

UMC Health System NICU SEPSIS EVALUATION	Patient Label Here
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PHYSICIAN ORDERS

Diagnosis _____

Weight _____ **Allergies** _____

Place an "X" in the Orders column to designate orders of choice AND an "x" in the specific order detail box(es) where applicable.

ORDER ORDER DETAILS

Patient Care

Set Up for Lumbar Puncture

POC Blood Sugar Check

Dietary

NPO Diet

IV Solutions

Continuous Fluids

D10W
 IV, mL/hr

D10W-heparin (D10W-heparin 0.25 units/mL)
 250 mL final vol, IV, mL/hr
Final concentration: D10W with heparin 0.25 units/mL

D10W-1/2 NS (D10W-1/2 NS 250 mL)
 250 mL final vol, IV, mL/hr

D10W-1/2NS-heparin (D10W-1/2NS-heparin 0.25 units/mL)
 IV, mL/hr

Medications

Medication sentences are per dose. You will need to calculate a total daily dose if needed.

PMA - LESS than or EQUAL to 29 weeks
nafcillin (nafcillin (NICU))
 25 mg/kg, IVsyr, syringe, q12h, x 36 hr, [Postnatal 0 to 28 days], Sepsis - empiric therapy
 25 mg/kg, IVsyr, syringe, q8h, x 36 hr, [Postnatal GREATER than 28 days], Sepsis - empiric therapy

PMA - 30 to 36 weeks
nafcillin (nafcillin (NICU))
 25 mg/kg, IVsyr, syringe, q12h, x 36 hr, [Postnatal 0 to 14 days], Sepsis - empiric therapy
 25 mg/kg, IVsyr, syringe, q8h, x 36 hr, [Postnatal GREATER than 14 days], Sepsis - empiric therapy

PMA - 37 to 44 weeks
nafcillin (nafcillin (NICU))
 25 mg/kg, IVsyr, syringe, q12h, x 36 hr, [Postnatal 0 to 7 days], Sepsis - empiric therapy
 25 mg/kg, IVsyr, syringe, q8h, x 36 hr, [Postnatal GREATER than 7 days], Sepsis - empiric therapy

PMA - GREATER than or EQUAL to 45 weeks
nafcillin (nafcillin (NICU))
 25 mg/kg, IVsyr, syringe, q6h, x 36 hr, [Postnatal days - ALL], Sepsis - empiric therapy

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PMA - LESS than or EQUAL to 29 weeks

TO **Read Back**

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Order Taken by Signature: _____ Date _____ Time _____

Physician Signature: _____ Date _____ Time _____



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PHYSICIAN ORDERS

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ORDER	ORDER DETAILS
	gentamicin (gentamicin neonatal) <input type="checkbox"/> 5 mg/kg, IVsyr, syringe, q48h, x 36 hr, [Postnatal 0 to 7 days], Sepsis - empiric therapy <input type="checkbox"/> 4 mg/kg, IVsyr, syringe, q36h, x 36 hr, [Postnatal 8 to 28 days], Sepsis - empiric therapy <input type="checkbox"/> 4 mg/kg, IVsyr, syringe, q24h, x 36 hr, [Postnatal GREATER than or EQUAL to 29 days], Sepsis - empiric therapy
	PMA - 30 to 34 weeks gentamicin (gentamicin neonatal) <input type="checkbox"/> 4.5 mg/kg, IVsyr, syringe, q36h, x 36 hr, [Postnatal 0 to 7 days], Sepsis - empiric therapy <input type="checkbox"/> 4 mg/kg, IVsyr, syringe, q24h, x 36 hr, [Postnatal GREATER than or EQUAL to 8 days], Sepsis - empiric therapy
	PMA - GREATER than or EQUAL to 35 weeks gentamicin (gentamicin neonatal) <input type="checkbox"/> 4 mg/kg, IVsyr, syringe, q24h, x 36 hr, [Postnatal days - ALL], Sepsis - empiric therapy
Laboratory	
	CBC with Differential
	Procalcitonin Level
	Culture Blood (Blood Culture) <input type="checkbox"/> Blood, STAT, for 1 times
	Culture Blood (Blood Culture) <input type="checkbox"/> Blood, STAT, for 1 times
	Culture Urine (Urine Culture)
	Culture Respiratory with Gram Stain
	Urinalysis (UA)
	Respiratory Panel by PCR
	Culture Blood (Blood Culture) <input type="checkbox"/> Blood, Routine, T;N
	Culture Blood (Blood Culture) <input type="checkbox"/> Blood, Routine, T;N
	Culture CSF with Gram Stain
	CSF Glucose Level
	CSF Protein
	CSF Cell Count and Differential
	HSV 1.2 by PCR (CSF HSV 1.2 by PCR)
	HSV 1.2 by PCR (CSF HSV 1.2 by PCR) <input type="checkbox"/> Label Comment Use one swab, swab one eye, one nare & the rectum
	HSV DNA Texas Children's Hospital
	Herpes Simplex Virus 1 and 2 DNA by PCR
Diagnostic Tests	

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Physician Signature: _____ Date _____ Time _____



PHYSICIAN ORDERS

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ORDER	ORDER DETAILS
	DX Chest Single View
	DX Abdomen AP (KUB)
Respiratory	
	Capillary Blood Gas (CBG)
	Arterial Blood Gas (ABG with Lactate)

TO Read Back

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Physician Signature: _____ Date _____ Time _____

