

### STANDING ADMISSION ORDERS HYPERTENSION / HYPERTENSIVE CRISIS

Admitting Physician: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Place in Observation Services:  Med/Surg  Telemetry  Other: \_\_\_\_\_  
 Admit to Inpatient:  Med/Surg  Telemetry  ICU  
 Diagnosis:  Essential Hypertension Uncontrolled  Hypertension Urgency  Hypertensive Crisis  Other: \_\_\_\_\_  
 Condition:  Stable  Guarded  Critical  Good  Fair  Poor  
 Consult:  Cardiology: \_\_\_\_\_  Nephrology: \_\_\_\_\_  
 Other: \_\_\_\_\_  
 Allergies:

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

Vital Signs:  Per unit protocol  Other: \_\_\_\_\_  
 Every \_\_\_\_\_ minutes until Blood Pressure less than \_\_\_\_\_, then every \_\_\_\_\_ hours  every \_\_\_\_\_ hrs  
 Call for SBP greater than \_\_\_\_\_ SBP less than \_\_\_\_\_ DBP greater than \_\_\_\_\_ DBP less than \_\_\_\_\_

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

Nursing:  Daily weight  Intake & Output  
 Sequential Compression Device (SCD)  
 Foley to drainage  
 Pulse oximeter  every shift  twice a day  
 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%. DC if O2 sat greater than 93% on RA  
 Venti Mask \_\_\_\_\_ % FIO2  100% NRB  
 Other: \_\_\_\_\_

Labs:  Cardiac enzymes (CPK, CPK-MB, Troponin)  
 BMP  CMP  Fasting lipid profile  
 TSH  Free T4  UA  Plasma Renin Activity  Plasma Catecholamines  
 24 hr Urine for Metanephrines  
 Urine Drug Screen  
 CBC with differential ( ) Now ( ) In AM ( ) Other \_\_\_\_\_  
 CBC without differential ( ) Now ( ) In AM ( ) Other \_\_\_\_\_  
 Other Labs: \_\_\_\_\_

Studies:  CXray:  Portable  PA/Lateral  
 EKG  
 STAT EKG PRN with chest pain or palpitations  
 Echocardiogram  
 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.**

- Nitroprusside sodium (Nipride 0.5 - 10.0 micrograms/kg/min) \_\_\_\_\_ microgram/kg per minute IV  
Titrated to blood pressure: Systolic \_\_\_\_\_, Diastolic \_\_\_\_\_
- Nitroglycerin (5-100 micrograms/min) \_\_\_\_\_ microgram IV bolus, then \_\_\_\_\_ micrograms/min  
Titrated to blood pressure: Systolic \_\_\_\_\_, Diastolic \_\_\_\_\_
- Labetalol (Trandate, Normodyne) 20 mg IV bolus then:  
  - Start:  40  60  80 mg boluses IV every 10 minutes (max total of 300 mg) OR:
  - Continuous IV infusion of 2 mg per minute
 Titrated to blood pressure: Systolic \_\_\_\_\_, Diastolic \_\_\_\_\_
- Enalapril (Vasotec) IV:  1.25  2.5  5mg IV every 6 hrs. Hold if SBP is less than \_\_\_\_\_ or DBP is less than \_\_\_\_\_.
- Esmolol (Brevibloc) loading dose: 500 micrograms/kg IV over 1 minute, then 50 micrograms/kg per minute  
Titrated by 50 micrograms/kg per minute increments to 200 micrograms/kg per minute  
Titrated to blood pressure: Systolic \_\_\_\_\_, Diastolic \_\_\_\_\_
- Clonidine (Catapres) Initial:  0.1  0.2 mg PO followed by 0.1 mg per hour  
Titrated to blood pressure: Systolic \_\_\_\_\_, Diastolic \_\_\_\_\_
- Hydrochlorothiazide (HydroDiuril)  12.5  25 mg PO daily
- Maxide (Hydrochlorothiazide 25 mg/Triamterene 37.5 mg)  1 tab PO daily
- Lisinopril (Zestril, Prinivil)  2.5  5  10  20  40 mg Daily
- Atenolol (Tenormin) Initial dose 50 mg PO, then:  25  50  100 mg daily
- Losartan (Cozaar)  25  50 mg PO daily
- Diltiazem CD (Cardizen CD)  120  180  240 mg daily
- Amlodipine (Norvasc)  2.5  5  10 mg PO daily
- Lorazepam (Ativan)  0.5  1 mg PO PRN every 6hrs as needed for anxiety
- Famotidine (Pepcid) 20 mg  IV  PO twice daily
- Nicotine 21 mg topical patch apply daily

**Protocols (If available): all protocol orders must be placed in chart**

- Insulin subcutaneous Sliding Scale Protocols:  Mild Protocol  Moderate Protocol  Aggressive Protocol

**Standard Medications: (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 constipation
- Maalox 30 ml PO PRN heartburn

**Additional Meds:**

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

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