Fingers - Toes - Nose - Ears - use 1 % xylocaine without		
	е	Sterile scrub of wound f Adult Tdap IM if not current	within past 5 years	
Imp le mented	10	Weakness / Dizzy		
Date / Time / Init	а	1	Postural VS	
	d	Saline Lock e Chest Pain labs		
Imp le men ted	11	Pediatric Fever (temp > 100.5)		
Date / Time / Init	а	· · · · · · · · · · · · · · · · · · ·	Motrin 10 mg/kg PO for fever (over 1 year) (Max 400 mg)	
	С	UACIF	, , , , , , , , , , , , , , , , , , , ,	
Imp lemented	-	Adult Fever (temp > 100.5)		
Date / Time / Init	а	` ' '	Normal Saline at 100 ml/hr	
Implemented Date / Time / Init Implemented Date / Time / Init	c	CBC, CMP, UACIF, Lactic acid, Blood Cultures x 2	Normal Same at 100 mi/m	
	_	Foreign Body to Eye		
		Visual Acuity b Alcaine 2 gtts to affected ey	10	
	a 14		, C	
	14			
	а	Psych panel b Lipid panel if < 18 years of a	age	

Provider Signature:	Date:	Time:

(place patient label here)

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Prior to	Ordering
***************************************	Nurse may order one site (all views) for x-rays. Consult with physician if more than one site needs to be ordered.
2	Question patient for possible pregnancy - No Imaging of gravid women without provider order
3	Examine injured area and initiate ice, immobilization, and elevation
•	Request analgesia as needed
5	Palpate joints above and below level of injury to assess for other injuries
Indication	ons
	Injury confined to the extremity
	Presence of deformity, instability, crepitus, point tenderness, ecchymosis, swelling or pain
	Patient request which meets above criteria
	History significant for probable fracture
What to	<u>Order</u>
	"Heard a Pop", inversion or eversion of ankle injury; swelling at malleoli. Palpate fifth metatarsal and if pain present, order foot x-ray also. Ankle film does not visualize the metatarsals well.
Date/Time	Ankle 3 or more views LT
Date/Time	Ankle 3 or more views RT Post traumatic pain if associated with decrease or loss of supination, pronation, flexion, or extension. **In a child of 5
	years or less with unexplained loss of arm function and no apparent soft tissue swelling, a radial head subluxation
	muste be considered and x-rays should not be obtained prior to physician evaluation
Date/Time	Elbow 3 or more views LT
Date/Time	Elbow 3 or more views RT If swelling or pain on top of foot
Doto/Timo	Foot 3 or more views LT
Date/Time	
Date/Time	Foot 3 or more views RT
Doto/Timo	Clear hand injury distal to wrist
Date/Time	Hand 3 or more views LT
Date/Time	Hand 3 or more views RT Order Special Calcaneal films if fracture suspected
Dete/Time	
Date/Time	Calcaneus LT
Date/Time	Calcaneus RT
	Inability to stand or walkd with localized knee pain; post traumatic joint effusion; a fall or blow to the knee area with subsequent inability to flex or extend the knee fully. If pain over patellar area, add order for patellar view
Dete/Time	
Date/Time	Knee 3 view LT
Date/Time	Knee 3 view RT
	Tenderness above the shoulder or on top of the shoulder; may or may not have swelling or deformity
Date/Time	Shoulder 2 or more views LT
Date/Time	Shoulder 2 or more views RT
	Fall on an outstretched hand with swelling and tenderness of the wrist; if snuffbox tenderness, a comment of navicular
B	view in the order comments
Date/Time	Wrist 3 or more views LT
Date/Time	Wrist 3 or more views RT
	Post traumatic pain in hip area if associated with rotated and shortened leg
Date/Time	Hip 2 or more views LT
Date/Time	Hip 2 or more views RT
	Pelvis 1 or more views
	Post traumatic pain in thigh area with swelling or pain to thigh area
Date/Time	Femur 2 or more views LT
Date/Time	Femur 2 or more views RT

Provider Signature:	Date:	Time: