COOLEY DICKINSON HOSPITAL massachusetts general hospital affiliate		(Patient Sticker)
PHYSICIAN ORDER SET : PROVIDER CUSTOMIZABLE		
CDH 208-263 – Approved - H	Page 1 of 4	
Patient:	DOB:	Gender:
Patient Phone #:	_ Height:	Weight:
Diagnosis:	ICD-10 Code:	
Treatment Start Date:		
Provider Facility Name:	Provider Facility Addres	SS:
Ordering Provider:	Date:	
Signature:		
Complete, sign, and fax this document t	o: CDH Central Scheduling at	413-582-2183.
**Please include H&P/ current medications list/ allergie For Blood Transfusions, please ensur		
Medication Orders:	e that signed consent has bee	en obtained.
Lab Orders:		
Other Orders:		



(Patient Sticker)

PHYSICIAN ORDER SET : PROVIDER CUSTOMIZABLE

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CDH 208-263 -

Page 2 of 4

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	Dose	Interval	Defer Until	Duration	
Line Access		PRN		Until discont'	
Routine					
As needed. Until Specified. Insert peripheral IV, or access periphera		-	to provide treatment.		
alteplase (CATHFLO) 1 mg/mL injection 2 mg	2 mg	PRN		Until discont'	
2 mg, Intracatheter, As needed, line care					
For central venous access device requiring clearance. Administer p	er institutional guid		at once per lumen.		
lidocaine-prilocaine (EMLA) cream		PRN		Until discont'	
Topical, As needed, pre procedure/treatment, apply prior to the PIV	insertion or port ac	cess			
heparin 100 units/mL flush 5 mL	5 mL	PRN		Until discont'	
5 mL, Intravenous, As needed, line care, Line care per institutional g	guidelines				
heparin 10 units/mL flush 3 mL	3 mL	PRN		Until discont'	
3 mL, Intravenous, As needed, line care, Line care per institutional g	guidelines				
heparin 10 units/mL flush 5 mL	5 mL	PRN		Until discont'	
5 mL, Intravenous, As needed, line care, Line care per institutional g	-				
heparin 1000 units/mL flush 2 mL	2 mL	PRN		Until discont'	
2 mL, Intracatheter, As needed, line care, APHERESIS LINE CARE ONLY per institutional policy. HEPARIN MUST BE WITHDRAWN FROM EACH LUMEN PRIOR TO FLUSHING OR INFUSING THROUGH THE APHERESIS CATHETER					
sodium chloride (NS) 0.9 % syringe flush 3 mL	3 mL	PRN		Until discont'	
3 mL, Intravenous, As needed, line care, Line care per institutional g	guidelines				
sodium chloride (NS) 0.9 % syringe flush 10 mL	10 mL	PRN		Until discont'	
10 mL, Intravenous, As needed, line care, Line care per institutional	guidelines				
sodium chloride (NS) 0.9 % syringe flush 20 mL	20 mL	PRN		Until discont	
20 mL, Intravenous, As needed, line care, Line care per institutional	guidelines				
sodium chloride 0.9% infusion	20 mL/hr	PRN		Until discont'	
20 mL/hr, Intravenous, Continuous PRN, other (free text field), Keep	vein open to provi	de treatment			
D5W infusion	20 mL/hr	PRN		Until	

20 mL/hr, Intravenous, Continuous PRN, other (free text field), Keep vein open to provide treatment

COOLEY DICKINSON HOSPITAL massachusetts general hospital affiliate		(Patient Sticker)
PHYSICIAN ORDER PROVIDER CU	-	
CDH 208-263 – Appro	oved - Page 3 of 4	

Emergency Medications/Anaphylaxis

Provider and Nurse Communication PRN Until Routine Treatment of SEVERE reaction (ANAPHYLAXIS): hypotension, throat swelling, wheezing, respiratory distress, or decreased oxygen as needed, monitor vital signs and proceed with administering adjunct HYPERSENSITIVITY medications as clinically indicated. Until EPINEPHrine injection 0.3 mg .3 mg PRN Until 0.3 mg, Intranuscular, As needed, anaphylaxis, Administer FIRST for anaphylaxis. May repeat times 1 dose For 2 doses. Pharmacy's Suggested Dose Instructions; Epinephrine 1:1000 is equivalent to 1 mg/mL Until sodium chloride 0.9% bolus 1,000 mL 1000 mL PRN Until 1,000 mL, Intravenous, Once as needed, other (free text field), Hypotension PRN Until 1,000 mL, Intravenous, Once as needed, other (free text field), Hypotension PRN Until 1,000 mL, Intravenous, Once as needed, other (free text field), Hypotension PRN Until Routine Select a Mode of Therapy: Non-Rebreather PRN Until reaction free Treatment for mild-moderate infusion reaction: Stop the infusion, notify provider and emergency personnel, administer oxygen as needed, monitor vital signs and proceed with administering medications as clinically indicated. If ANAPHYLAXIS reaction: Vertications as clinically indicated. If ANAPHYLAXIS			Dose	Interval	Defer Until	Duration	
Treatment of SEVERE reaction (ANAPHYLAXIS): httpstonsion, throat swelling, wheating, respirationy distress, or decreased oxygen as needed, menitori vital signs and proceed with administering adjunct HYPERSENSTITUTY medications as chically indicated. Until discontinues EFINEPHrine injection 0.3 mg .3 mg PRN Until discontinues 0.3 mg, Intramuscular, As needed, anaphylaxis, Administer FIRST for anaphylaxis, May repeat times 1 dose For 2 doses, Pharmacy's Suggested Dose Instructions; Epinephrine 1:1000 is equivalent to 1 mg/mL Until discontinues 0.3 mg, Intramuscular, As needed, other (free text field), Hypotension PRN Until discontinues 1,000 mL, Intravenous, Once as needed, other (free text field), Hypotension PRN Until discontinues 0.3 mg, intramuscular, As needed, other (free text field), Hypotension PRN Until discontinues 1,000 mL, Intravenous, Once as needed, other (free text field), Hypotension PRN Until discontinues Routine Select a Mode of Therapy: Non-Rebreather PRN Until discontinues repersensitivity Interval Defer Until Duration In exotine Select a Mode of Therapy: Non-Rebreather PRN Until discontinues repersensitivity Interval Defer Until Duration In albuterol (ACCUNEB) nebulizer solution 2.5 mg 2.5 mg		Provider and Nurse Communication			20101 01111		
oxygen saturation. Stop the infusion and treat with spinephrine FIRST. Notify provider and emergency personnel, administer administer oxygen so needed, monitor vital signs and proceed with administering adjunct HYPERSENSITIVITY medications as cinically indicated. Until 0.3 mg, Intramuscular, As needed, anaphylaxis, Administer FIRST for anaphylaxis. May repeat times 1 dose For 2 dose. Pharmagy's Suggested Dose Instructions; Epinephrine 1:1000 is equivalent to 1 mg/mL Until osadium chloride 0.9% bolus 1,000 mL 1000 mL PRN Until 1,000 mL, Intravenous, Once as needed, other (free text field), Hypotension Until discont Oxygen Therapy - Non-Rebreather PRN Until Routine Select a Mode of Therapy: Non-Rebreather PRN Until resensitivity Dose Interval Defer Until Duration reatment for mild-moderate infusion reaction: Stop the infusion, notify provider and emergency personnel, administer oxygen as needed, monitor wild signs and proceed with administering medications as clinically indicated. If ANAPHYLAXIS reaction, section. Interval Defer Until Duration albuterol (ACCUNEB) nebulizer solution 2.5 mg 2.5 mg PRN Until discont .2 sing, Oral, Once as needed, twere .25 mg, Intravenous, As needed, itching, itching, hives. Begin with 25 mg. If patient has continued reaction, administer additional 25		Routine					
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For 2 doses. Pharmacy's Suggested Dose Instructions; Epinephrine 1:1000 is equivalent to 1 mg/mL Image: Sodium chloride 0.9% bolus 1,000 mL 1000 mL PRN Until discont 1.000 mL, Intravenous, Once as needed, other (free text field), Hypotension PRN Until discont Oxygen Therapy - Non-Rebreather PRN Until discont Routine Select a Mode of Therapy: Non-Rebreather PRN Until discont /persensitivity Dose Interval Defer Until Duration Routine Freedmant Nurse Communication PRN Until discont Routine Treatment for mild-moderate influsion reaction: Stop the influsion, notify provider and emergency personnel, administer oxygen as needed, monitor vital signs and proceed with administering medications as clinically indicated. If ANAPHYLAXIS reaction, refer to Emergency Medications section. Until discont albuterol (ACCUNEB) nebulizer solution 2.5 mg 2.5 mg PRN Until discont .5 mg, Nebulization, Once as needed, wheezing, shortness of breath Until discont discont .5 mg, Intravenous, As needed, itching, itching, hives. Begin with 25 mg. If patient has continued reaction, administer additional 25 mg PRN Until discont .25 mg, Intravenous, As needed, other (free text field), Adjunct treatment for mild-moderate, or SEVERE reaction Hold if: given as preemded. 20		EPINEPHrine injection 0.3 mg	.3 mg	PRN		Until discont'o	
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			10 mg	PRN		Until	
			ionig	1 1 1 1 1			

10 mg, Oral, Once as needed, other (free text field), Adjunct treatment for mild-moderate, or SEVERE reaction. HOLD IF: given fexofenadine.

COOLEY DICKINSON HOSPITAL massachusetts general hospital affiliate	(Patient Sticker)
PHYSICIAN ORDER SET : PROVIDER CUSTOMIZABLE	
CDH 208-263 – Approved - Page 4 of 4	

Hypersensitivity (continued)

	Dose	Interval	Defer Until	Duration
fexofenadine (ALLEGRA) tablet 180 mg	180 mg	PRN		Until discont'd
180 mg, Oral, Once as needed, allergies, Adjunct treatment for mild-mod HOLD IF: given cetirizine.	derate, or SEVI	ERE reaction.		
methylprednisolone sodium succinate (SOLU-Medrol) IV 40 mg 40 mg, Intravenous, Once as needed, other (free text field), Adjunct treat		PRN moderate, or SEVE	RE reaction	Until discont'd
ondansetron (ZOFRAN) injection 4 mg 4 mg, Intravenous, As needed, nausea, vomiting, may repeat x 1 dose	4 mg	PRN		Until discont'd
meperidine (DEMEROL) injection 25 mg	25 mg	PRN		Until discont'd

25 mg, Intravenous, Once as needed, rigors

Contraindicated in patients receiving MAO inhibitors within 14 days. Caution in renal or hepatic impairment: Reduce dose since accumulation of meperidine and its active metabolite (normeperidine) may occur.

version 3/7/2019