PHYSICIAN'S ORDERS



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

Another brand of drug identical in form and content may be dispensed unless checked.
Cardiovascular Services Order Set
• 12 Lead ECG
Tylenol two 325 mg tab Po once for pain
Benadryl 25 mg IV PRN rash or itching
Triple antibiotic ointment to skin PRN for tape burns
 Narcan 0.4 mg IV and repeat x 1 PRN reversal of narcotics
 Romazicon 0.2 mg IV and repeat to a total of 1mg PRN for reversal of Versed/Valium
• Notify physician for Systolic BP > 180 mm Hg or < 90 mm Hg
Flush sheath with 2 units/ml Heparinized Saline PRN for patency
ACLS protocol
Nitroglycerin 1/150 gr SL every 5 minutes x 3 only for angina
• Nasal 02 @ 2 L/min PRN if O2 sat < 92%
Approved Per Cardiovascular Committee
June 2015
MD Signature: Date & Time:
DO NOT USE: U IU QD QOD MS MSO4 MgSO4

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