UMC Health System STROKE NEW ONSET PLAN		Patient Label Here			
		N ORDERS			
	is				
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 POC Blood Sugar Check ONE TIME				
	Nursing Swallowing Screen Perform prior to PO intake. If pt fails swallow screening order Swallow Evaluation by Speech Language Pathology.				
	Communication				
	Notify Nurse (DO NOT USE FOR MEDS)				
	Notify Provider (Misc) IND Notify Primary Team, Reason: Signs and Symptoms of Stroke				
	Notify Nurse (DO NOT USE FOR MEDS) Complete a Stroke Scale at onset of symptoms, at discharge, and with any change in neuro status.				
	Notify Provider of VS Parameters (Notify Provider if VS) Temp Greater Than 101, RR Greater Than 24, RR Less Than 10, SpO2 Less Than 94, SBP Greater Than 220, SBP Less Than 120, DBP Greater Than 120, DBP Less Than 60, HR Greater Than 120, HR Less Than 50				
	Notify Provider (Misc) Reason: Deterioration of neurological status, problems swallowing, or signs of bleeding.				
	Laboratory				
	CBC with Differential				
	Comprehensive Metabolic Panel				
	Prothrombin Time with INR				
	PTT STAT				
	Urinalysis				
	Perform pregnancy test if patient is premenopausal female				
	Beta HCG Serum Qualitative				
	Diagnostic Tests				
	EKG-12 Lead				
	CT Head w/o				
🗆 то	Read Back	Scanned Powerchart	Scanned PharmScan		
Order Taken by Signature:			Time		
Physician Signature:		Date	Time		



UMC Health System		Pa	tient Label Here		
STROKE NEW ONSET PLAN					
	PHYSICIA				
	Place an "X" in the Orders column to designate orders of choice AN	D an "x" in the specific ord	er detail box(es) where applicable.		
ORDER	ORDER DETAILS				
	DX Chest PA & Lateral STAT, Code Stroke Protocol				
	CT Head, Neck Angiography STAT, Code Stroke Protocol				
	VL Carotid Duplex (Vascular Lab)				
	Physical Medicine and Rehab				
	Consult Speech Therapy for Eval & Treat Other, Stroke New Onset Evaluation				
	Consult PT Mobility for Eval & Treat				
	Consult Occ Therapy for Eval & Treat				
	Consults/Referrals				
	Consult MD Service: Neurology, Reason: Possible New Onset of Stroke within 3 hours				
🗆 то	Read Back	Scanned Powerchart	Scanned PharmScan		
Order Taken by Signature:		Date	Time		
Physician Signature:		Date	Time		

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