

(place patient label here)

Patient Name: _____



NICU HIE

Vital Signs

- Vital Signs Not Per Unit Standard Q15 min for first 2 hours, Q30 min x 2-4 hours, then hourly for 4 -72 hours. Q30 min during rewarming. -- Additional Instructions : Include Set Temp, Water Temp, and Esophageal temp
- Preductal & Postductal O2 Saturation
- Axillary Temperature Once a shift for correlation -- Additional Instructions : Will be 0.5 -1 degree Celcius warmer than Core Temp

Nursing Orders

- Cares with Minimal Stimulation Every 6 Hours
 - Reposition Supine and Side to Side Every 6 Hours
 - Intake and Output Strict
- Strict I&O Frequency: every hour
Additional Instructions:

Notify Provider

- IF Esophageal temperature is less than 91.4 F (33 C)
- IF Pulse greater than 190 beats per minute
- IF Pulse less than 70 beats per minute
- IF Urine Output Greater Than 5-8 ml/kg/hr
- IF Urine Output Less Than 1 ml/kg/hr
- IF there is skin injury
- IF active bleeding

Initials: _____

(place patient label here)

Patient Name: _____



NICU HIE

Laboratory

- Blood Gas Study Infant upon admission, 15 minutes of life or with hour zero labs - whichever is sooner
- Blood Gas Study Infant after 30 minutes of initiating therapy
- Blood Gas Study Infant every 30 minutes x 6
- Blood Gas Study Infant every 1 hour x 3
- Blood Gas Study Infant every 6 hours x 3

Hour 0:

- BLOOD CULTURE 1 set, (blood)
- CBC/AUTO DIFF
- Neonatal 14
- PT (PROTIME AND INR)
- PTT
- FIBRINOGEN

Hour 12:

- Blood Gas Study Infant
- CBC/AUTO DIFF

Hour 24:

- Blood Gas Study Infant
- CBC/AUTO DIFF
- Neonatal 14
- PT (PROTIME AND INR)
- PTT
- FIBRINOGEN

Hour 36:

- Blood Gas Study Infant

Hour 48:

- Blood Gas Study Infant
- CBC/AUTO DIFF
- Neonatal 14

Hour 60:

- Blood Gas Study Infant

Hour 72:

- Blood Gas Study Infant
- Neonatal 14

Radiology and Diagnostic Tests

- EEG Continuous Monitoring [Routine STAT] -- Reason for Exam : _____ --
Additional Instructions : Call EEG on call

Provider's Signature _____ Date: _____ Time: _____

Initials: _____