

Directions: 1. Indicate choice when options are available by placing a check in the box
 2. Mark through entire line any prechecked item you **do not** wish to order ~~mark through~~

Attending Physician: _____ Diagnosis: _____
 Observation Status Admission for Inpatient Care Admit or transfer to: _____ Unit

ALLERGIES: NKA **ALLERGIC to:** _____

Weight in kilograms: _____

VITAL SIGNS:

- Vital signs every 5 minutes during procedure; THEN
- Vital signs every 10 minutes x 2 after procedure; THEN
- Vital signs every 30 minutes x 2; THEN
- Vital signs per unit protocol

ACTIVITY:

- Activity as tolerated when awake

DIET:

- NPO
- Resume diet when awake

MEDICATIONS:

- Ketamine** (1-2 mg/kg) _____ mg/kg = _____ mg IV x _____ doses
- Ketamine** (3-5 mg/kg) _____ mg/kg = _____ mg IM x _____ doses
- Propofol (Diprivan)** _____ mg/kg = _____ mg IV x _____ doses
- Propofol (Diprivan)** 100 ml with **Lidocaine 1%** 10 ml (10:1 ratio) _____ mg/kg = _____ mg **Propofol** IV x _____ doses
- Midazolam (Versed)** 0.1 mg/kg = _____ mg IV x _____ doses with patient procedure
- Midazolam (Versed)** (0.25 - 0.5 mg/kg) = _____ mg PO x _____ doses with patient procedure
- Fentanyl (Sublimaze)** (1-2 micrograms/kg) _____ micrograms/kg = _____ micrograms IV x _____ doses with patient procedure
- Other: _____

PATIENT CARE:

- Prepare for insertion of PIV/access port for procedure

RESPIRATORY:

- Oxygen at 2 liters/minute via nasal cannula during procedure
- Continuous pulse oximetry to keep saturation greater than 92%
- Oxygen titration protocol to maintain SAO₂ greater than or equal to 92%, indication: _____
- End tidal CO₂ monitor during procedure and until baseline Aldretti score returns to baseline

COMMUNICATION:

- Discontinue CO₂ monitoring when patient at baseline Aldretti score
- Notify Primary Service when baseline Aldretti score returns to baseline for further orders

ADDITIONAL ORDERS:

Physician _____ Pager _____ Date ____ / ____ / ____ Time: _____
 Verbal Order Verification Signature _____ Date ____ / ____ / ____ Time: _____

Paient Identification