

## STANDING ADMISSION ORDERS ATRIAL FIBRILLATION

**Admitting Physician:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Place in Observation Services:**  Med/Surg  Telemetry  Other: \_\_\_\_\_

**Admit to Inpatient:**  Med/Surg  Telemetry  ICU

**Diagnosis:**  Atrial Fibrillation  Continuous  Paroxysmal  Other: \_\_\_\_\_

**Condition:**  Stable  Guarded  Critical  Good  Fair  Poor

**Consult:**  Cardiology: \_\_\_\_\_  Other: \_\_\_\_\_

**Allergies:**

**Code Status:**  Full  Partial:  Shock  Chemical  Other: \_\_\_\_\_  DNR

**Vital Signs:**  Per unit protocol  Every shift  every \_\_\_\_\_ hours  Other: \_\_\_\_\_

**Activity:**  Bed rest  Up in chair  Bedside commode  Ambulate ad lib  Bathroom privileges

**Nursing:**  
 Daily weight  Intake & Output  Foley to drainage  
 Pulse oximeter  every shift  twice a day  
 Compression Hose (TED)  
 Sequential Compression Device (SCD)  
 Glucose checks AC and at bedtime or every \_\_\_\_\_ hrs  
 Other: \_\_\_\_\_

**Diet:**  Regular  NPO  1 gm low sodium  2 gm low sodium  
 Clear liquid  Full liquid  Low fat, low cholesterol  
 Diabetic: \_\_\_\_\_ kCal ADA  
 Other: \_\_\_\_\_

**Fluids:**  Intravenous: \_\_\_\_\_ @ \_\_\_\_\_ ml/hr  
 Saline lock  
 Other: \_\_\_\_\_

**Oxygen:**  Nasal Cannula \_\_\_\_\_ L/min, adjust to keep O2 sat greater than 92%. May DC if O2 sat greater than 93% on RA.  
 Venti Mask \_\_\_\_\_ % FIO2  100% NRB  
 Other: \_\_\_\_\_

**Labs:**  
 Cardiac enzymes (CPK, CPK-MB, Troponin)  
 BMP  CMP  Magnesium  ABG  
 Fasting lipid profile  TSH  
 Free T4  UA  PT/INR  PT/ PTT  Digoxin level  
 CBC with differential ( ) Now ( ) In AM ( ) Other \_\_\_\_\_  
 CBC without differential ( ) Now ( ) In AM ( ) Other \_\_\_\_\_  
 Check PTT every 6 hrs x 4 then every day  
 Check PTT 6 hrs after each heparin dosage change  
 Other Labs: \_\_\_\_\_

**Studies: (If LVEF less than 40%, implement CHF Protocol)**

C Xray  Portable  PA/Lateral  
 EKG  
 STAT EKG PRN with chest pain or palpitations  
 Echocardiogram  
 24 hour Holter Monitor  
 Other: \_\_\_\_\_

NURSE NOTED	DATE	TIME	DATE / TIME      PHYSICIAN SIGNATURE OR AUTHENTICATION
24 HR. CHART CHECK BY NURSE	DATE	TIME	

 	Account Number:	MR Number:
Patient Name:		
Admit Date:		

 <b>St. Luke's Medical Center</b> 1800 E. Van Buren St. - Phoenix - AZ 85006 (602) 251-8100	DOB	Age	Sex	HT	WT	RM-BD	PT	SVC	FC
	Allergies:								
	Attending Physician Name:								

**Medications: (Check the appropriate box)**

- Diltiazem (Cardizem) 0.25 mg/kg loading dose (max 0.20 mg) IV over 5 minutes, then start drip at 10 mg/hr  
If patient older than 65 years or actual body weight less than 60 kg., reduce loading dose to 15 mg and start drip at 5 mg/hr.
- Diltiazem CD (Cardizem CD)     120     180     240     300 mg PO daily
- Metoprolol (Lopressor)             50     100 mg PO, twice a day
- Metoprolol XL (Toprol XL)         50     100     200 mg PO, every day
- Digoxin (Lanoxin) 0.5 mg IV bolus, followed by 0.25 mg in 6 hrs and 12 hrs. Then  0.125     0.25 mg PO daily.
- Amiodarone (Cordarone) 150 mg in 100ml Dextrose 5% Water IV, infuse  
over 10 minutes, then 1 mg per minute IV for 8 hours then 0.5 mg per minute IV for 18 hrs.
- Flecainide (Tambocor)             50     100     150 mg PO, every 12 hours
- Procainamide (Procan, Procanbid) 15 mg/kg IV loading dose at 20 mg per minutes, then     2     3     4 mg per minute.
- Procainamide (Procan, Procanbid) 500 mg PO every 2 hours x 2 doses, followed by \_\_\_\_\_ mg PO every 12 hours.
- Propofenone (Rythmol)             150     225     300 mg PO, every 8 hours
- Tocainide (Tonocard)             400     800 mg PO, every     8     12 hours
- Ibutilide (Corvert): greater than 60 kg. infuse 1 mg over 10 minutes, repeat if not converted  
less than 60 kg. infuse 0.01 mg/kg over 10 minutes, repeat if non converted.
- Esmolol (Brevibloc) 500 micrograms/kg bolus infused over 1 minute, followed by 50 micrograms/kg per minute maintenance infusion
- Heparin 5,000 units every 8 hrs
- Enoxaparin (Lovenox) 40mg subcutaneous daily
- Warfarin (Coumadin) \_\_\_\_\_mg PO daily
- Lorazepam (Ativan)             0.5     1 mg PO PRN \every 6 hrs as needed for mild to moderate anxiety
- Famotidine (Pepcid) 20 mg         IV         PO twice daily
- Nicotine 21 mg topical patch apply daily

**Protocols: all protocol orders must be placed in chart**

- Heparin Drip Protocol
- Potassium Protocol     IV     PO
- Magnesium Protocol IV
- Insulin suncutaneous Sliding Scale Protocols:     Mild Protocol         Moderate Protocol         Aggressive Protocol

**Standard Medication: (all orders below will be implemented unless crossed out)**

- Acetaminophen (Tylenol) 650 mg PO every 4 hr PRN mild pain or temp greater than 101F
- Percocet 5/325 mg PO every 4 hrs PRN for moderate pain
- Morphine Sulfate 2 mg IV every 4 hr PRN severe pain
- Temazepam (Restoril) 15 mg PO qHS PRN sleep. May repeat dose once in one hour if no results.
- Prochlorperazine (Compazine) 5 mg IV every 6 hr PRN nausea/vomiting
- Docusate sodium (Colace) 100 mg PO qHS
- MOM 30 ml PO PRN contipation
- Maalox 30 ml PO PRN heartburn

**Additional Meds:**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

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