



**CULLMAN**  
REGIONAL

## PHYSICIAN'S ORDERS

NAME:  
ROOM NO:  
(ADDRESS)  
HOSP. NO.  
PHYSICIAN

Another brand of drug identical in form and content may be dispensed unless checked. ☐

### Croup, Croup with Stridor Pediatric Order Set

Admit to Dr. \_\_\_\_\_ ☐ Admit Inpatient ☐ Place in Observation Services

Dx: Croup, Stridor

Vitals: ☐ Per floor routine ☐ Daily weights ☐ Strict I&O ☐ Prefense Monitor

Nursing: Page MD for worsening respiratory distress, stridor, or any acute changes.

Diet: ☐ Toddler ☐ Breastfeeding/Formula of choice Po ad lib ☐ NPO

IV Fluids: ☐ \_\_\_\_\_ ☐ KVO ☐ Saline Lock

Meds: ☐ Dexamethasone 0.6 mg/Kg ( \_\_\_\_\_ mg) x 1 dose IM/Po  
☐ Racemic Epinephrine nebulizer 0.5 ml inhaled q 2 hours PRN Stridor  
☐ Tylenol \_\_\_\_\_ mg (15 mg/Kg/dose) Po/PR q 4 hours PRN temp  $\geq 100.4$   
☐ Motrin \_\_\_\_\_ mg (10 mg/Kg/dose) Po/PR q 6 hours PRN temp  $\geq 100.4$  not relieved by Tylenol  
• Saline nose spray with bulb suction to bedside for PRN use  
☐ Other: \_\_\_\_\_

Labs: ☐ Rapid Flu Swab  
☐ Rapid Respiratory Syncytial Virus (RSV) Swab  
☐ CBC with auto Diff  
☐ Other: \_\_\_\_\_

Imaging: ☐ Portable PA & Lateral CXR – Dx: Respiratory Distress  
☐ Portable PA & Lateral Airway Films – Dx: Respiratory Distress  
☐ Other: \_\_\_\_\_

Other: • Droplet Precautions

MD Signature: \_\_\_\_\_ Date/Time: \_\_\_\_\_

Created: 01/20/15

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**DO NOT USE: U IU QD QOD MS MSO4 MgSO4**