



Emergency Medicine

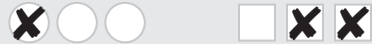
# Transition Admission Orders

use only when diagnosis-specific standing admission orders not applicable

Draw a line through, initial and date all changes.

If generically equivalent medication is not acceptable., then write "brand necessary."

Circles: one and only one. Squares: one, many, or none.



### Admit

To (unit):   
Attending:

Nonmonitored  Full Code   
Monitored  See attached Code Status

### Diagnoses (surgery: type/date)

### Condition

Stable  Serious  Critical

### Allergies (include reaction if known)

Allergies    
No known drug allergies

### Vital Signs

Q shift  Q4H  QID  BID

### Activity

Ad lib  BR w assist  Bed Rest  Ambulate daily as tolerated

### Nursing/Ancillary Staff Orders

Intake and output  Neuro check Q4H  O<sub>2</sub>:  LPM via  Wean to keep O<sub>2</sub> sat ≥  %   
Daily weights  Continuous pulse oximetry

### Diet

Regular  ADA 1800 Calorie  Cardiac rehab  NPO p midnight  NPO

### IV

PRN angiocath  D<sub>5</sub>0.45%NS+20mEq KCl/L at 100mL/Hr

PA  CRNP  Resident

ED attending physician (not required)

Inpatient attending verifies (required)

Sign:   
.....

Sign:   
.....

Sign:   
.....

Print Last Name:

Print Last Name:

Print Last Name:

Date:  Time:

Date:  Time:

Date:  Time:



Emergency Medicine

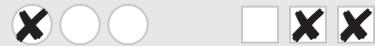
# Transition Admission Orders

use only when diagnosis-specific standing admission orders not applicable

Draw a line through, initial and date all changes.

If generically equivalent medication is not acceptable., then write "brand necessary."

Circles: one and only one. Squares: one, many, or none.



### Medications

Insulin

See attached *Routine Adult Subcutaneous Insulin Orders*

See attached *Adult Sliding Scale Subcutaneous Insulin Orders*

See attached *Insulin Infusion Orders/Adult Patients (not for DKA; for DKA use DKA orders)*

Analgesics

Acetaminophen 650 mg PO Q4H prn pain

Other critical medications (routine daily medications go on regular order sheet)


### Labs/Tests

### Notify Physician

if O2 saturation <92%

if systolic BP <90 or >180

if temp >101°F

if significant change in patient condition

or diastolic BP >100   
if respirations >30 or <10

(38.4°C)

### Consults

### Education/Other

Provide educational materials for

smoking cessation

CHF

diabetic diet

### Admission Status

These orders by DEM physician; must be verified with attending physician by following 9 AM. Call this physician for changes in patient condition, or if further orders needed:

CRNP/PA orders require attending cosignature.\*

covering physician

notified at (time)

PA\*  CRNP\*  Resident

ED attending physician (not required for resident signature)

Inpatient attending verifies (required)

Sign:

Sign:

Sign:

Print Last Name:

Print Last Name:

Print Last Name:

Date:  Time:

Date:  Time:

Date:  Time: