

(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: _____

NICU Transition Nursery Admission

Version 3 12/22/16

The following orders are for all Transition Admits

Patient Placement

Patient Status

- Admit to inpatient

Preferred Location/Unit

- NICU- Transition Nursery

Nursing Orders

- Vital signs per unit standard
- Bathe after temperature has been stable and infant is greater than 12 hours old (First bath with family if desired)
- Assess gestational age (Ballard) on babies with question of gestational dates, or sporadic prenatal care
- Neonatal Sepsis Screening
- Initiate Newborn Hypoglycemia Protocol for infants 35 to 36 6/7 weeks of gestational age, small for gestational age (less than 2500 grams), large for gestational age (greater than 4000 grams) and infants of a diabetic mother
- Capillary Blood Glucose POC now for all infants that newborn hypoglycemia protocol is not initiated OR as needed for symptoms of hypoglycemia
- Notify provider (Neonatology) if blood glucose is less than or equal to 50 mg/dL and with respiratory distress for all infants that newborn hypoglycemia protocol is not initiated.
- Notify provider (Neonatology) of infants transfer to NICU- transition nursery
- Initiate pumping/breastfeeding within 6 hours of delivery

Respiratory

- Oxygen via nasal cannula 2 Lpm as needed for respiratory distress or decreased oxygen saturation; may titrate FiO2 to maintain O2 saturation greater than 93%

Diet

- Diet, 20 Kcal/oz formula of choice on demand or breast feed on demand unless symptoms respiratory distress present

Medications

Admission medications and immunizations

- Select the following medications if not already ordered
 - erythromycin 5 mg/gram (0.5%) eye ointment
 - 1 application apply thin ribbon in each eye once stat if not already given
 - phytonadione 2 mg/mL injection (VITAMIN K)
 - 1 milligram intramuscularly once stat if not already given
 - hepatitis B virus vaccine recomb (preserv free) 10 mcg/0.5 mL IM susp (ENGERIX-B) or Formulary agent
 - 10 microgram intramuscularly once stat if not already given
 - hepatitis B immune globulin (HBIG)
 - 0.5 milliliter intramuscularly once IF mother is HepBsAg+ give within 12 hours of birth.

Initials _____

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PROVIDER ORDERS

Laboratory

- RH negative protocol/baby IF mother is Rh negative now - on cord blood if available

Select the following orders based on presenting criteria

For Infants that received Narcan in Delivery Room

Nursing Orders

- Monitor for a minimum of 4 hours
- Transfer back to newborn nursery if stable (RR < 60 breaths/min, On room air, no s/s respiratory distress) after 4 hours

For Infants that received PPV AND brief chest compression in Delivery Room

Nursing Orders

- Monitor for a minimum of 6 hours
- Transfer back to newborn nursery if stable (RR < 60 breaths/min, On room air, no s/s respiratory distress) after 6 hours

For Infants 35 0/7 to 35 6/7 gestational age

Nursing Orders

- Monitor for a minimum of 4 hours
- Transfer back to newborn nursery after 4 hours if Vital Signs WNL, On room air, no s/s respiratory distress, adequate oral intake and able to maintain glucose as per hypoglycemia protocol

For Infants with persistent hypothermia (less than 97.6 F)

Nursing Orders

- Monitor until temperature is stable for 4 hours without heat
- Transfer back to newborn nursery if temperature stable (97.7-99.5 F) after 4 hours

For Infants with Mild respiratory distress (respiratory rate greater than 60 breaths/min, mild grunting, flaring or retracting, persistent oxygen requirement)

Nursing Orders

- Monitor for a minimum of 2 hours after weaned to room air and resolution of symptoms of respiratory distress
- Notify provider (Neonatology) if no improvement after 1-2 hours, requiring greater than 40% FiO2 or greater than 2 Lpm or persistent grunting, flaring, retractions or tachypnea for admission to NICU orders
- Transfer back to newborn nursery if stable after 2 hours on room air and RR < 60 breaths/min and no s/s of respiratory distress

Provider Signature: _____ Date: _____ Time: _____