

Computerized Order Entry Form

Please complete all sections of this page before proceeding to the order sets

Physician: _____ Contact Number: _____
Name

Patient Name: _____
Last First

Medical Record Number: _____ Age: _____

CODE STATUS:

FULL CODE

With Advanced Directive for no prolonged life support

Limited CODE

No Intubation

No Chest Compression

No Defibrillation

No Chest Compression, no Defibrillation

No Intubation, no Defibrillation

No Chest Compression, no Intubation

No Intubation, no Defibrillation, no Chest Compression

NO CODE

Terminal comfort care

CODE STATUS is unobtainable from the patient or family member. An order for FULL CODE has been written pending an ability to obtain a CODE STATUS determination.

OTHER: _____

Stroke Thrombolytic (tPA) Therapy, EB -[KM VERSION]

ICU Stroke - Thrombolytic Therapy

Vitals

- Vital Signs q15 mins x 2 hrs, q30 mins x 6 hrs, then 1 hr x 16 hrs
- Neurological Check q15 mins x 2 hrs, q30 mins x 6 hrs, then 1 hr x 16 hrs
- Nursing Communication For minor bleeding apply pressure over site
- No IM injections, draw labs off pre-existing lines.

Medications

- Avoid antiplatelet and antithrombotic medications for 24 hours after administration of IV tPA infusion [Evidence](#)
- BP control is important before and during thrombolytic therapy. Keep BP BELOW 185/110 [Evidence](#)
 - Notify MD if Systolic Blood Pressure drops below 130.
 - Nursing Communication maintain BP < 185/110 during infusion, if BP not controlled then notify MD immediately.

t-PA [Evidence](#)

- Total t-PA dose to be given: 0.9 mg/kg of body weight- MAXIMUM DOSE SHOULD NOT EXCEED 90mg
 - TPA 100 mg Vial for infusion (recon 1mg/mL) 0.09 milligram/kilogram solution intravenous push once over 1 minute (10% of total as bolus ** Max dose 9 mg ** - Step 1 of 2)
 - TPA 100 mg Vial for infusion (recon 1mg/mL) 0.81 milligram/kilogram solution intravenously give over 1 hour via infusion pump (remaining 90% ** Max dose 81 mg ** - Step 2 of 2)

Date

Time

Physician Signature

Additional Orders

- Nursing Communication For ANY change in neurological status, major bleeding, nausea/vomiting or headache, discontinue TPA infusion and notify MD.
- Nursing Communication no instrumentation or invasive procedures for 24 hours after tPA administration

THROMBOLYTIC COMPLICATIONS

- **For an acute change in neurological condition while on tPA:**

- Stop tPA infusion immediately**

Laboratory

- CBC w/ Diff Stat, nurse collect
- Fibrinogen Stat, Nurse collect
- PT & PTT Stat, nurse collect

Diagnostics

- EKG (Non-EKG Tech)
- CT Head wo Contrast Stat, reason for exam: s/p t-PA, possible ICH

Medications

- Lasix 40mg IV, x1
- mannitol 20% 0.5 gm/kg IV once

Transfuse

- 8 units of cryoprecipitate
- 8 units of platelets

Consults

- Call Neurosurgeon on call

Date

Time

Physician Signature

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Sutter Health
Sacramento Sierra Region

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