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Information for All Practitioners – Regardless of Specialty

New Orders in March

- *Sub-Anesthetic Ketamine Infusion Initiation & Maintenance for Palliative Care* on March 13 for UMCB, SMCH, SMCW

Epiphany Diagnostic Tests and Results in COMPASS

Rationale

- Epiphany is a web-based system that Seton will be implementing in March 2014. This software will receive, manage, store and send certain diagnostic tests (including ECG’s) to Cerner.
- Epiphany allows certain diagnostic tests to integrate directly with COMPASS.

Summary of the Change

- The following tests will be moved to Epiphany with images (tracings) and interpretation of results viewable directly from COMPASS:
  - ECG Adult
  - ECG Pedi
- ECG Stress Exercise
- Dobutamine Stress Test
- Myocardial Perfusion Scan with Exercise
- Lexiscan Stress Test
- Diffusion Capacity
- Exercise-Induced Asthma
- Lung Volumes by Plethysmography
- Lung Volumes by Plethysmography Pre/Post
- Maximum Voluntary Ventilation
- Methacholine Challenge
- PFT Complete
- PFT Complete Pre/Post Bronchodilator
- Pulse Oximetry with Exercise
- Spirometry
- Spirometry Pre/Post Bronchodilator

- The following tests will be moved to Epiphany with interpretation of results in COMPASS, but images (tracings) will NOT be viewable from COMPASS.
  - Multiple Sleep Latency Test
  - Pneumocardiogram 4 Channel
  - Pneumocardiogram
  - Polysomnogram
  - Polysomnogram with CPAP BIPAP
  - Sleep Study 4 Channel
  - Sleep Study 5 Channel PCG
  - SLP PSG Plus 4<6 yrs
  - SLP PSG with CPAP/BIPAP < 6 yrs

- Images (tracings) will NOT be viewable when accessing COMPASS from outside the Seton Intranet. Result interpretation will still be viewable.

- Epiphany diagnostic test results will be housed in the appropriate category under the new Diagnostics tab in Flowsheets (refer to New Diagnostics Tab in Flowsheets View in this edition of Tips and Tricks).

**Key Points**

- The Epiphany go-live will roll-out on the following dates at the following sites:
  - UMCB- March 11, 2014
  - DCMC-March 13, 2014
  - SMCA & SSW March 18, 2014
  - SNW, SMCW & SMCH March 20, 2014
SHL & SEBD March 27, 2014

- One-on-one training will be provided by Radiology IS in the Cardiopulmonary reading rooms at each site for medical providers who upload or interpret Epiphany test results.
  - Walk-in training will be offered 0800-1700 both the day before and the day of go-live at each site.
  - Training takes approximately 20 minutes.

- Muse will be available for historical access to ECG results until all studies currently in Muse have been uploaded to Epiphany. Estimated date- the end of April. Communication will go out when all studies that were done in Muse are accessible from within Epiphany.

- Any questions concerning Epiphany implementation or training, please contact **512-324-8992**. Within Seton, call ext. **48992**.

**Diagnostic Test WITH an Image (tracing or read-out)**

- From Flowsheets, click on the Diagnostics tab. You can select a Level to filter results.
- Click on the desired test.

- The results Report will open.
• To see the image related to this result, click on the View Image icon.

A PDF of the tracing or read-out will open up.

Diagnostic Test WITHOUT an Image
• Follow the same process to open the desired test result.

The results report will open.
The *View Image* icon will be dithered and nothing opens if you click on it.

Images will also be viewable when accessing results from Documents by using the same *View Image* icon.

No changes were made to the location of diagnostic tests in Documents.

**New Diagnostics Tab in Flowsheets View on March 11**

**Rationale**
- For end users to be able to view diagnostic results, both done in and outside of radiology, in Flowsheets.

**Summary of the Change**
- The current Radiology tab will be replaced with a new **Diagnostics** tab in COMPASS Flowsheets
- The new **Diagnostics** tab will have a **Level** drop down with the following categories:
  - Diagnostics View
  - Radiology
  - Bone density
  - Computed Tomography
  - Diagnostic Radiology
  - Magnetic Resonance Imaging
  - Mammography
  - Nuclear Medicine
  - Ultrasound
  - Special/Interventional
  - Cardiodynamics
  - Pulmonary Diagnostics
  - Neurodiagnostics
- The categories will only be present if the patient has results in that category for the time period showing in the date/time bar.
Key Points

- Any test results that have posted within the time period showing in the date/time bar will show in the Navigator band.
- The Level drop down can be used to quickly navigate to certain categories of tests.
- **All test results can be accessed from the Documents tab just as they are today** (NO change to folder location within Documents).

Before

![Before Screenshot]

After Screenshot

![After Screenshot]

See above for the entire list of possible Levels
No changes are made to the filing structure of diagnostics tests within Documents

Chest Tube Insertion Management order set revision on March 3

Rationale
- Revision of current orders to align with best practices
- *Nurses, please note: The MD wants these meds to be available at the time of the procedure, but this is not an order to give; the order to give will be at the time of the procedure.*

Key Points
- Addition of details to two optional and one default “Consent For” in nursing orders
- Addition of one optional “Equipment to Bedside” order
- Addition of one optional and one default “Record Drain Output” orders
- Addition of sentences to one default and three optional “Chest Tube Care” orders
- Addition of two optional “Dressing Change Nursing” orders
- Addition of one default and four optional “Medication Instruction” orders
- *Now medication instructions vs. orders so that meds are available at bedside but not yet given.*
- Deletion of four default “Resuscitation Status” orders

Nursing Orders
- Addition of one default and two optional “Witness Consent for” orders
- Addition of one optional “Equipment to Bedside” order
- Addition of one default and one optional “Record Drain Output” order
### Lines and Tubes
- Addition of one default and three optional “Chest Tube Connectivity” orders

<table>
<thead>
<tr>
<th>Lines and Tubes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Chest Tube Connectivity</strong></td>
</tr>
</tbody>
</table>

### Interventions
- Addition of two optional “Dressing Change Nursing” orders

<table>
<thead>
<tr>
<th>Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Dressing Change - Nursing</strong></td>
</tr>
</tbody>
</table>

### Medications
- Revision of one default and four optional “Medication Instruction” orders

<table>
<thead>
<tr>
<th>Medications</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medication Instruction</strong></td>
</tr>
<tr>
<td><strong>Medication Instruction</strong></td>
</tr>
<tr>
<td><strong>Medication Instruction</strong></td>
</tr>
<tr>
<td><strong>Medication Instruction</strong></td>
</tr>
</tbody>
</table>

### Admit/Transfer/Discharge
- Deletion of four default “Resuscitation Status” orders

### New process to order PRN ECG for Adult and Pedi Patients on March 3

### Rationale
- In preparation for Epiphany, the PRN ECG order needs to change so that it connects the order with the result and the tasks are maintained for the appropriate departments.

### Summary of the Change
- 2 new orders have been built for PRN EKG orders:
The current ECG Adult, ECG Pedi orders will no longer have a PRN option.

When a PRN ECG order is needed, the provider will place the ECG PRN Instruction Adult/Pedi order. The Reason for ECG Exam box will remain a required field (ex: Chest Pain)

If the patient displays the Reason for ECG (ex: chest pain), the nurse will then place the ECG Adult or ECG Pedi order, sending a task to the following disciplines for the ECG to be completed: Nurses, Respiratory Therapists, RCPs and Cardiac Techs. The nurse will use the communication type of Standard of Care since a signed electronic order for the ECG PRN Instruction order is already in place.

Key Points

- The ECG PRN Instruction Adult/Pedi order will remain active until manually discontinued.
- Power plans that currently have prn orders for ECG will now have the new ECG PRN Instruction Adult/Pedi order.

Before:

- ECG order with the ability to choose PRN

<table>
<thead>
<tr>
<th>Details for ECG Adult (EKG Adult)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duration:</td>
</tr>
<tr>
<td>Duration Unit:</td>
</tr>
<tr>
<td>PRN Order:</td>
</tr>
<tr>
<td>Special Instructions:</td>
</tr>
</tbody>
</table>

- PRN ECG order in the Hospitalist Admit Power Plan

<table>
<thead>
<tr>
<th>Cardiology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiac Echocardiogram Routine</td>
</tr>
<tr>
<td>ECG Adult 12 Lead, Reason: Chest Pain, Stat, PRN Order</td>
</tr>
</tbody>
</table>

After:

- New ECG PRN Instruction Adult order

<table>
<thead>
<tr>
<th>Details for ECG PRN Instruction Adult</th>
</tr>
</thead>
<tbody>
<tr>
<td>*ECG Type: 12 Lead</td>
</tr>
<tr>
<td>*Reason for ECG Exam:</td>
</tr>
</tbody>
</table>
- PRN ECG order in the Hospitalist Admit Power Plan

**Cardiology**
- Cardiac Echocardiogram
  - Reason: Chest Pain, Routine, To be interpreted by: 
- ECG Adult
  - 12 Lead, Reason: Chest Pain, Routine, To be done in AM
- ECG PRN Instruction Adult
  - 12 Lead, PRN Reason: Chest Pain

**SMDO Naloxone (Narcan) revision on March 17**

**Rationale**
- Revision

**Summary of the Change**
- Full revision of Narcan SMDO

---

**SMDO Naloxone (Narcan) (Physician Orders)**

- Non Categorized
  - Use of this order set implies knowledge and understanding of the Adult Naloxone (Narcan) Standing Medical Delegated Orders
    - In order to indicate this protocol, the patient must meet all of the following criteria: 1) Hospitalized Adult Patient who has received dose(s) of Opioid Medication(s). 2) Rabies Level of 4-6, or 3) Shallow Respiration or Respiratory Rate (RR) less than 6 breaths/minute.
  - Print Adult Naloxone (Narcan) SMDO from link as reference.

- Vital Signs
  - Med signs
    - Once patient responsive q2/3, then q3/4 hours, then q6 Hours...
  - Pulse Oximetry Continuous
    - Discontinue 24 hours after patient returns to stable Respiratory status

- Nursing Orders
  - The duration of action for Naloxone (Narcan) is considerably shorter than the duration of action for most opioids.
  - Patients receiving long-acting opioids may require re-naloxonization after this protocol is complete.

  ****** Naloxone Administration ******

  - Treatment Instructions
    - Adult Naloxone (Narcan) Administration SMDO:
      1. Stop infusion of opioid and request for help and re-asst.
      2. If patient returns to previous status, RASS level 3-4, or 5 and Shallow Respiration...
      3. Notify physician STAT for Naloxone (Narcan) Adult Infusion (1 mg/10 mL into...

  - Treatment Instructions
    - Adult Naloxone (Narcan) Administration SMDO:
      1. Stop infusion of opioid and request for help and re-asst.
      2. If patient returns to previous status, RASS level 3-4, or 5 and Shallow Respiration...
      3. Notify physician STAT for Naloxone (Narcan) Adult Infusion (1 mg/10 mL into...

  - Equipment to Be Omitted
    - Normal Saline 10 mL syringe, Oxygen set-up, And Pulse Oximeter

  - Pain Assessment Adult
    - q1/3 Hours, q2/3 Hours, q3/4 Hours, if patient is responsive.

  - Notify Provider
    - If beginning Naloxone (Narcan) SMDO.

  - Communication Order
    - If patient is responsive or a total of 0.4 mg (20 mL of solution) of naloxone has...

- Medications
  - Naloxone (Narcan)
    - 0.04 mg IV Push, As Directed PRN Other (see order comment) For 30 doses PRN Narcan...

- Laboratory
  - Blood Gas
    - Start, O2, Arterial, Blood Gas, Glucose, PRN Order Other (see order comment)

- Respiratory Therapy
  - Oxygen
    - Nasal Cannula, 4 LPM, Titrated to keep SPO2 greater than or equal to 92%
General Surgery PostOp revision on March 3

Rationale

- Revision

Summary of Change

- Removed **Initiate PowerPlan** phase
  - Clinicians will need to place the separate single order of **Initiate PowerPlan**

- **Addition of Reason VTE Prophylaxis Not Received** orders

- **Addition of Observe to order options**

- **Addition of Transfer to order**

- **Order options changed for Vital Signs**

- **Addition of Neuro Check order**

- **Reduced order options for Pulse Oximetry**

- Removed **Weight** order options for “Once” and “qWeek”

- Removed **Height/Length** order

- **Addition of Elevate Head of Bed** order

- **Reorganization of Activity section**
- Addition “Strict” to Bedrest order

- Order options changed for NPO

- Addition of “Clear Liquid Advance As Tolerated” options to Adult Diet

- Removed “Fluid Restriction” and “Regular” Diet orders

- Moved Enteral Tube Feeding Protocol to Diet section

- Additional order details for Strict Intake + Output

- Addition of Record Drain Output order

- Reorganization of Intervention orders

- Reorganization and modifications to Lines and Tubes section

- Addition of Patient Education section
- **Addition of Notification section**

<table>
<thead>
<tr>
<th>Notification</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notify Provider</td>
<td>ASAP for chest pain (and order ECG)</td>
</tr>
<tr>
<td>Notify Provider</td>
<td>For new onset Temperature greater than 101.5 F</td>
</tr>
<tr>
<td>Notify Provider</td>
<td>For Systolic BP greater than 180 mmHg</td>
</tr>
<tr>
<td>Notify Provider</td>
<td>For Systolic BP less than 90 mmHg</td>
</tr>
<tr>
<td>Notify Provider</td>
<td>For HR greater than 120 bpm</td>
</tr>
<tr>
<td>Notify Provider</td>
<td>For HR less than 60 bpm</td>
</tr>
<tr>
<td>Notify Provider</td>
<td>For Respiratory Rate greater than 30呼吸/min</td>
</tr>
<tr>
<td>Notify Provider</td>
<td>For Respiratory Rate less than 10呼吸/min</td>
</tr>
<tr>
<td>Notify Provider</td>
<td>For FIO2 need greater than 50%</td>
</tr>
<tr>
<td>Notify Provider</td>
<td>For Urine Output less than 250 ml/8 hrs</td>
</tr>
</tbody>
</table>

- **Changed orders available in Continuous Infusions section**

<table>
<thead>
<tr>
<th>Continuous Infusions</th>
<th>Fluid Resuscitation</th>
<th>Sodium Chloride 0.9% (NS Bolus)</th>
<th>IV Infusion 125 ml/hr</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lactated Ringers Injection (LR Bolus)</td>
<td>500 ml IV Infusion Once</td>
<td>Sodium Chloride 0.9% (NS Bolus)</td>
<td>IV Infusion 125 ml/hr</td>
</tr>
<tr>
<td>Sodium Chloride 0.9% (NS Bolus)</td>
<td>IV Infusion 125 ml/hr</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Addition of rates to Maintenance IV Fluids section**

- **Removed Ancef 2gm order**

- **Moved and reorganization to Antimicrobials**

<table>
<thead>
<tr>
<th>Antimicrobials</th>
<th>Continuous Post Op IV antibiotic(s) for a period NO GREATER THAN 24 HOURS AFTER ANESTHESIA END TIME unless reason for continuation of antibiotic(s) is documented below</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cefazolin (Ancef)</td>
<td>1,000 mg IV Piggyback Once Administer 8 hours after last peri-operative dose.</td>
</tr>
<tr>
<td>Metronidazole (Flagyl)</td>
<td>500 mg IV Piggyback Once Administer 8 hours after last peri-operative dose.</td>
</tr>
</tbody>
</table>

- **Moved and modifications to Analgesics**

<table>
<thead>
<tr>
<th>Analgesics</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication Order</td>
<td>See network PCA orders</td>
</tr>
<tr>
<td>acetaminophen (Tylenol)</td>
<td>650 mg PO (oral) w/ FRN Fever or Temperature greater than 100.5°F. Maximum of 4 grams acetaminophen daily from all sources</td>
</tr>
<tr>
<td>ibuprofen (Motrin)</td>
<td>600 mg PO (oral) w/ FRN Mild Pain</td>
</tr>
<tr>
<td>CAUTION: DO NOT order ketorolac (Toradol) if CR was less than 30 ml/hour on patients with suspected confirmed bleeding or history of bleeding within the prior 3 months.</td>
<td></td>
</tr>
<tr>
<td>Ketorolac (Toradol)</td>
<td>30 mg IV Push q4h (for Pain &amp; Pain 5 day(s) (for less than 65 years of age)). Do NOT administer ketorolac (Toradol) with other NSAIDS</td>
</tr>
<tr>
<td>acetaminophen-HIDCODONE (Norco 325 mg/5 mg oral tablet)</td>
<td>1 tab x 2 q6h (oral) w/ FRN Moderate Pain</td>
</tr>
<tr>
<td>Maximum of 4 grams acetaminophen daily from all sources</td>
<td></td>
</tr>
<tr>
<td>acetaminophen-HIDCODONE (Norco 325 mg/7.5 mg oral tablet)</td>
<td>1 tab x 2 q6h (oral) w/ FRN Moderate Pain</td>
</tr>
<tr>
<td>Maximum of 4 grams acetaminophen daily from all sources</td>
<td></td>
</tr>
<tr>
<td>acetaminophen-HIDCODONE (Norco 325 mg/10 mg oral tablet)</td>
<td>1 tab x 2 q6h (oral) w/ FRN Moderate Pain</td>
</tr>
<tr>
<td>Maximum of 4 grams acetaminophen daily from all sources</td>
<td></td>
</tr>
<tr>
<td>acetaminophen/HIDCODONE (Norco 5/25)</td>
<td>1 tab x 2 q6h (oral) w/ FRN Moderate Pain</td>
</tr>
<tr>
<td>Maximum of 4 grams acetaminophen daily from all sources</td>
<td></td>
</tr>
</tbody>
</table>
- Addition of Inhaled or Nebulized Medications
  - Albuterol Inhalation (Ventolin Neba) 2.5 mg Nebulized q3h PRN Wheezing
  - Ipratropium (Atrovent) 0.5 mg Nebulized q3h PRN Wheezing

- Modifications to Antiemetics
  - Ondansetron (Zofran) 4 mg IV Push q6h PRN Nausea or Vomiting
  - Promethazine (Phenergan) 6.25 mg IV Push q6h PRN Nausea or Vomiting unreleaved by Ondansetron (Zofran)
  - Metoclopramide (Reglan) 10 mg IV Push q4h PRN Nausea or Vomiting unreleaved by Ondansetron (Zofran) and...

- Modifications to GI Agents
  - Select 1 of the following medications for Indigestion
    - Alginic Acid (Gelusil) 30 mL PO (oral) qid PRN Indigestion
    - Calcium Carbonate (Tums) 500 mg Chewed q4h PRN Indigestion
    - Famotidine (Pepcid) 20 mg IV Push q24h PRN Indigestion

- Modifications to Laxatives
  - Bisacodyl 10 mg Rectally q12h PRN Constipation
  - Docusate 100 mg PO (oral) qday
  - Magnesium Hydroxide (milk of magnesia) 30 mL PO (oral) q4h PRN Constipation
  - Polyethylene glycol 3500 (Miralax) 17 g PO (oral) qday PRN Constipation

- Modifications to Sedatives
  - Amaryllis (Zalea) 0.25 mg PO (oral) q15 min PRN Anxiety
  - Diazepam (Valium) 25 mg PO (oral) q15 min PRN Insomnia
  - Lorazepam (Ativan) 0.5 mg IV Push bid PRN Anxiety
  - Zolpidem (Ambien) 5 mg PO (oral) at bedtime PRN Insomnia May repeat x 1 if ineffective after 30 minutes...

- Removed Temazepam
- Removed Dopamine/Dobutamine, Beta Blocker and Immunization sections
- Reorganization of Laboratory section
- Removed CK, CKMB and Troponin orders
- Removed **Microbiology**, **Serology** and **Urine Studies** sections

- Changed sequence of order options in **Consult Social Services** order

- Additional options available in **Physical Therapy Eval/Tx Adult** order

- Addition of **Physical Therapy Wound Care Eval/Tx** order

- Removed **Speech Bedside Swallow Eval/Tx Adult** order

- Removed some order options for **Oxygen** order

- Addition of **Incentive Spirometry** order

- Addition of **Cardiology** section
Stroke Alteplase (TPA) Protocol changes on March 3

Rationale
- Revision

Summary of the Change
- Changed order details for **Vital Signs** order
  - Vital Signs: q15min x 2 hours, q30min x 6 hours, q1hr x 16 hours and then Per Unit Routine

- Changed order details for **Neuro Check** order
  - Neuro Check: q15min x 2 hours, q30min x 6 hours, q1hr x 16 hours, and then Per Unit Routine

- Unchecked **Elevate Head of Bed**

- Changed order details for **Bleeding Precautions, Medication Instruction** and **Notify Provider** Nursing orders
  - Changed order details for Bleeding Precautions, Medication Instruction and Notify Provider Nursing orders
  - Removed Cardene CENTRAL INFUSION order

- Changed order details for **Tylenol** and added **Tylenol rectal order**
  - Changed order details for Tylenol and added Tylenol rectal order

- Modified **Blood Bank orders**

- Addition of **CBC w/Indices only**
  - Addition of CBC w/Indices only

<table>
<thead>
<tr>
<th>Antihypertensives</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acetaminophen (Tylenol)</td>
<td>650 mg PO (not qph); PRN if fever (temperature greater than 99°F). Max 4 grams Acetaminophen daily/time of all sources.</td>
</tr>
<tr>
<td>Acetaminophen (Tylenol)</td>
<td>650 mg PO (not qph); PRN if fever (temperature greater than 99°F) and unable to take PO. Max 4 grams Acetaminophen daily/time of all sources.</td>
</tr>
</tbody>
</table>
Venous Thromboembolism (VTE) Prophylaxis order set change on March 17

Rationale
- To align with best practices and quality measures
- Full review and revision of protocol to support the SMCA Go Live

Summary of the Change
- VTE Quality Measures
- Nursing Orders
- Medication orders
- Laboratory orders

VTE Quality Measures
- Addition of VTE Quality Measure Section
  - Addition of five “Reason VTE Prophylaxis Not Received” orders

Nursing Orders
- Unchecked one “Sequential Compression Device” order

Medications
- Revision of one optional “Lovenox” order sentence

Laboratory
- Revision of one optional “CBC with Diff” order sentence

Additional Info for CTVS Practitioners

New order sets
- *Neuro-interventional Post Op* on March 3
- *Thoracic Endovascular Aneurysm Repair (TEVAR) PostOp* on March 12
- *Cardiac Transplant PreOp Admit to ICU* on March 13
- *Mechanical Circulatory Support Readmission* on March 13 for UMCB, SMCH, SMCW
ICU General Admit order set revision on March 3

Rationale
- Full review and revision in preparation of SMCA Go Live
- To Align current orders with best practices

Key Points
- Activity Orders: Addition of Critical Care Mobility Algorithm, where available (SMCA for now)
- Nursing Orders Revision of Bladder Pressure Monitoring and Notifications
- Continuous Infusions: Revisions to update titrations to each medication
- Laxatives: Addition of optional “Miralax” orders
- Medications: Revision of order sentence for de-clotting policy
- Respiratory Therapy: Addition of order allowing the patient to use home C-PAP or Bi-PAP machine

Vital Signs
- Revision of one optional “CVP” order to read “Central Venous Pressure Monitoring” order

Activity
- Revision of one optional “Up to Chair-Nursing” order sentence

Diet
- Revision of two optional NPO orders sentence structure

Nursing Orders
- Revision of one optional “Bladder Scan” order sentence

Lines and Tubes
- Revision of terminology for three optional “Enteral Tube” orders
  - From Enteral Tube Intervention to Enteral Tube Insertion
- Revision of one optional “Enteral Tube Management” order sentence
  - Addition of “Other: See Special Instructions” option

Notifications
- Addition of one optional “Notify Provider” order

Continuous Infusions
- Addition of Vasopressors as a subcategory
  - Revision of two optional “Norepinephrine Adult Infusion” orders
  - Revision of three optional “Vasopressin Infusion” order
  - Revision of two optional “Epinephrine Adult Infusion” orders
  - Revision of two optional “Phenylephrine Infusion” orders
- Addition of Antihypertensives as a subcategory
• Addition of four optional IV orders
  o Sterile water with 3 amps of Sodium Bicarbonate
  o D5W with 3 amps of Sodium Bicarbonate

Medications
• Deletion of one optional “Avelox” order
• Corticosteroids
  o Revision of one optional “Dexamethasone” order

Protocols
• Addition of prechecked VTE protocol
• Addition of subphases to include:
  o Heparin Infusion Protocol
  o Heparin Infusion Protocol (SHL)
  o Venous Thromboembolism (VTE) Prophylaxis
  o Electrolyte Replacement
  o Insulin Infusion Protocol
  o Insulin Scheduled and/or Correctional Scale for Diabetics
  o Insulin Correctional Scale for Non-Diabetics
  o Restraint Medical
  o Paralysis ICU Protocol
  o Sedation and Pain ICU protocol (Mechanically Ventilated Patients)
  o Blood Transfusion
  o Induced Hypothermia Post Cardiac Arrest Protocol
  o Ventilator Bundle ICU Protocol

Laboratory
• Revision of four optional Blood Bank orders
  o Red Blood Cells
  o Fresh Frozen Plasma
  o Cryoprecipitate
  o Platelets
• Revision of one optional “Blood Product Keep Ahead” order

Stat Labs
• Revision of two optional Blood Gas order sentences

Microbiology
• Revision of optional “Culture MRSA Screen” order

Respiratory Therapy
• Revision of one optional “Nasotracheal Suctioning” order
• Revision of one default “Oxygen” order

Radiology
• Revision of:
  o One optional “XR Abdomen PA” order
  o One optional “CT Chest w/o Contrast” order
  o Three optional “CT Abdomen w/Contrast” orders
  o One optional “CT Abdomen w/o Contrast” order
  o Three optional “CT Abdomen/Pelvis w/Contrast” orders
  o One optional “CT Abdomen/Pelvis w/o Contrast” order
  o One optional “US Abdomen Complete” order
• Deletion of:
  o One Optional “CT Head w/o Contrast” order

Morning/Serial Radiology
• Revision of optional:
  o Two “XR Abdomen AP” orders
  o “CT Head w/o Contrast” order
  o “CT Chest w/ Contrast” order
  o “CT Chest w/o Contrast” order
  o Three “CT Abdomen w/ Contrast” orders
  o “CT Abdomen w/o Contrast” order
  o Three “CT Abd/Pelvis w/ Contrast” orders
  o “CT Abd/Pelvis w/o Contrast” order
  o “US Abdomen Complete” order
  o “US LE Venous Duplex Bilat” order

Vascular Admit to Med/Surg power plan revision on March 17

Rationale: To align with Best practice

Summary of the Change
• Modifications were made to the Vital Signs section, not limited to:
  o The Unit Routine Vital Signs order was modified
  o Pulse Oximetry order changes were made
• One modification was made to the Nursing Orders section regarding the Consent For order
• The Social Services Consult orders for Palliative Care and Hospice were modified
Transfer from ICU order set revisions on March 12 for SMCH, SMCW, and UMCB

Rationale

- Full review and revision of PowerPlan to align with best practices

Summary of the Change

- Addition of two optional Admit/Transfer/Discharge orders
- Addition of optional Vital Sign Order
- Revision of three optional Activity Orders
- Addition of one Diet Order
- Addition of four optional Nursing Orders
- Revision of three optional Lines and Tubes Orders
- Addition of four optional Lines and Tubes Orders
- Addition of 26 optional Medication Orders
- Addition of three Protocols
- Revision of one optional Consult Order
- Addition of 14 optional Rehab Orders
- Addition of 17 and revision of four optional Respiratory Therapy Orders
- Addition of one Cardiologist Notification Order
- Revision of two optional Radiology Orders
- Addition of two optional Admit/Transfer/Discharge orders

<table>
<thead>
<tr>
<th>Transfer from ICU (Planned Pending)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non Categorized</td>
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<tr>
<td>Orders Reconciliation Complete</td>
</tr>
<tr>
<td>Admit/Transfer/Discharge</td>
</tr>
<tr>
<td>Transfer to</td>
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<tr>
<td>Physician Transfer of Patient Care</td>
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- Addition of optional Vital Sign Order

<table>
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<tr>
<th>Activity</th>
<th>Weight</th>
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<tbody>
<tr>
<td></td>
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- Revision of three optional Activity Orders

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<thead>
<tr>
<th>Activity</th>
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<tbody>
<tr>
<td>Activity As Tolerated</td>
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</tr>
<tr>
<td>Ambulate - Nursing</td>
<td>bid, With Assistance</td>
</tr>
<tr>
<td>Up to Chair - Nursing</td>
<td>qDay</td>
</tr>
<tr>
<td>Bedrest</td>
<td>Bathroom Privileges</td>
</tr>
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</table>

- Addition of one optional Diet Order: Enteral Tube Feeding Protocol

<table>
<thead>
<tr>
<th>Diet</th>
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<tbody>
<tr>
<td>Adult Diet</td>
</tr>
<tr>
<td>Enteral Tube Feeding Protocol</td>
</tr>
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</table>
- Addition of four optional Nursing Orders
  - Three optional Isolation Orders
  - One optional I&O order
  - Revision of two optional Notification Orders

- Revision of three optional Lines and Tubes Orders

- Addition of four optional Lines and Tubes Orders

<table>
<thead>
<tr>
<th>Lines and Tubes</th>
<th>Lines and Tubes</th>
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<tbody>
<tr>
<td>Peripheral IV Insertion</td>
<td>with IV Flushes per Protocol</td>
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<tr>
<td>IV Flushes per Protocol</td>
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<tr>
<td>Enteral Tube Management</td>
<td>Gastric tube, To Gravity</td>
</tr>
<tr>
<td>Enteral Tube Management</td>
<td>Nasoenteric tube, To Low Intermittent Suction</td>
</tr>
<tr>
<td>Arterial Line Removal</td>
<td>Now</td>
</tr>
<tr>
<td>Central Venous Line Removal</td>
<td>Now</td>
</tr>
<tr>
<td>Central Venous Line Care</td>
<td>Routine</td>
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<tr>
<td>PICC Instruction</td>
<td>Routine PICC Care</td>
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<tr>
<td>Hemodialysis Catheter Care</td>
<td>Routine</td>
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<tr>
<td>Chest Tube Connectivity</td>
<td>Chest Tube to 20 cm H2O Suction</td>
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<tr>
<td>Urinary Catheter Insertion</td>
<td>Indwelling/Continuous Catheter</td>
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<tr>
<td>Urinary Catheter Removal</td>
<td>Replace if unable to void in 6 hours.</td>
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<tr>
<td>Urinary Intermittent Catheterization</td>
<td>Once, PRN Order Urinary Retention or unable to Void</td>
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- Addition of 26 optional Medication Orders

- Addition of three Protocols

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<thead>
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<tr>
<td>Blood Transfusion_0510</td>
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<tr>
<td>Electrolyte Replacement_1538v2</td>
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<tr>
<td>Comfort Orders Protocol_100.35</td>
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</table>
• Revision of one optional Consult Order
  □ Consult Case Management
  □ Consult Social Services
  □ Consult Wound Ostomy/Continence Nurse
  □ Consult Supportive/Palliative Care

• Addition of 14 optional Rehab Orders
  □ Occupational Therapy Eval/Tx Adult
  □ Physical Therapy Eval/Tx Adult
  □ Physical Therapy Treatment Update
  □ Physical Therapy Wound Care Eval/Tx
  □ Speech and/or Swallow w/Notes
  □ Swallow Study, Complete

• Addition of 17 and revision of four optional Respiratory Therapy Orders
  □ Protocol Resp: Evaluate and Treat
  □ Oxygen
  □ BiPAP/CPAP
  □ Incentive Spironetry
  □ IPPB Treatment
  □ Chest Physiotherapy
  □ Cough Assist Device
  □ Nasotracheal Suctioning

• Addition of one Cardiologist Notification Order
  □ ECG PRN Instruction Adult
  □ Cardiologist needs to be notified prior to ordering STAT echo.
  □ Cardiac Echocardiogram

• Revision of two optional Radiology Orders
  □ XR Chest 1 View
  □ XR Chest 2 Views
  □ XR Abdomen AP
  □ XR Abdomen Flat/Upright
Carotid Endarterectomy Pre Op order set changes on March 17

Rationale
• Revision of multi-phase plan to single-phase plan
• Review and revision in preparation for SMCA Go Live

Key Points
• Will inactivate old plan

Vital Signs
• Revision of entire Vital Sign section
• Revision of:
  o Two optional “Vital Sign” orders
  o One optional “Cardiac Monitor” order
  o Two optional “Pulse Oximetry” orders
  o One optional “Pulse Oximetry Continuous” order
  o One default and one optional “Weight” order
• Addition of one default “Vital Sign” order

Activity
• Addition of one optional “Bedrest” order

Diet
• Revision of the entire Diet section
• Revision of:
  o One default and five optional “NPO” orders

Nursing Orders
• Revision of two optional “Witness Consent For” orders

Continuous Infusions
• Revision of:
  o One default “Peripheral IV Insertion” order
  o One default “NS” order
  o Five optional “NS” orders
  o Six optional “LR” orders
• Addition of:
  o Two optional “D5 ½ NS + KCL 20 mEq/L” orders

Medications
• Addition of entire Medications section
  o Addition of one default “Medication Instruction” order
Addition of “Antimicrobial” section including:
  - Three optional Ancef orders
  - Four optional Vancocin HCL orders
  - Two optional Clindamycin orders

Addition of “Orders” section including:
  - One optional Decadron order
  - Two optional Aspirin orders

**Hematology**
- Addition of two optional “Lab Instruction” orders

**Deleted Orders**
- “Admit to” order
- “Observe to” order
- “Resuscitation Status” order
- “Patient Condition” order
- “Q1h and q2h options” Vital Sign orders
- “Obtain Prior Studies” order

**VATS/Thoracic Surgery PostOp order set revision on March 5**

**Rationale:** Revision of the power plan to align with Best Practice

**Summary of Change:**
- The VTE Quality Measures section was added
- Slight modifications were made to the Admit/Transfer/Discharge section, including the addition of Resuscitation orders
- Modifications were made to the Vital Signs section, not limited to:
  - Neuro Check orders were added
  - Cardiac Monitor and Pulse Oximetry order choices added
- The Activity section was modified
- The Diet section had slight modifications made
- The Nursing section was modified to include additional intake and output monitoring order options, as well as drain and urinary catheter management order options
- An entire Notify Provider section was added
- Modifications were made to the Continuous Infusions section
• Modifications were made to the entire Medication section
  o Maximum dose sentences added for Tylenol
  o Provider reminder sentences added for Toradol
  o Caution sentences were added for Toradol doses
  o Morphine dose choices were modified
  o A Protocol section was added for Insulin doses
• The entire Lab section was modified
• A Rehab section was added
• Slight modifications were made to the Respiratory and Radiology sections

Major Abdominal Vascular Surgery PostOp order set change on March 14

Rationale: To align with Best Practice.

Summary of Change:
• The Vascular Surgery Admit order set will be re-named Major Abdominal Vascular Surgery PostOp
• Slight modifications were made to the Admit/Transfer/Discharge section
• Modifications were made to the Vital Signs section, not limited to:
  o Monitoring Hemodynamics order changes
  o CVP monitoring order changes
  o Cardiac Monitor order changes
• Slight modifications were made to the Activity section:
  o The addition of a Weight Bearing section
• The entire Dietary section was modified
• Modifications were made to the Nursing section, not limited to:
  o Treatment Instruction orders were added
  o The SCIP guidelines modified
  o Urinary Catheter orders modified
• The Continuous Infusion section was modified to include, but not limited to:
  o IV solution choices and rates modified
  o Drips included reduction of max doses for Dopamine and Nitroprusside doses
• Dose choices and or additions were made to the Medication section to include:
  o The addition of an Antimicrobials section
  o The Blood Pressure Management section was added
Additions were made to the Sleep and Anxiety section

- The Lab section was entirely modified
- The Consults and Rehab sections were added
- The Respiratory, Cardiology and Radiological sections were modified

**Vascular Surgery Lower Extremity PostOp power plan revision on March 17**

**Rationale:** To align with Best practice

**Summary of Change:**
- Modifications were made to the Vital Signs section, not limited to:
  - Pulse Oximetry order changes
  - Lower Extremity Neurovascular Check with Doppler Signal order changes
- Modifications were made to the Activity section
- The Nursing section was modified to include additional intake and output monitoring order options, and urinary catheter management order options
- The Continuous Infusions section was modified, to include, but not limited to:
  - The Dopamine Infusion orders were modified
  - The Nitroprusside drip was removed
- The entire Medication section was modified
- The SCIP Protocol was added
- Slight modifications were made to the Consult and Respiratory sections

**CABG/Open Heart PreOp order set changes on March 17**

**Rationale**
- Revision

**Summary of the Change**
- Removed Transfer to order
- Addition of Vital Signs order for Per Unit Routine
- **Addition of** **Pulse Oximetry Continuous** order

- **Unchecked Consent for** orders

- **Changed order details for** **Smoking Cessation Instructions** order

- **Modifications to** **Continuous Infusions** section

- **Reorganization and modifications to** **Antimicrobials** section

- **Addition of** **aspirin enteric coated tablet**

- **Unchecked Insulin regular sliding scale** and **Dextrose 50% Syringe** orders

- **Addition of** **Sleep and Anxiety** section

- **Unchecked POC Blood Glucose** order

- **Changed** **Diabetes Education** order to **Consult Diabetes Program**

### Additional Info for ED Practitioners

**New order set on March 17**

- **ED Acute Pain order set will include these categories:**
  - Vital Signs section, to a treatment instruction for RASS scoring
  - Nursing Orders section, to include pain assessment monitoring orders
  - Medications section to include dose choices for Morphine, Fentanyl, Zofran and Benadryl
**ED Chest Pain order set change on March 14**

**Rationale:** To align with Best Practice.

**Summary of Change:**
- Slight modifications were made to the Nursing Orders sections
- Modifications to dose choices or additions were made to the Medication section to include:
  - Lopressor
  - Phenergan
  - Zofran
  - Brilinta
  - Adult Heparin Infusion Protocol was added
  - Heparin single orders were removed
  - Aggrastat was removed
- Slight modifications were made to the Lab section
- The Blood gases section was modified to use standardized sentences
- Slight modifications were made to the Respiratory and Cardiology sections

**ED Suspected Stroke Protocol revision on March 14**

**Rationale:** To align with Best Practice.

**Summary of Change:**
- The Vital Signs and Quality Measures sections were both removed
- Slight modifications were made to the Nursing Orders section
- In the Continuous Infusions section, slight modifications were made, to include:
  - Removal of the LR Bolus order option
  - Modification to the NS rate options
- Modifications to dose choices or additions were made to the Medication section to include:
  - Zofran
  - Phenergan
  - Aspirin
- In the Lab section, modifications were made to include:
  - The HIV order choice was removed
  - Myoglobin order added with now + 90 minutes choices
  - Troponin order modified with now + 90 minutes choices
The Blood Gases section was modified to include standardized order sentences

Slight modifications were made to the Point of Care section

In the Respiratory section the Protocol Resp order for Eval and Treat was removed

Slight modifications were made to the Cardiology section

In the Radiology section, slight modifications were made, to include:
- CT Head w/o Contrast added
- CT Stroke Protocol/Cerebral Perfusion modified to be default checked
- MRI Brain Limited w/ + w/o Contrast added

**ED Poisoning/Toxic Effects order set change on March 14**

**Rationale:** To align with Best Practice.

**Summary of Change:**

- Slight modifications were made to the Vital Signs and Nursing Orders sections
- Slight modifications were made to the Continuous Infusions section, to include:
  - Nalaxone infusion order was removed
  - Additional D5 ½ NS infusion choices were added
  - D5 NS infusion choices added
  - D5W w/Sodium Bicarbonate order added
- Modifications to dose choices or additions were made to the Medication section to include:
  - Charcoal
  - Charcoal-Sorbitol
  - Golytely
  - Glucagon
  - Zofran
- Slight modifications were made to the Lab section
- A Therapeutic Drugs/Toxicology section was added
- The Blood Gases section was modified to include standardized sentences
- Slight modifications were made to the Cardiology and Respiratory sections
Additional Info for OBGYNs

GYN Major Procedure PreOp order set change the week of March 17 for SMCH, SMCW, UMCH

Rationale
- Revision

Key Points
- Separation of Pre and PostOp phases
  - Gynecological Major Procedure PreOp
  - Gynecological Major Procedure PostOp

Summary of the Change
- Removed Surgical prep hair removal order
- Addition of Notification section
- Addition and revision of Antimicrobial orders
- Addition of Analgesics section
Addition of Antiemetics orders

- **Addition of Beta hCG Qual Urine order**

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<thead>
<tr>
<th>Beta hCG Qual</th>
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<th>Details</th>
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<tbody>
<tr>
<td>Calcium Level Total</td>
<td>Blood, Routine collect</td>
<td>Blood, If patient is less than 55 years of age, Routine collect</td>
</tr>
<tr>
<td>Magnesium Level</td>
<td>Blood, Routine collect</td>
<td>Blood, If patient is less than 55 years of age, Routine collect</td>
</tr>
<tr>
<td>Phosphorous Level</td>
<td>Blood, Routine collect</td>
<td>Blood, If patient is less than 55 years of age, Routine collect</td>
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</tbody>
</table>

GYN Minor Procedure order set change the week of March 17 for SMCH, SMCW, UMCB

**Rationale**
- Revision

**Summary of the Change**
- Name change from **Gynecological Procedure** to **Gynecological Minor Procedure**

**Optional Admit to order**

- **Changed order details of Temperature order**
  - On admission, then at 1 hr, and then 4th
• Addition of May Shower order

• Default checked Strick Intake + Output

• Default checked Remove Dressing

• Addition of Dressing Change Nursing order

• Addition of Treatment Instructions for hypoglycemia

• Addition of order details to Urinary Intermittent Catheter order

• Default checked Discontinue Urinary Catheter POD #1

• Changed order details of Treatment Instructions for catheter

• Addition of order details for Notify Provider for HR

• Default checked Notify Provider for Blood Glucose

• Addition of Medication Instruction for Saline Lock

• Addition of D5LR order

• Addition of D5 ½ NS order

• Addition of D5 ½ NS + KCL 20 mEq/L

• Removed mefoxin order
- **Addition of Flagyl order**
  - microBIDACOLE (Flagyl) 500 mg IV q6h

- **Revision of Analgesics section**
  - Select only one medication for Mild Pain (Pain Score 1 - 3) **
  - acetaminophen (Tylenol)
    - 660 mg PO (oral) q6h if F/P over 100.5 F.
    - Max of 4 grams acetaminophen daily from all sources
  - bupropion (Zyban)
    - 300 mg PO (oral) q6h if F/P over 100.5 F.
  - **CAUTION DO NOT order Ketorolac (Toradol) if F/P is less than 30.0 F.**
  - Ketorolac (Toradol)
    - 30 mg IV push q4h if F/P over 100.5 F. (for less than 65 years of age)
  - Do NOT administer Ketorolac (Toradol) with other NSAIDS

- **Default checked Phenergan 6.25 mg IV Push**

- **Changed Mylicon to PRN**

- **Removed Ambien 10mg**

- **Addition of several Laboratory orders**

- **Addition of Diagnostic Tests**
• Default checked and removed a few order details for **Oxygen** order

• Addition of **Radiology** section

<table>
<thead>
<tr>
<th>Radiology</th>
<th>Routine, Reason: Gynecological Minor Procedure, Transport Mode: Portable</th>
</tr>
</thead>
<tbody>
<tr>
<td>X Ray</td>
<td>X Ray Chest 1 View</td>
</tr>
<tr>
<td>X Ray</td>
<td>X Ray Chest 2 Views</td>
</tr>
</tbody>
</table>

**OB Antepartum order set revision the week of March 17 for SMCH, SMCW, UMCB**

**Rationale**

• Revision

**Key Points**

• **OB Antepartum** orderset has been split into 5 ordersets
  
  o **OB Antepartum General Admit** – Revision from OB Antepartum
  
  o **OB Antepartum Hyperemesis Admit** – New Orderset
  
  o **OB Antepartum Hypertension Admit** – New Orderset
  
  o **OB Antepartum PPROM Admit** – New Orderset
  
  o **OB Antepartum Uncontrolled Diabetic Admit** – New Orderset

**Summary of the Change**

**OB Antepartum General Admit**

• Name change from **OB Antepartum**

• Removed **Limited Resuscitation** and **Do Not Resuscitate** order options

• Default checked **Vital Signs** q8h, while awake order

• Removed **Trendelenberg** order

• Addition of Regular, High Fiber to **Adult Diet**
• Changed Routine I & O to **Strict Intake and Output**
  - Strict Intake + Output
    - q4h Assess and document

• **Addition of Treatment Instructions** for Ultrasound PRN
  - Treatment Instructions
    - Physician to perform ultrasound PRN Obstetric Indication.

• Default checked **Fetal Heart Tone Auscultation** qshift

• **Addition of Fetal Nonstress Test** order options

• **Addition of VTE Prophylaxis** module
  - Venaus Thromboembolism (VTE) Prophylaxis_998

• **Addition of Treatment Instructions** for Abnormal FHR Tracing
  - Treatment Instructions
    - For Abnormal FHR Tracing: Tumipatent to lateral position in bed, administer oxygen at 12 - 15 L/min

• **Addition of Notify Provider** order for Contractions greater than 6/hr
  - Notify Provider
    - If contractions greater than 6/hr.

• Default checked **Notify Provider** for Headache unrelieved by Acetaminophen

• **Reorganization of Continuous Infusions**

• **Modification of Tylenol order details**

• **Addition of GI Agents** section

• Removed some order options for **Promethazine** and **Zofran**
- Addition of several Protocols

<table>
<thead>
<tr>
<th>Protocols</th>
</tr>
</thead>
<tbody>
<tr>
<td>❌ DB Magnesium Sulfate Protocol Neoproteinosis For Preter...</td>
</tr>
<tr>
<td>❌ DB Group B Test, Delayed Onset Pneumonia Protocol...</td>
</tr>
<tr>
<td>❌ DB Antisense Contraception</td>
</tr>
<tr>
<td>❌ DB Affidavit Typhoidal Peritoneal Labor Protocol EGA 24-34...</td>
</tr>
<tr>
<td>❌ DB Premature Rupture of Membrane Antibiotics...</td>
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<tr>
<td>❌ DB Lab Routine 1010</td>
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<tr>
<td>❌ DB Urgent Therapy for Hypertension</td>
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- Reorganization and additions to Laboratory section

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<tbody>
<tr>
<td>✔ Lab Instructions</td>
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<tr>
<td>✔ Communication Order</td>
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<tr>
<td>✔ Chlamydia and GC Direct DNA Probe</td>
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<tr>
<td>✔ CBC with Diff</td>
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<tr>
<td>✔ Prothrombin Time with INR</td>
</tr>
<tr>
<td>✔ Activated PTT</td>
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<td>✔ HREM</td>
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<td>✔ Comprehensive Metabolic Panel</td>
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<tr>
<td>✔ Lipid Panel</td>
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<tr>
<td>✔ Culture Group B Strep Viral</td>
</tr>
<tr>
<td>✔ Ambulatory Screen</td>
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<table>
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<tbody>
<tr>
<td>✔ Ca 24 Hour Urine Calc</td>
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<tr>
<td>✔ Protein 24 Hour Urine</td>
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<tr>
<td>✔ Creatinine Urine</td>
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<tr>
<td>✔ Urine Dipstick</td>
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<tr>
<td>✔ Urine with Microscopic</td>
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<tr>
<td>✔ Drug Screen Urine</td>
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- Reorganization and additions to Consults section

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<tr>
<td>✔ Consult Case Management</td>
</tr>
<tr>
<td>✔ Consult Social Services</td>
</tr>
<tr>
<td>✔ Documentation of order only. Does not electronically notify consulting physicians.</td>
</tr>
<tr>
<td>✔ Consult Psychiatry</td>
</tr>
<tr>
<td>✔ Consult Gynecology</td>
</tr>
<tr>
<td>✔ Consult Radiology</td>
</tr>
<tr>
<td>✔ Consult Cardiology</td>
</tr>
<tr>
<td>✔ Consult General Surgery</td>
</tr>
</tbody>
</table>

- Addition of Respiratory Therapy section

<table>
<thead>
<tr>
<th>Respiratory Therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td>✔ Invasive Spirometry</td>
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</table>

- Addition of US Transvaginal order

<table>
<thead>
<tr>
<th>US Transvaginal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine, Reason: Evaluation of Pregnancy</td>
</tr>
</tbody>
</table>
Additional Info for Surgeons

Pre Op order set full revision on March 3

Rationale
- Full review and revision in preparation of SMCA Go Live

Key Points
- Revision of the entire antimicrobial section

Diet Orders
- Addition of four optional “Hold Feeding” orders

<table>
<thead>
<tr>
<th>Diet Orders</th>
<th>After Midnight</th>
<th>After midnight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hold Feeding</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Nursing Orders
- Deletion of “Old Chart To Floor” order
- Addition of optional “Consent For” order
- Deletion of “Apply Foot Pumps, Antiemboli Hose, and SCDs” order
- Addition of VTE Prophylaxis Protocol

<table>
<thead>
<tr>
<th>Nursing Orders</th>
<th>Procedure: _____, Diagnosis: _____, Risks: _____</th>
</tr>
</thead>
<tbody>
<tr>
<td>Witness Consent For</td>
<td>Notify Anesthesiologist if routine prescribed beta ...</td>
</tr>
</tbody>
</table>

Antimicrobial Orders
- Revision of all antimicrobial orders
- Revision of four optional “Medication Instruction” orders
- Revision of the following optional orders:
  - Ancef
  - Flagyl
  - Gentamicin
  - Cleocin
  - Vancocin HCl
  - Unasyn

Consults
- Addition of three optional “Consult Anesthesiology” orders

<table>
<thead>
<tr>
<th>Consults</th>
<th>Evaluate and treat</th>
<th>Evaluate and treat, for Peripheral Nerve Block placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consult-Anesthesiology</td>
<td>12 Lead, Reason: Pre Procedure</td>
<td>Evaluate and treat, for continuous Peripheral Nerve Block placement</td>
</tr>
</tbody>
</table>
Bariatric Surgery PreOp order set changes on March 14 for SMCH, SMCW, UMCB

Rationale: This power plan will be a revision of the Gastric Lap Band PreOp power plan and the name is changing to Bariatric Surgery PreOp

Summary of Change:
- Slight modifications were made to the Nursing Orders sections
- The Admit/Transfer/Discharge section was removed
- Modifications to dose choices or additions were made to the Medication section to include, but not limited to:
  - Cefazolin
  - Clindamycin
  - Gentamycin
- Additional items were added to the Lab section, including POC Blood Glucose
- A Consult section was added for an Anesthesiology consultation order
- A Cardiology section was added for a 12 lead ECG order

Admit to Surgery order set changes on March 3

Rationale
- Full review and revision to support SMCA Go Live

Key Points
- Removed “Initiate PowerPlan” order
- Removed “Intake and Output” order
- Removed the Intervention section
- Removed renal dosing

Quality Measures
- Revision of three optional prophylaxis orders

Admit/Transfer/Discharge
- Revision of six optional “admit to” order sentences
- Revision of four optional “observe to” orders
- Revision of three optional “resuscitation” order
Vital Signs
- Addition of eight optional vital sign orders
- Revision of one optional vital sign order

Activity
- Addition of one optional activity order
- Addition of one optional ambulate order
- Deletion of “out of bed” order
- Revision of one optional “up to chair” order
- Revision of two optional bed rest orders

Diet
- Revision of three optional “NPO” orders

Nursing Orders
- Revision of 13 optional isolation precaution orders
- Addition of three optional “strict intake and output” orders
Lines and Tubes
- Addition of Lines and Tubes section
- Revision of seven optional Lines and Tubes orders

Notifications
- Addition of Notification section
- Revision of 16 optional “Notify Provider” orders

Fluid Resuscitation
- Revised name of section from Continuous Infusion to Fluid Resuscitation
- Revision of two optional NS Bolus orders
- Addition of Maintenance IV Fluid section
- Revision of 16 optional fluid orders
**Medications**
- Revision of six antimicrobial orders
- Addition of six optional antimicrobial orders

**Analgesics**
- Revision of the entire analgesic section

**Antiemetics**
- Revision of six antiemetic orders

**GI Agents**
- Revision of 11 GI agent orders

**Bowel Preparation**
- Revision of four bowel prep orders
Agitation, Anxiety, or Sleep
- Revision of 12 optional Agitation, Anxiety, or Sleep orders

Other
- Addition of two optional Benadryl orders

Protocols
- Addition of Protocols section
- Revision of Protocols

Hematology
- Addition of five optional hematology orders
- Revision of six optional hematology orders

Chemistry
- Addition of ten chemistry orders
- Revision of seven chemistry orders

Microbiology
- Addition of details to three optional “culture urine” orders
### Point of Care Testing
- Addition of three optional “POC Blood Glucose” order

### Consults
- Revision of 18 optional consult orders

### Rehab
- Revision of eight optional rehab orders

### Respiratory Therapy
- Revision of two optional and two default respiratory orders

### Cardiology
- Revision of two optional cardiac echocardiogram orders
- Revision of five optional radiology orders
- Addition of four optional radiology orders
Bariatric Surgery PostOp Admit order set changes on March 14 for SMCH, SMCW, UMCB

Rationale: Revision and combination of both the Gastric Lap Band PostOp power plan and Gastric Bypass Laparoscopic PostOp plan into one new plan named Bariatric Surgery PostOp

Summary of Change:
- Slight modifications were made to the Admit/Transfer/Discharge section to include:
  - The addition of Resuscitation orders
- Modifications were made to the Vital Signs section
- An Activity section was added
- The Diet Orders section was modified
- Modifications were made to the Nursing section, to include:
  - The addition of Blake and JP Drain management orders
  - The addition of Urinary Catheter Discontinuation order choices
- The Notification section was modified
- The Continuous Infusions section was modified to include more IV Fluid solution and rate choices
- Modifications to dose choices or additions were made to the Medication section to include, but not limited to:
  - A Medication Instruction was added for all oral medications to be crushed or to be in liquid form
  - Lovenox
  - The entire Analgesic section was modified
- A Lab section was added
- The Respiratory section was modified
- The Radiology section was slightly modified

Abdominal Surgery Major Post Op order set revision on March 3

Rationale
- Full Review and revision of plan to support SMCA Go Live

Summary of the Change
- Revision of Multiphase PowerPlan to a single-phase plan

Admit/Transfer/Discharge
- Addition of one optional “Observe to” order
• Addition of six optional “Transfer to” orders
• Relocated one default and two optional “Resuscitation Status” orders to this section

**Vital signs**
• Revision of one default and one optional “Vital Sign” orders
• Addition of two optional “Neuro check” orders
• Moved optional “Pulse Oximetry Continuous” order to this section
• Addition of three optional “Pulse Oximetry” orders
• Addition of one optional “Weight” order

**Activity**
• Relocation of one optional “Activity as Tolerated” order to this section
• Relocation and revision of one optional “Up to Chair – Nursing” order to this section
• Revision of one optional “Ambulate – Nursing” order
• Revision of two optional “Bedrest” orders
• Addition of three optional “May Shower” orders
• Deletion of “Up Ad Lib” order

**Diet**
• Revision of one default and three optional “NPO” orders
• Addition of three optional “Adult Diet” orders
• Addition of one optional “Adult Oral Supplements” order
• Addition of “Enteral Tube Feeding” Protocol

Nursing Orders
• Revision of one default and one optional “Strict Intake and Output” orders
• Addition of two optional “Record Drain Output” orders

Interventions
• Relocation and revision of the entire Interventions section
• Revision of:
  o One optional “Dressing Change Nursing” order
  o One optional “Treatment Instruction” order
  o One optional “Cold Application” order
  o One optional “Warming Blanket” order sentence

Lines and Tubes
• Deletion of one optional “Saline Lock Conversion” order
• Revision of the following optional orders:
  o “Enteral Tube Intervention”
  o “Enteral Tube Management”
  o “Bulb Suction Management”
  o Two “Surgical Drain Stripping” orders
  o “Biliary Drain Management”
  o “Urinary Catheter to Dependent Drainage”
  o Two “Discontinue Urinary Catheter” orders
  o Two “Urinary Intermittent Catheterization” orders
  o “Urinary Catheter Insertion”
Patient Education
- Revision of:
  - One optional “Pain and Pain Management” Instructions
  - One optional “Patient Education” order

Notification
- 16 optional “Notify Provider” orders

Continuous Infusions
- Revision of the entire Continuous Infusion section
- Addition of “Fluid Resuscitation” subcategory
  - Optional LR Bolus
  - Optional NS Bolus

Medications
- Changed name to Antimicrobial
- Deletion of Protocol Note
- Addition of three optional Medication Instructions
• Addition of “Continuous Post Op IV Antibiotic” order note
• Revision of optional orders for:
  o Ancef
  o Flagyl
  o Zosyn
• Revision of optional Analgesic orders:
  o Tylenol
  o Motrin
  o Toradol
  o Norco
  o Percocet
  o Oxycodone
  o Morphine
  o Dilaudid
• Revision of one optional “Communication” order

- **Antimicrobials**
  - Continue PostOp IV antibiotic(s)
  - Medication Instruction
  - The following two orders must be
  - caFAzolin (Ancef)
  - neb-nIDAZOLE (Flagyl)
  - If severe Beta-lactam allergy (An)
    - neb-nIDAZOLE (Flagyl)
  - Alternative therapy for suspected piperacillin-tazobactam (Zosyn)

- **Analgesics**
  - Communication Order
    - Select only one medication!
  - acetaminophen (Tylenol)

**Inhaled or Nebulized Medications**
• Addition of four optional inhaled/nebulized medications
  o Two Ventolin Nebs
  o Two Atrovent
Antiemetics
- Revision of four antiemetic orders
  - Zofran
  - Phenergan
  - Reglan

<table>
<thead>
<tr>
<th>GI Agents</th>
<th>Antiemetics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ondansetron (Zofran)</td>
<td>4 mg IV Push q12h PRN Nausea or Vomiting</td>
</tr>
<tr>
<td>Promethazine (Phenergan)</td>
<td>5.25 mg IV Push q6h PRN Nausea or Vomiting unrelieved by Ondansetron (Zofran)</td>
</tr>
<tr>
<td>Metoclopramide (Reglan)</td>
<td>10 mg IV Push q6h PRN Nausea or Vomiting unrelieved by Ondansetron (Zofran)</td>
</tr>
</tbody>
</table>

GI Agents
- Revision of four optional Pepcid orders
- Addition of Laxative subsection
  - Biscacodyl
  - Docusate
  - Milk of Magnesia
  - Miralax
- Addition of Sedative section
  - Xanax
  - Benadryl
  - Ativan
  - Ambien

<table>
<thead>
<tr>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benzocaine-cetlypyridinium topical (Cepacol)</td>
</tr>
<tr>
<td>Diphenhydramine (Benadryl)</td>
</tr>
</tbody>
</table>
Protocols
- Addition of Protocols section
  - SCIP Post Op orders
  - Thromboembolism VTE Prophylaxis
  - Insulin Scheduled and/or Correctional Scale for Diabetics

Laboratory
- Revision of subsections
  - Stat Labs
  - Morning Serial Labs
- Addition of 12 optional Stat Labs
- Addition of 10 optional Morning Serial Labs

Consults
- Revision of:
  - Two optional “Consult Case Management” orders
  - Four optional “Consult Social Services” orders
- Addition of:
  - One optional “Consult Social Services” order
  - One optional “Consult Dietician Adults Assessment” order
  - One optional “Consult Wound Ostomy Continence Nurse” order
Rehab
- Addition of Rehab section
- Addition of:
  - Four optional “Physical Therapy Eval/Tx Adult” orders
  - Two optional “Physical Therapy Wound Care Eval/Tx” orders
  - Three optional “Occupational Therapy Eval/Tx Adult” orders

Respiratory Therapy
- Relocation of optional Protocol Resp: Evaluate and Treat
- Revision of one optional and one default oxygen orders
- Addition of:
  - One default “Incentive Spirometry” order
  - One optional “Incentive Spirometry” order

Additional Info for Neurosurgeons
New order sets
- Neuro-interventional Post Op on March 3

Additional Info for Interventional Radiologists
New Orders in March
- IR Arthrogram Pre Procedure order set replaces the MRI Anthrogram order on March 17. The new order set contains the CT Arthograms order.
Additional Info for Anesthesiologists & CRNAs

New orders in March

- *SMDO Anesthesia PreOp*. Anesthesia PreOp paper orders should no longer be used.