



STANDING ADMISSION ORDERS SYNCOPE

Admitting Physician: _____ Date: _____ Time: _____
 Place in Observation Service: Med/Surg Telemetry Other: _____
 Admit to Inpatient: Med/Surg Telemetry ICU
 Diagnosis: Syncope of unknown etiology Other: _____
 Condition: Stable Guarded Critical Good Fair Poor
 Consult: Cardiology: _____] Neurology: _____
 Other: _____

Allergies:

Vital Signs: Per unit protocol Every shift every _____ hours Neuro checks every _____ hours Other: _____

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

Code Status: Full Partial: Shock Chemical Other: _____ DNR

Nursing: Daily weight Intake & Output 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%. 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 Urine drug screen
 ESR ANA RPR
 Fasting lipid profile B12 UA
 CBC with differential () Now () In AM () Other _____
 CBC without differential () Now () In AM () Other _____
 Other Labs: _____

Studies: CXray: Portable PA/Lateral
 EKG 24hr Holter Monitor
 STAT EKG PRN with chest pain or palpitations
 Echocardiogram
 CT Scan Brain With Contrast Without Contrast
 MRI Brain
 EEG
 Bilateral Carotid Doppler
 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:	

 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)

- Aspirin 81 mg 162mg 325mg PO daily
- Lorazepam (Ativan) 0.5mg 1mg PO PRN every 6 hrs as needed for anxiety
- Famotidine (Pepcid) 20mg IV PO twice daily
- Nicotine 21mg topical patch apply daily

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