



**Attending Physician:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_  
**Admit to Inpatient:**  Med/Surg  Telemetry  ICU  
**Place in Observation Services:**  Med/Surg  Telemetry  Other \_\_\_\_\_  
**Diagnosis:** CVA: Type  Ischemic  Hemorrhagic  TIA  Other: \_\_\_\_\_  
**Consult:**  Neurology: \_\_\_\_\_  
 Neurosurgery: \_\_\_\_\_  
 Other: \_\_\_\_\_  
**Allergies:**  \_\_\_\_\_

**Code Status:**  Full  DNR

**Vital Signs:**  Per unit protocol  
 VS and Neuro checks every \_\_\_\_\_ minutes for \_\_\_\_\_ hrs, then every \_\_\_\_\_ minutes for \_\_\_\_\_ hrs  
 (call MD with changes in neuro status)  
 VS and Neuro checks every shift  VS and Neuro check every \_\_\_\_\_ hrs  
 Call for SBP more than \_\_\_\_\_ SBP less than \_\_\_\_\_ DBP more than \_\_\_\_\_ DBP less than \_\_\_\_\_  
 Other: \_\_\_\_\_

**Activity:**  Bed rest  Up in chair  Bedside commode  Ambulate ad lib  
 Bathroom privileges only  Turn every \_\_\_\_\_ hrs

**Nursing:**  Daily weight  Bleeding precautions  Egg crate  
 Intake & Output  Decubitus precautions  Aspiration precautions  
 Foley to drainage  HOB at 30 degrees  Seizure precautions  Sequential Compression Device (SCD)  
 Pulse oximeter  Every shift  Twice a day  Continuous overnight monitor  
 Complete Fibrinolytic Checklist  Glucose checks AC and at bedtime or every \_\_\_\_\_ hrs  
 Other: \_\_\_\_\_

**Diet:**  Regular  NPO  2 gm low sodium  Clear liquid  Full liquid  Soft solids  
 Pureed  Cardiac  Diabetic: \_\_\_\_\_ kCal ADA  Low fat, low cholesterol  Other: \_\_\_\_\_

**Fluids:**  Intravenous: \_\_\_\_\_ @ \_\_\_\_\_ ml/hr  
 Saline lock  Other: \_\_\_\_\_


**Oxygen:**  Nasal Cannula \_\_\_\_\_ L/min, adjust to keep O2 sat more than 92%. DC if O2 sat more than 93 % on RA  
 Venti Mask \_\_\_\_\_ % FIO2  100% NRB  Other: \_\_\_\_\_


**Protocols (if available): All protocol orders must be placed in chart**  
 Insulin Infusion Protocol (ICU patients only)  
 Weight Based Heparin Dosing Protocol (when patient placed on protocol, all associated labs and monitoring is included)

**Labs:**  BMP  CMP  Magnesium  PT/INR  PTT  ABG  
 Guaiac stool (if on anticoagulants)  Fasting lipid profile  TSH  UA  RPR  
 CBC with differential ( ) Now ( ) In AM ( ) Other \_\_\_\_\_  
 CBC without differential ( ) Now ( ) In AM ( ) Other \_\_\_\_\_  
 ANA  B12  ESR  Other Labs: \_\_\_\_\_

**Studies:**  CXray:  Portable  OPA/Lateral  
 Echocardiogram Dr \_\_\_\_\_ to read  EKG  EEG  
 Cerebral Arteriogram  Transcranial doppler  Carotid Doppler study  
 MRA Brain with contrast  Noncontrast CT Scan Head  Swallow studies  MRI Brain with and without contrast  
 Other: \_\_\_\_\_

NURSE NOTED	DATE	TIME	DATE / TIME	PHYSICIAN SIGNATURE OR AUTHENTICATION
24 HR. CHART CHECK BY NURSE	DATE	TIME		


 Account Number: \_\_\_\_\_ MR Number: \_\_\_\_\_  
 Patient Name: \_\_\_\_\_  
 Admit Date: \_\_\_\_\_

 1301 S. Crismon Rd. Mesa, AZ 85209	DOB	Age	Sex	HT	WT	RM-BD	PT	SVC	FC	
	Allergies: _____									
	Attending Physician Name: _____									

**Ancillary Services:**

- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Rehab Evaluation

**Medications: (Check the appropriate box)**

- Aspirin  325mg  162mg  81mg PO daily
- Dipyridamole (Persantine) 200mg PO daily
- Clopidogrel (Plavix) 75mg PO once daily
- Ticlodipine (Ticlid) 250 mg PO BID
- Tissue Plasminogen Activator (t-PA, Alteplase) for acute inchemic CVA les than 3 hours; 0.9 mg/kg over 60 minutes (max dose 90 mg)  
Administer 10% of total dose as bolus over first minute of infusion
- Heparin 12 units per hours continuous IV infusion without bolus
- Dalteparin (Fragmin)5,000 units SubQ every 24 hours
- Heparin 5,000 units subcutaneous every 8 hours
- Lisinopril (Zestril, Prinivil)  5mg  10mg PO daily. If allergic or intolerant to ACEI, use Losartan (Cozaar) 25mg PO daily.  
Hold of SBP less than 90 mm or K+ greater or equal to 5.5 mmol/L or Creatinine greater or equal to 2.5. **DO NOT USE IF ANGIOEDEMA IS PRESENT**
- Simvastatin (Zocor) 40 mg PO, every night before bedtime
- Famotidine (Pepcid) 20 mg  IV  PO twice daily
- Pantoprazole (Protonix) 40mg  IV  PO once daily
- Nicotine 21 mg topical patch apply daily

**Protocols: All protocol orders must be placed in chart**

- Insulin subcutaneous Sliding Scale Protocols: [ ] Mild Protocol [ ] Moderate Protocol [ ] Aggressive Protocol



**Standard Medications: (all orders below will be implemented unless crossed out)**


- ✓ Acetaminophen (Tylenol) 650 mg PO every 4 hr PRN mild pain or temp more than 101F
- ✓ Docusate sodium (Colace) 100 mg PO qHS
- ✓ MOM 30 ml PO PRN constipation
- ✓ Maalox 30 ml PO PRN heartburn
- ✓ Percocet 5/325 mg PO every 4 hrs PRN for moderate pain
- ✓ Morphine Sulfate 2 mg IV every 4 hr PRN severe pain
- ✓ Temazepam (Restoril) 15 mg PO qHS PRN sleep. May repeat dose once in one hour if no results.
- ✓ Prochlorperaine (Compazine) 5 mg IV every 6 hrs PRN nausea/vomiting

**Additional Meds:**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

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 <b>Mountain Vista</b> MEDICAL CENTER	1301 S. Crismon Rd. Mesa, AZ 85209		DOB	Age	Sex	HT	WT	RM-BD	PT	SVC	FC
	Allergies:										
	Attending Physician Name:										