

General

Admission Orders (Single Response) (Selection Required)

Do not use Outpatient Observation Services Under General Supervision order for patients who are receiving Outpatient TRIAGE services.

<input checked="" type="checkbox"/> Admit to L&D	Admitting Physician: Diagnosis: Pregnancy Bed request comments: L&D Pre-Delivery
<input type="checkbox"/> Outpatient observation services under general supervision	Diagnosis: Admitting Physician: Patient Condition: Bed request comments: L&D Pre-Delivery

Code Status

<input checked="" type="checkbox"/> Full code	Code Status decision reached by: Patient by means of Oral Directive
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DNR (Do Not Resuscitate) (Selection Required)

<input type="checkbox"/> DNR (Do Not Resuscitate)	Does patient have decision-making capacity? L&D Pre-Delivery
<input type="checkbox"/> Consult to Palliative Care Service	Priority: Reason for Consult? Order? Name of referring provider: Enter call back number:
<input type="checkbox"/> Consult to Social Work	Reason for Consult: L&D Pre-Delivery

<input type="checkbox"/> Modified Code	Does patient have decision-making capacity? Modified Code restrictions: L&D Pre-Delivery
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<input type="checkbox"/> Treatment Restrictions	Treatment Restriction decision reached by: Specify Treatment Restrictions: L&D Pre-Delivery
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Isolation

<input type="checkbox"/> Airborne isolation status	
<input type="checkbox"/> Airborne isolation status	Details
<input type="checkbox"/> Mycobacterium tuberculosis by PCR - If you suspect Tuberculosis, please order this test for rapid diagnostics.	Once, Sputum, L&D Pre-Delivery
<input type="checkbox"/> Contact isolation status	Details
<input type="checkbox"/> Droplet isolation status	Details
<input type="checkbox"/> Enteric isolation status	Details

Precautions

<input type="checkbox"/> Aspiration precautions	L&D Pre-Delivery
<input type="checkbox"/> Fall precautions	Increased observation level needed: On Admission and every 8 hours, L&D Pre-Delivery
<input type="checkbox"/> Latex precautions	L&D Pre-Delivery
<input type="checkbox"/> Seizure precautions	Increased observation level needed: L&D Pre-Delivery

Common Present on Admission Diagnosis

<input type="checkbox"/> Acidosis	L&D Pre-Delivery
<input type="checkbox"/> Acute Post-Hemorrhagic Anemia	L&D Pre-Delivery
<input type="checkbox"/> Acute Renal Failure	L&D Pre-Delivery

<input type="checkbox"/>	Acute Respiratory Failure	L&D Pre-Delivery
<input type="checkbox"/>	Acute Thromboembolism of Deep Veins of Lower Extremities	L&D Pre-Delivery
<input type="checkbox"/>	Anemia	L&D Pre-Delivery
<input type="checkbox"/>	Bacteremia	L&D Pre-Delivery
<input type="checkbox"/>	Bipolar disorder, unspecified	L&D Pre-Delivery
<input type="checkbox"/>	Cardiac Arrest	L&D Pre-Delivery
<input type="checkbox"/>	Cardiac Dysrhythmia	L&D Pre-Delivery
<input type="checkbox"/>	Cardiogenic Shock	L&D Pre-Delivery
<input type="checkbox"/>	Decubitus Ulcer	L&D Pre-Delivery
<input type="checkbox"/>	Dementia in Conditions Classified Elsewhere	L&D Pre-Delivery
<input type="checkbox"/>	Disorder of Liver	L&D Pre-Delivery
<input type="checkbox"/>	Electrolyte and Fluid Disorder	L&D Pre-Delivery
<input type="checkbox"/>	Intestinal Infection due to Clostridium Difficile	L&D Pre-Delivery
<input type="checkbox"/>	Methicillin Resistant Staphylococcus Aureus Infection	L&D Pre-Delivery
<input type="checkbox"/>	Obstructive Chronic Bronchitis with Exacerbation	L&D Pre-Delivery
<input type="checkbox"/>	Other Alteration of Consciousness	L&D Pre-Delivery
<input type="checkbox"/>	Other and Unspecified Coagulation Defects	L&D Pre-Delivery
<input type="checkbox"/>	Other Pulmonary Embolism and Infarction	L&D Pre-Delivery
<input type="checkbox"/>	Phlebitis and Thrombophlebitis	L&D Pre-Delivery
<input type="checkbox"/>	Protein-calorie Malnutrition	L&D Pre-Delivery
<input type="checkbox"/>	Psychosis, unspecified psychosis type	L&D Pre-Delivery
<input type="checkbox"/>	Schizophrenia Disorder	L&D Pre-Delivery
<input type="checkbox"/>	Sepsis	L&D Pre-Delivery
<input type="checkbox"/>	Septic Shock	L&D Pre-Delivery
<input type="checkbox"/>	Septicemia	L&D Pre-Delivery
<input type="checkbox"/>	Type II or Unspecified Type Diabetes Mellitus with Mention of Complication, Not Stated as Uncontrolled	L&D Pre-Delivery
<input type="checkbox"/>	Urinary Tract Infection, Site Not Specified	L&D Pre-Delivery
<input type="checkbox"/>	Present on Admission-History of preterm premature rupture of membranes	L&D Pre-Delivery

Nursing

Vital Signs

<input type="checkbox"/>	Vital signs - T/P/R/BP	Routine, Per unit protocol, L&D Pre-Delivery
<input type="checkbox"/>	Vital signs - T/P/R/BP	Routine, Every 2 hours, L&D Pre-Delivery
<input type="checkbox"/>	Check temperature	Routine, Every 2 hours, L&D Pre-Delivery

Activity

<input type="checkbox"/>	Strict bed rest	Routine, Until discontinued, Starting S, L&D Pre-Delivery
<input type="checkbox"/>	Bed rest with bathroom privileges	Routine, Until discontinued, Starting S Bathroom Privileges: with bathroom privileges Patient to use bedside commode, L&D Pre-Delivery
<input type="checkbox"/>	Bed rest with bathroom privileges	Routine, Until discontinued, Starting S Bathroom Privileges: with bathroom privileges L&D Pre-Delivery
<input type="checkbox"/>	Ambulate with assistance	Routine, 3 times daily Specify: with assistance L&D Pre-Delivery
<input type="checkbox"/>	Activity as tolerated	Routine, Until discontinued, Starting S Specify: Activity as tolerated L&D Pre-Delivery

Nursing Care

<input checked="" type="checkbox"/>	Monitor fetal heart tones	Routine, Once Type: Continuous L&D Pre-Delivery
<input checked="" type="checkbox"/>	Fetal nonstress test	Routine, Every shift, L&D Pre-Delivery

<input checked="" type="checkbox"/> Tocometry	Routine, Until discontinued, Starting S Type: Continuous L&D Pre-Delivery
<input type="checkbox"/> Tocometry	Routine, Every shift Type: L&D Pre-Delivery
<input type="checkbox"/> Insert and maintain Foley	
<input type="checkbox"/> Insert Foley catheter	Routine, Once Type: Size: Urinometer needed:
<input type="checkbox"/> Foley Catheter Care	Routine, Until discontinued, Starting S Orders: Maintain

Diet

<input type="checkbox"/> NPO	Diet effective now, Starting S NPO: Pre-Operative fasting options: L&D Pre-Delivery
<input checked="" type="checkbox"/> NPO with ice chips	Diet effective now, Starting S NPO: Except Ice chips Pre-Operative fasting options: 1/2 cup per hour, L&D Pre-Delivery
<input type="checkbox"/> Diet - Clear liquids	Diet effective now, Starting S Diet(s): Clear Liquids Advance Diet as Tolerated? Liquid Consistency: Fluid Restriction: Foods to Avoid: L&D Pre-Delivery

IV Fluids

Maintenance IV Fluids

<input type="checkbox"/> lactated ringer's infusion	125 mL/hr, intravenous, continuous, L&D Pre-Delivery
<input type="checkbox"/> dextrose 5 % and lactated ringers infusion	125 mL/hr, intravenous, continuous, L&D Pre-Delivery
<input type="checkbox"/> sodium chloride 0.45 % infusion	intravenous, continuous, L&D Pre-Delivery

Peripheral IV Access

<input checked="" type="checkbox"/> Initiate and maintain IV	
<input checked="" type="checkbox"/> Insert peripheral IV	Routine, Once, L&D Pre-Delivery
<input checked="" type="checkbox"/> sodium chloride 0.9 % flush	10 mL, intravenous, every 12 hours scheduled, L&D Pre-Delivery if IV is saline locked
<input checked="" type="checkbox"/> sodium chloride 0.9 % flush	10 mL, intravenous, PRN, line care, L&D Pre-Delivery

Medications

PPROM Antibiotics (Single Response) (Selection Required)

Does your patient have a penicillin allergy?

No (Single Response)

Regimen 1

You MUST check BOTH selections below for Regimen 1

<input type="checkbox"/> azithromycin (ZITHROMAX) tablet	1,000 mg, oral, once, For 1 Doses, L&D Pre-Delivery Administer upon admission. Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/> ampicillin IV Doses Followed by amoxicillin 500 mg Oral Doses for 5 days	"Followed by" Linked Panel
<input type="checkbox"/> ampicillin IV	2 g, intravenous, for 30 Minutes, every 6 hours, L&D Pre-Delivery Reason for Therapy: Medical Prophylaxis

<input type="checkbox"/>	amoxicillin (AMOXIL) capsule	500 mg, oral, 3 times daily, L&D Pre-Delivery Reason for Therapy: Medical Prophylaxis
() Regimen 2 You MUST check BOTH selections below for Regimen 2		
<input type="checkbox"/>	azithromycin (ZITHROMAX) tablet	1,000 mg, oral, once, For 1 Doses, L&D Pre-Delivery Administer upon admission. Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/>	ampicillin IV Doses Followed by amoxicillin 875 mg Oral Doses for 5 days	"Followed by" Linked Panel
<input type="checkbox"/>	ampicillin IV	2 g, intravenous, for 30 Minutes, every 6 hours, L&D Pre-Delivery Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/>	amoxicillin (AMOXIL) tablet	875 mg, oral, 2 times daily, L&D Pre-Delivery Reason for Therapy: Medical Prophylaxis

() Yes (Single Response)
Is your patient LOW Risk or HIGH Risk?

() LOW Risk Patients
You MUST check BOTH selections below for LOW Risk Regimen

<input type="checkbox"/>	azithromycin (ZITHROMAX) tablet	1,000 mg, oral, once, For 1 Doses, L&D Pre-Delivery Administer upon admission. Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/>	ceFAZolin (ANCEF) IV Doses Followed by cephalexin (KEFLEX) 500 mg Oral Doses for 5 days	"Followed by" Linked Panel
<input type="checkbox"/>	cefazolin (ANCEF) IV	1 g, intravenous, every 8 hours, L&D Pre-Delivery Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/>	cephalexin (KEFLEX) capsule	500 mg, oral, every 6 hours, L&D Pre-Delivery Reason for Therapy: Medical Prophylaxis

() HIGH Risk Patients
You MUST check BOTH selections below for the HIGH Risk Regimen.

<input type="checkbox"/>	clindamycin (CLEOCIN) IV Initial Doses Followed By clindamycin (CLEOCIN) Oral Maintenance Doses	"Followed by" Linked Panel
<input type="checkbox"/>	clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, every 8 hours, L&D Pre-Delivery Administer upon admission. Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/>	clindamycin (CLEOCIN) capsule	300 mg, oral, every 8 hours, L&D Pre-Delivery Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/>	gentamicin (GARAMYCIN) IV Doses AND azithromycin (ZITHROMAX) Oral Doses (on admission)	
<input type="checkbox"/>	gentamicin (GARAMYCIN) IVPB 5 mg/kg + Pharmacy Consult	"And" Linked Panel
<input type="checkbox"/>	gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours, For 2 Doses, L&D Pre-Delivery Administer upon admission. Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/>	Pharmacy consult to manage aminoglycoside	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? gentamicin Indication: Premature Rupture of Membranes
<input type="checkbox"/>	azithromycin (ZITHROMAX) tablet	1,000 mg, oral, once, For 1 Doses, L&D Pre-Delivery Administer upon admission. Reason for Therapy: Medical Prophylaxis

Tocolytics

<input type="checkbox"/>	NIFEdipine (PROCARDIA) capsule	10 mg, oral, every 4 hours, L&D Pre-Delivery HOLD parameters for this order: Contact Physician if:
<input type="checkbox"/>	terbutaline (BRETHINE) injection	0.25 mg, subcutaneous, every 20 min, For 3 Doses, L&D Pre-Delivery

Corticosteroids (Single Response)

<input type="checkbox"/> betamethasone (CELESTONE) injection 12 mg Once	12 mg, intramuscular, once, For 1 Doses, L&D Pre-Delivery
<input type="checkbox"/> betamethasone (CELESTONE) injection 12 mg every 12 hours x 2 doses	12 mg, intramuscular, every 12 hours, For 2 Doses, L&D Pre-Delivery
<input type="checkbox"/> betamethasone (CELESTONE) injection 12 mg every 24 hours x 2 doses	12 mg, intramuscular, every 24 hours, For 2 Doses, L&D Pre-Delivery

PRN Medications

PRN Antipyretics

<input type="checkbox"/> acetaminophen (TYLENOL) tablet	oral, every 6 hours PRN, fever, for temperature GREATER than 100.4, L&D Pre-Delivery
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PRN Gastrointestinal Care

<input type="checkbox"/> sennosides-docusate sodium (SENOKOT-S) 8.6-50 mg per tablet	1 tablet, oral, nightly PRN, constipation, L&D Pre-Delivery
<input type="checkbox"/> docusate sodium (COLACE) capsule	100 mg, oral, 2 times daily PRN, constipation, L&D Pre-Delivery
<input type="checkbox"/> alum-mag hydroxide-simeth (MAALOX MAX) 400-400-40 mg/5 mL suspension	30 mL, oral, every 3 hours PRN, indigestion, L&D Pre-Delivery

Antiemetics

<input checked="" type="checkbox"/> ondansetron (ZOFTRAN) IV or Oral (Selection Required)	"Or" Linked Panel
<input checked="" type="checkbox"/> ondansetron ODT (ZOFTRAN-ODT) disintegrating tablet	4 mg, oral, every 8 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if patient is able to tolerate oral medication.
<input checked="" type="checkbox"/> ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
<input type="checkbox"/> promethazine (PHENERGAN) IV or Oral or Rectal	"Or" Linked Panel
<input type="checkbox"/> promethazine (PHENERGAN) 12.5 mg IV	12.5 mg, intravenous, every 6 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral or rectal medication OR if a faster onset of action is required.
<input type="checkbox"/> promethazine (PHENERGAN) tablet	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.
<input type="checkbox"/> promethazine (PHENERGAN) suppository	12.5 mg, rectal, every 6 hours PRN, nausea, vomiting, L&D Pre-Delivery Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.

Insomnia

<input checked="" type="checkbox"/> zolpidem (AMBIEN) tablet	5 mg, oral, nightly PRN, sleep, L&D Pre-Delivery
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VTE

DVT Risk and Prophylaxis Tool (Single Response) (Selection Required)

URL: "\appt1.pdf"

<input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following:
<input type="checkbox"/> LOW Risk of DVT (Selection Required) Low Risk Definition Age less than 60 years and NO other VTE risk factors	
<input type="checkbox"/> Low Risk (Single Response) (Selection Required) <input type="checkbox"/> Low risk of VTE	Routine, Once Low risk: Due to low risk, no VTE prophylaxis is needed. Will encourage early ambulation
<input type="checkbox"/> MODERATE Risk of DVT - Surgical (Selection Required)	

Moderate Risk Definition

Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated.

One or more of the following medical conditions:

CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome

Age 60 and above

Central line

History of DVT or family history of VTE

Anticipated length of stay GREATER than 48 hours

Less than fully and independently ambulatory

Estrogen therapy

Moderate or major surgery (not for cancer)

Major surgery within 3 months of admission

Moderate Risk (Selection Required)

Moderate risk of VTE Routine, Once

Moderate Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis BUT order Sequential compression device **"And" Linked Panel**

Contraindications exist for pharmacologic prophylaxis Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s):

Place/Maintain sequential compression device continuous Routine, Continuous

Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis **"And" Linked Panel**

Contraindications exist for pharmacologic prophylaxis Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s):

Contraindications exist for mechanical prophylaxis Routine, Once
No mechanical VTE prophylaxis due to the following contraindication(s):

enoxaparin (LOVENOX) injection (Single Response) (Selection Required)

enoxaparin (LOVENOX) syringe 40 mg, subcutaneous, daily at 0600, Starting S+1

patients with CrCL LESS than 30 mL/min 30 mg, subcutaneous, daily at 0600, Starting S+1
For Patients with CrCL LESS than 30 mL/min

patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min 30 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1
For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min

patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min 40 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1
For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min

fondaparinux (ARIXTRA) injection 2.5 mg, subcutaneous, daily, Starting S+1
If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min.
This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):

heparin (porcine) injection 5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM

heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs) 5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM
Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.

warfarin (COUMADIN) tablet oral, daily at 1700, Starting S+1
Indication:

Pharmacy consult to manage warfarin (COUMADIN) STAT, Until discontinued, Starting S
Indication:

Mechanical Prophylaxis (Single Response) (Selection Required)

- | | |
|--|--|
| <input type="checkbox"/> Contraindications exist for mechanical prophylaxis | Routine, Once
No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> Place/Maintain sequential compression device continuous | Routine, Continuous |

MODERATE Risk of DVT - Non-Surgical (Selection Required)

Moderate Risk Definition

Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated.

One or more of the following medical conditions:

CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome

Age 60 and above

Central line

History of DVT or family history of VTE

Anticipated length of stay GREATER than 48 hours

Less than fully and independently ambulatory

Estrogen therapy

Moderate or major surgery (not for cancer)

Major surgery within 3 months of admission

Moderate Risk (Selection Required)

- | | |
|---|---------------|
| <input type="checkbox"/> Moderate risk of VTE | Routine, Once |
|---|---------------|

Moderate Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)

- | | |
|--|---------------------------|
| <input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis - Order Sequential compression device | "And" Linked Panel |
|--|---------------------------|

- | | |
|--|---|
| <input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis | Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s): |
|--|---|

- | | |
|--|---------------------|
| <input type="checkbox"/> Place/Maintain sequential compression device continuous | Routine, Continuous |
|--|---------------------|

- | | |
|---|---------------------------|
| <input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis | "And" Linked Panel |
|---|---------------------------|

- | | |
|--|---|
| <input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis | Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s): |
|--|---|

- | | |
|---|--|
| <input type="checkbox"/> Contraindications exist for mechanical prophylaxis | Routine, Once
No mechanical VTE prophylaxis due to the following contraindication(s): |
|---|--|

enoxaparin (LOVENOX) injection (Single Response) (Selection Required)

- | | |
|---|---|
| <input type="checkbox"/> enoxaparin (LOVENOX) syringe | 40 mg, subcutaneous, daily at 1700, Starting S+1 |
| <input type="checkbox"/> patients with CrCL LESS than 30 mL/min | 30 mg, subcutaneous, daily at 1700, Starting S+1
For Patients with CrCL LESS than 30 mL/min |
| <input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min | 30 mg, subcutaneous, every 12 hours at 0900, 2100, Starting S+1
For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min |
| <input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min | 40 mg, subcutaneous, every 12 hours at 0900, 2100, Starting S+1
For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min |

- | | |
|---|--|
| <input type="checkbox"/> fondaparinux (ARIXTRA) injection | 2.5 mg, subcutaneous, daily
If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT), do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min
This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT): |
|---|--|

<input type="checkbox"/>	heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours
<input type="checkbox"/>	heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/>	warfarin (COUMADIN) tablet	oral, daily at 1700 Indication:
<input type="checkbox"/>	Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> HIGH Risk of DVT - Surgical (Selection Required)		
Address both pharmacologic and mechanical prophylaxis by ordering from Pharmacological and Mechanical Prophylaxis.		
<input type="checkbox"/> High Risk (Selection Required)		
<input type="checkbox"/>	High risk of VTE	Routine, Once
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)		
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)		
<input type="checkbox"/>	enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600, Starting S+1
<input type="checkbox"/>	patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600, Starting S+1 For Patients with CrCL LESS than 30 mL/min
<input type="checkbox"/>	patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min
<input type="checkbox"/>	patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/>	fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1 If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/>	heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM
<input type="checkbox"/>	heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/>	warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1 Indication:
<input type="checkbox"/>	Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> HIGH Risk of DVT - Non-Surgical (Selection Required)		
Address both pharmacologic and mechanical prophylaxis by ordering from Pharmacological and Mechanical Prophylaxis.		
<input type="checkbox"/> High Risk (Selection Required)		
<input type="checkbox"/>	High risk of VTE	Routine, Once
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)		
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)		
<input type="checkbox"/>	enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily, Starting S+1
<input type="checkbox"/>	patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily, Starting S+1 For Patients with CrCL LESS than 30 mL/min
<input type="checkbox"/>	patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, every 12 hours at 0900, 2100, Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min

<input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, every 12 hours at 0900, 2100 For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700 Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> HIGH Risk of DVT - Surgical (Hip/Knee) (Selection Required)	
Address both pharmacologic and mechanical prophylaxis by ordering from Pharmacological and Mechanical Prophylaxis.	
<input type="checkbox"/> High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Hip or Knee (Arthroplasty) Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> apixaban (ELIQUIS) tablet	2.5 mg, oral, every 12 hours, Starting S+1 Indications:
<input type="checkbox"/> aspirin chewable tablet	162 mg, oral, daily, Starting S+1
<input type="checkbox"/> aspirin (ECOTRIN) enteric coated tablet	162 mg, oral, daily, Starting S+1
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600, Starting S+1
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1
<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600, Starting S+1 For Patients with CrCL LESS than 30 mL/min.
<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min.
<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients weight between 140 kg or GREATER and CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1 For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1 If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.

<input type="checkbox"/> rivaroxaban (XARELTO) tablet for hip or knee arthroplasty planned during this admission	10 mg, oral, daily at 0600 (TIME CRITICAL), Starting S+1 To be Given on Post Op Day 1. Indications:
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1 Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:

DVT Risk and Prophylaxis Tool (Single Response)

URL: "\appt1.pdf"

<input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following:
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<input type="checkbox"/> LOW Risk of DVT (Selection Required)	
Low Risk Definition Age less than 60 years and NO other VTE risk factors	

<input type="checkbox"/> Low Risk (Single Response) (Selection Required)	
<input type="checkbox"/> Low risk of VTE	Routine, Once Low risk: Due to low risk, no VTE prophylaxis is needed. Will encourage early ambulation

<input type="checkbox"/> MODERATE Risk of DVT - Surgical (Selection Required)	
Moderate Risk Definition Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated. One or more of the following medical conditions: CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome Age 60 and above Central line History of DVT or family history of VTE Anticipated length of stay GREATER than 48 hours Less than fully and independently ambulatory Estrogen therapy Moderate or major surgery (not for cancer) Major surgery within 3 months of admission	

<input type="checkbox"/> Moderate Risk (Selection Required)	
<input type="checkbox"/> Moderate risk of VTE	Routine, Once

<input type="checkbox"/> Moderate Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)	
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<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis BUT order Sequential compression device	"And" Linked Panel
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<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
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<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous
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<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis	"And" Linked Panel
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<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
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<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
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<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
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<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600, Starting S+1
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<input type="checkbox"/> patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600, Starting S+1 For Patients with CrCL LESS than 30 mL/min
<input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min
<input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1 For Patient weight of 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1 If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1 Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:

MODERATE Risk of DVT - Non-Surgical (Selection Required)

Moderate Risk Definition

Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated.

One or more of the following medical conditions:

CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome

Age 60 and above

Central line

History of DVT or family history of VTE

Anticipated length of stay GREATER than 48 hours

Less than fully and independently ambulatory

Estrogen therapy

Moderate or major surgery (not for cancer)

Major surgery within 3 months of admission

Moderate Risk (Selection Required)

Moderate risk of VTE Routine, Once

Moderate Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis - **"And" Linked Panel**
Order Sequential compression device

Contraindications exist for pharmacologic prophylaxis Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s):

Place/Maintain sequential compression device continuous Routine, Continuous

Contraindications exist for pharmacologic prophylaxis **"And" Linked Panel**
AND mechanical prophylaxis

Contraindications exist for pharmacologic prophylaxis Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s):

Contraindications exist for mechanical prophylaxis Routine, Once
No mechanical VTE prophylaxis due to the following contraindication(s):

<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 1700, Starting S
<input type="checkbox"/> patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 1700, Starting S For Patients with CrCL LESS than 30 mL/min
<input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily, Starting S For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min
<input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily, Starting S For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	
	2.5 mg, subcutaneous, daily If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT), do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700 Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:

HIGH Risk of DVT - Surgical (Selection Required)

High Risk Definition

Both pharmacologic AND mechanical prophylaxis must be addressed.

One or more of the following medical conditions:

Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)

Severe fracture of hip, pelvis or leg

Acute spinal cord injury with paresis

Multiple major traumas

Abdominal or pelvic surgery for CANCER

Acute ischemic stroke

History of PE

High Risk (Selection Required)

High risk of VTE Routine, Once

High Risk Pharmacological Prophylaxis - Surgical Patient
(Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s):

enoxaparin (LOVENOX) injection (Single Response)
(Selection Required)

<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600, Starting S+1
<input type="checkbox"/> patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600, Starting S+1 For Patients with CrCL LESS than 30 mL/min
<input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min
<input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min

<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1 If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1 Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous
<input type="checkbox"/> HIGH Risk of DVT - Non-Surgical (Selection Required)	
High Risk Definition Both pharmacologic AND mechanical prophylaxis must be addressed. One or more of the following medical conditions: Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders) Severe fracture of hip, pelvis or leg Acute spinal cord injury with paresis Multiple major traumas Abdominal or pelvic surgery for CANCER Acute ischemic stroke History of PE	
<input type="checkbox"/> High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 1700, Starting S
<input type="checkbox"/> patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 1700, Starting S For Patients with CrCL LESS than 30 mL/min
<input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily, Starting S For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min
<input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily, Starting S For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours

<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700 Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
[] Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous
<input type="checkbox"/> HIGH Risk of DVT - Surgical (Hip/Knee) (Selection Required)	
High Risk Definition Both pharmacologic AND mechanical prophylaxis must be addressed. One or more of the following medical conditions: Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders) Severe fracture of hip, pelvis or leg Acute spinal cord injury with paresis Multiple major traumas Abdominal or pelvic surgery for CANCER Acute ischemic stroke History of PE	
[] High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once
[] High Risk Pharmacological Prophylaxis - Hip or Knee (Arthroplasty) Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> apixaban (ELIQUIS) tablet	2.5 mg, oral, every 12 hours, Starting S+1 Indications:
<input type="checkbox"/> aspirin chewable tablet	162 mg, oral, daily, Starting S+1
<input type="checkbox"/> aspirin (ECOTRIN) enteric coated tablet	162 mg, oral, daily, Starting S+1
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600, Starting S+1
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1
<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600, Starting S+1 For Patients with CrCL LESS than 30 mL/min.
<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min.
<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients weight between 140 kg or GREATER and CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1 For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1 If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):

<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> rivaroxaban (XARELTO) tablet for hip or knee arthroplasty planned during this admission	10 mg, oral, daily at 0600 (TIME CRITICAL), Starting S+1 To be Given on Post Op Day 1. Indications:
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1 Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous

DVT Risk and Prophylaxis Tool (Single Response) (Selection Required)

URL: "\lappt1.pdf"

<input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following:
<input type="checkbox"/> LOW Risk of DVT (Selection Required)	
Low Risk Definition Age less than 60 years and NO other VTE risk factors	

Low Risk (Single Response) (Selection Required)

<input type="checkbox"/> Low risk of VTE	Routine, Once Low risk: Due to low risk, no VTE prophylaxis is needed. Will encourage early ambulation
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MODERATE Risk of DVT - Surgical (Selection Required)

Moderate Risk Definition
Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated.
One or more of the following medical conditions:
CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome
Age 60 and above
Central line
History of DVT or family history of VTE
Anticipated length of stay GREATER than 48 hours
Less than fully and independently ambulatory
Estrogen therapy
Moderate or major surgery (not for cancer)
Major surgery within 3 months of admission

Moderate Risk (Selection Required)

<input type="checkbox"/> Moderate risk of VTE	Routine, Once
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Moderate Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)

<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis BUT order Sequential compression device	"And" Linked Panel
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<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
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<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous
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<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis		"And" Linked Panel
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once	No pharmacologic VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once	No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)		
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600, Starting S+1	
<input type="checkbox"/> patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600, Starting S+1	For Patients with CrCL LESS than 30 mL/min
<input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1	For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min
<input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1	For Patient weight of 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1	If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM	
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM	Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1	Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S	Indication:

MODERATE Risk of DVT - Non-Surgical (Selection Required)

Moderate Risk Definition

Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated.

One or more of the following medical conditions:

CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome

Age 60 and above

Central line

History of DVT or family history of VTE

Anticipated length of stay GREATER than 48 hours

Less than fully and independently ambulatory

Estrogen therapy

Moderate or major surgery (not for cancer)

Major surgery within 3 months of admission

Moderate Risk (Selection Required)

Moderate risk of VTE Routine, Once

Moderate Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis - Order Sequential compression device **"And" Linked Panel**

Contraindications exist for pharmacologic prophylaxis Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s):

<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis	"And" Linked Panel
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/>	enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
<input type="checkbox"/>	enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 1700, Starting S
<input type="checkbox"/>	patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 1700, Starting S For Patients with CrCL LESS than 30 mL/min
<input type="checkbox"/>	patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily, Starting S For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min
<input type="checkbox"/>	patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily, Starting S For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/>	fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT), do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/>	heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours
<input type="checkbox"/>	heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/>	warfarin (COUMADIN) tablet	oral, daily at 1700 Indication:
<input type="checkbox"/>	Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:

HIGH Risk of DVT - Surgical (Selection Required)

High Risk Definition

Both pharmacologic AND mechanical prophylaxis must be addressed.

One or more of the following medical conditions:

Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)

Severe fracture of hip, pelvis or leg

Acute spinal cord injury with paresis

Multiple major traumas

Abdominal or pelvic surgery for CANCER

Acute ischemic stroke

History of PE

High Risk (Selection Required)

High risk of VTE Routine, Once

High Risk Pharmacological Prophylaxis - Surgical Patient
(Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s):

enoxaparin (LOVENOX) injection (Single Response)
(Selection Required)

enoxaparin (LOVENOX) syringe 40 mg, subcutaneous, daily at 0600, Starting S+1

patients with CrCL LESS than 30 mL/min 30 mg, subcutaneous, daily at 0600, Starting S+1
For Patients with CrCL LESS than 30 mL/min

<input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min
<input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1 If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1 Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous
<input type="checkbox"/> HIGH Risk of DVT - Non-Surgical (Selection Required)	
High Risk Definition Both pharmacologic AND mechanical prophylaxis must be addressed. One or more of the following medical conditions: Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders) Severe fracture of hip, pelvis or leg Acute spinal cord injury with paresis Multiple major traumas Abdominal or pelvic surgery for CANCER Acute ischemic stroke History of PE	
<input type="checkbox"/> High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 1700, Starting S
<input type="checkbox"/> patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 1700, Starting S For Patients with CrCL LESS than 30 mL/min
<input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily, Starting S For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min
<input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily, Starting S For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min

<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700 Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
[] Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous
<input type="checkbox"/> HIGH Risk of DVT - Surgical (Hip/Knee) (Selection Required)	
High Risk Definition Both pharmacologic AND mechanical prophylaxis must be addressed. One or more of the following medical conditions: Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders) Severe fracture of hip, pelvis or leg Acute spinal cord injury with paresis Multiple major traumas Abdominal or pelvic surgery for CANCER Acute ischemic stroke History of PE	
[] High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once
[] High Risk Pharmacological Prophylaxis - Hip or Knee (Arthroplasty) Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> apixaban (ELIQUIS) tablet	2.5 mg, oral, every 12 hours, Starting S+1 Indications:
<input type="checkbox"/> aspirin chewable tablet	162 mg, oral, daily, Starting S+1
<input type="checkbox"/> aspirin (ECOTRIN) enteric coated tablet	162 mg, oral, daily, Starting S+1
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600, Starting S+1
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1
<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600, Starting S+1 For Patients with CrCL LESS than 30 mL/min.
<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min.

<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients weight between 140 kg or GREATER and CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1 For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1 If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> rivaroxaban (XARELTO) tablet for hip or knee arthroplasty planned during this admission	10 mg, oral, daily at 0600 (TIME CRITICAL), Starting S+1 To be Given on Post Op Day 1. Indications:
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1 Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s):
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous

Labs

Labs HMH

<input type="checkbox"/> Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/> Surgical pathology request	Collection Date: 9/17/2020 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/> Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input type="checkbox"/> Bedside glucose	Routine, Once, L&D Pre-Delivery
<input type="checkbox"/> OB Panel	
<input type="checkbox"/> Bedside glucose	Routine, Every hour, L&D Pre-Delivery
<input type="checkbox"/> CBC with differential	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> CBC with platelet and differential	AM draw repeats For 3 Days, L&D Pre-Delivery
<input type="checkbox"/> Basic metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/> Hepatitis B surface antigen	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> HIV Ag/Ab combination	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Syphilis total antibody	Once, L&D Pre-Delivery
<input type="checkbox"/> Type and Screen, Obstetrical Patient	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/> Urine dipstick	Once, L&D Pre-Delivery

<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: L&D Pre-Delivery
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/>	LDH	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Fetal Demise Panel	
<input type="checkbox"/>	Antibody screen (gel)	Once
<input type="checkbox"/>	Antithrombin III level	Once, L&D Pre-Delivery
<input type="checkbox"/>	Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/>	Factor V leiden by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hemoglobin A1c	Once
<input type="checkbox"/>	Homocystine, plasma	Once, L&D Pre-Delivery
<input type="checkbox"/>	Kleihauer-Betke	Once
<input type="checkbox"/>	Lupus anticoagulant panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Parvovirus B19 antibody, IgG and IgM	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin mutation, factor II, by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	TSH	Once, L&D Pre-Delivery

Labs HMW, HMSL

<input type="checkbox"/>	Blood gas, arterial, cord	Once, L&D Pre-Delivery
<input type="checkbox"/>	Blood gas, venous, cord	Once, L&D Pre-Delivery
<input type="checkbox"/>	Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/>	Surgical pathology request	Collection Date: 9/17/2020 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/>	Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Bedside glucose	Routine, Once, L&D Pre-Delivery
<input type="checkbox"/>	OB Panel	
<input type="checkbox"/>	Bedside glucose	Routine, Every hour, L&D Pre-Delivery
<input type="checkbox"/>	CBC with differential	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	CBC with platelet and differential	AM draw repeats For 3 Days, L&D Pre-Delivery
<input type="checkbox"/>	Basic metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hepatitis B surface antigen	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	HIV Ag/Ab combination	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Syphilis total antibody	Once, L&D Pre-Delivery

<input type="checkbox"/>	Type and Screen, Obstetrical Patient	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Urine dipstick	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: L&D Pre-Delivery
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/>	LDH	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Fetal Demise Panel	
<input type="checkbox"/>	Antibody screen (gel)	Once
<input type="checkbox"/>	Antithrombin III level	Once, L&D Pre-Delivery
<input type="checkbox"/>	Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/>	Factor V leiden by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hemoglobin A1c	Once
<input type="checkbox"/>	Homocystine, plasma	Once, L&D Pre-Delivery
<input type="checkbox"/>	Kleihauer-Betke	Once
<input type="checkbox"/>	Lupus anticoagulant panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Parvovirus B19 antibody, IgG and IgM	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin mutation, factor II, by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	TSH	Once, L&D Pre-Delivery

Labs HMSJ

<input type="checkbox"/>	Cord blood gas, arterial	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Cord blood gas, venous	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/>	Surgical pathology request	Collection Date: 9/17/2020 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/>	Urine drugs of abuse screen	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Bedside glucose	Routine, Once, L&D Pre-Delivery
<input type="checkbox"/>	OB MAG Panel	
<input type="checkbox"/>	Bedside glucose	Routine, Every hour, L&D Pre-Delivery
<input type="checkbox"/>	CBC with differential	Once
<input type="checkbox"/>	CBC with platelet and differential	AM draw repeats For 3 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Basic metabolic panel	Once
<input type="checkbox"/>	Hepatitis B surface antigen	Once

<input type="checkbox"/>	HIV 1, 2 antibody	Once
<input type="checkbox"/>	Syphilis total antibody	Once
<input type="checkbox"/>	Type and Screen, Obstetrical Patient	Once
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site:
<input type="checkbox"/>	POC urinalysis dipstick	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/>	LDH	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Fetal Demise Panel	
<input type="checkbox"/>	Antibody screen (gel)	Once
<input type="checkbox"/>	Antithrombin III level	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/>	Factor V leiden by PCR	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Hemoglobin A1c	Once
<input type="checkbox"/>	Homocystine, plasma	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Kleihauer-Betke	Once
<input type="checkbox"/>	Lupus anticoagulant panel	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Parvovirus B19 antibody, IgG and IgM	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin mutation, factor II, by PCR	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	STAT For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	TSH	STAT For 1 Occurrences, L&D Pre-Delivery

Labs HMSTJ

<input type="checkbox"/>	Blood gas, arterial, cord	Once, L&D Pre-Delivery
<input type="checkbox"/>	Blood gas, venous, cord	Once, L&D Pre-Delivery
<input type="checkbox"/>	Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/>	Surgical pathology request	Collection Date: 9/17/2020 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/>	Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input type="checkbox"/>	OB MAG Panel	
	Instead of using LAB4120, this order panel uses LAB276.	
<input type="checkbox"/>	Bedside glucose	Routine, Every hour, L&D Pre-Delivery
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	CBC with platelet and differential	AM draw repeats For 3 Occurrences, L&D Pre-Delivery

<input type="checkbox"/>	Basic metabolic panel	Once, L&D Post-Delivery
<input type="checkbox"/>	HIV 1, 2 antibody	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hepatitis B surface antigen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Syphilis total antibody	Once, L&D Pre-Delivery
<input type="checkbox"/>	Type and Screen, Obstetrical Patient	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine dipstick	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: L&D Pre-Delivery
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/>	LDH	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Fetal Demise Panel	
<input type="checkbox"/>	Antibody screen (gel)	Once
<input type="checkbox"/>	Antithrombin III level	Once, L&D Pre-Delivery
<input type="checkbox"/>	Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/>	Factor V leiden by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hemoglobin A1c	Once
<input type="checkbox"/>	Homocystine, plasma	Once, L&D Pre-Delivery
<input type="checkbox"/>	Kleihauer-Betke	Once
<input type="checkbox"/>	Lupus anticoagulant panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Parvovirus B19 antibody, IgG and IgM	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin mutation, factor II, by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	TSH	Once, L&D Pre-Delivery

Labs HMTW

<input type="checkbox"/>	Blood gas, arterial, cord	Once, L&D Pre-Delivery
<input type="checkbox"/>	Blood gas, venous, cord	Once, L&D Pre-Delivery
<input type="checkbox"/>	Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/>	Surgical pathology request	Collection Date: 9/17/2020 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/>	Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Bedside glucose	Routine, Once, L&D Pre-Delivery
<input type="checkbox"/>	OB MAG Panel	
<input type="checkbox"/>	Bedside glucose	Routine, Every hour, L&D Pre-Delivery

<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	CBC with platelet and differential	AM draw repeats For 3 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Basic metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hepatitis B surface antigen	Once, L&D Pre-Delivery
<input type="checkbox"/>	HIV 1, 2 antibody	Once, L&D Pre-Delivery
<input type="checkbox"/>	Syphilis total antibody	Once, L&D Pre-Delivery
<input type="checkbox"/>	Type and Screen, Obstetrical Patient	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: L&D Pre-Delivery
<input type="checkbox"/>	POC urinalysis dipstick	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/>	LDH	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Fetal Demise Panel	
<input type="checkbox"/>	Antibody screen (gel)	Once
<input type="checkbox"/>	Antithrombin III level	Once, L&D Pre-Delivery
<input type="checkbox"/>	Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/>	Factor V leiden by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hemoglobin A1c	Once
<input type="checkbox"/>	Homocystine, plasma	Once, L&D Pre-Delivery
<input type="checkbox"/>	Kleihauer-Betke	Once
<input type="checkbox"/>	Lupus anticoagulant panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Parvovirus B19 antibody, IgG and IgM	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin mutation, factor II, by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	TSH	Once, L&D Pre-Delivery

Labs HMWB

<input type="checkbox"/>	Rubella antibody, IgG	Once, L&D Pre-Delivery
<input type="checkbox"/>	Surgical pathology request	Collection Date: 9/17/2020 Collection Time: Surgical Specimen: Gestational Age: Specimen Site: Number of specimens: Malignancy: Irradiation: Specimen Status: Chemotherapy: Hormonal Therapy: Clinical History: Pre-Operative Diagnosis: Procedure Type: L&D Pre-Delivery
<input type="checkbox"/>	Urine drugs of abuse screen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Bedside glucose	Routine, Once, L&D Pre-Delivery
<input type="checkbox"/>	OB Panel	
<input type="checkbox"/>	Bedside glucose	Routine, Every hour, L&D Pre-Delivery

<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	CBC with platelet and differential	AM draw repeats For 3 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Basic metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	HIV 1, 2 antibody	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hepatitis B surface antigen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once, L&D Pre-Delivery
<input type="checkbox"/>	Type and Screen, Obstetrical Patient	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine dipstick	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: L&D Pre-Delivery

<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, L&D Pre-Delivery
<input type="checkbox"/>	Comprehensive metabolic panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Uric acid	Once, L&D Pre-Delivery
<input type="checkbox"/>	LDH	Once, L&D Pre-Delivery
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, L&D Pre-Delivery

<input type="checkbox"/>	Fetal Demise Panel	
<input type="checkbox"/>	Antibody screen (gel)	Once
<input type="checkbox"/>	Antithrombin III level	Once, L&D Pre-Delivery
<input type="checkbox"/>	Cardiolipin antibodies	Once, L&D Pre-Delivery
<input type="checkbox"/>	Factor V leiden by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Fibrinogen	Once, L&D Pre-Delivery
<input type="checkbox"/>	Hemoglobin A1c	Once
<input type="checkbox"/>	Homocystine, plasma	Once, L&D Pre-Delivery
<input type="checkbox"/>	Kleihauer-Betke	Once
<input type="checkbox"/>	Lupus anticoagulant panel	Once, L&D Pre-Delivery
<input type="checkbox"/>	Parvovirus B19 antibody, IgG and IgM	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin mutation, factor II, by PCR	Once, L&D Pre-Delivery
<input type="checkbox"/>	Partial thromboplastin time	Once, L&D Pre-Delivery
<input type="checkbox"/>	Prothrombin time with INR	Once, L&D Pre-Delivery
<input type="checkbox"/>	TSH	Once, L&D Pre-Delivery

Bedside glucose

<input type="checkbox"/>	Bedside glucose - every 1 hour	Routine, Every hour, Starting S For Until specified
<input type="checkbox"/>	Bedside glucose - every 2 hours	Routine, Every 2 hours, Starting S For Until specified
<input type="checkbox"/>	Bedside glucose - every 4 hours	Routine, Every 4 hours, Starting S For Until specified

Microbiology

<input type="checkbox"/>	Wet prep	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	POC wet mount, vaginal	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	KOH prep	Once For 1 Occurrences, L&D Pre-Delivery
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once For 1 Occurrences Specimen Source: Urine Specimen Site: L&D Pre-Delivery

24 Hour urine

<input type="checkbox"/>	24 Hour urine	
<input type="checkbox"/>	Creatinine clearance, urine, 24 hour	Once, L&D Pre-Delivery
<input type="checkbox"/>	Protein, urine, 24 hour	Once, L&D Pre-Delivery

Urine Creatinine and Protein

Urine Protein and Creatinine

Creatinine level, urine, random Once For 1 Occurrences, L&D Pre-Delivery

Protein, urine, random Once For 1 Occurrences, L&D Pre-Delivery

STI Screen

Sexually Transmitted Infections

Chlamydia trachomatis by PCR
Once
Urine is the only acceptable source for patients less than or equal to 13 years old. Specimen source: Urine
Specimen Source:
Specimen Site:
L&D Pre-Delivery

Neisseria gonorrhoeae by PCR
Once
Urine is the only acceptable source for patients less than or equal to 13 years old. Specimen source: Urine
Specimen Source:
Specimen Site:
L&D Pre-Delivery

Magnesium and D-dimer

D-dimer Once, L&D Pre-Delivery

Magnesium level Once, L&D Pre-Delivery

Consults

For Physician Consult orders use sidebar

Physician Consults

Consult Anesthesiology
Reason for Consult?
Patient/Clinical information communicated?
Patient/clinical information communicated?
L&D Pre-Delivery

Consult Maternal and Fetal Medicine
Reason for Consult?
Patient/Clinical information communicated?
Patient/clinical information communicated?
L&D Pre-Delivery

Consult Neonatology
Reason for Consult?
Patient/Clinical information communicated?
Patient/clinical information communicated?
L&D Pre-Delivery

Ancillary consults

Consult to PT eval and treat
Reasons for referral to Physical Therapy (mark all applicable):
Are there any restrictions for positioning or mobility?
Please provide safe ranges for HR, BP, O2 saturation(if values are very abnormal):
Weight Bearing Status:
L&D Pre-Delivery

Consult to Social Work
Reason for Consult:
L&D Pre-Delivery

Consult to Spiritual Care
Reason for consult?
L&D Pre-Delivery