Special Care Nursery Hyperbilirubinemia  [30400681]

**Height**

**Weight**

**Allergies**

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### General

**Level of Care NICU**

[X] Admit to Inpatient

<table>
<thead>
<tr>
<th>Diagnosis: ______________________________ REQUIRED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expected length of stay (days): ______________________________ REQUIRED</td>
</tr>
<tr>
<td>Certification: I reasonably expect the patient will require inpatient services that span a period of time over two-midnights. (See Rationale Section in the order for options) Additional documentation will be found in progress notes and admission history and physical. Must be completed by Physician for Inpatient Admissions.</td>
</tr>
</tbody>
</table>

Rationale for Inpatient Admission: ______________________________ REQUIRED

Plans for post hospital care: See Discharge Summary/ Progress Note

**Level of Care:** ______________________________ REQUIRED

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### SAH, SCH, SFH, SJMC & Highline Code Status (Single Response)

<table>
<thead>
<tr>
<th>( ) Full code</th>
<th>This code status was determined by: ______________ REQUIRED</th>
</tr>
</thead>
<tbody>
<tr>
<td>( ) Full treatment WITH intubation but WITHOUT ACLS</td>
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<tr>
<td>( ) Comfort Care</td>
<td>This code status was determined by: ______________ REQUIRED</td>
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### Harrison Code Status  (Single Response)

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### Vital Signs

[X] Vital signs with blood pressure

Routine, Every 4 hours, Starting today, On admission, then every 4 hours or with feedings.

[X] Cardiac and respiratory monitoring

Routine, Continuous, Starting today

### Nutrition/Diet

[ ] Breast feeding

Routine, Until discontinued, Starting today, Ad lib demand.

[ ] Bottle feeding

Routine, Ad lib demand, Starting today, Ad lib demand.

### Nursing Interventions

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**Provider Initial:** ________________
<table>
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<tr>
<th></th>
<th>PHYSICIAN ORDERS</th>
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<td></td>
<td>PATIENT INFORMATION</td>
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### Phototherapy
- Routine, Until discontinued, Starting today
- Number of bili light banks: Bili lights

### Eye protection
- Routine, Continuous, Starting today

### Obtain medical records
- Routine, Until discontinued, Starting today, Obtain mother's and infant's charts from Health Information if readmission.

### Labs
#### Chemistry
- Bilirubin, total, neonatal
  - Once, Starting today
  - **Birth Time:** __________ REQUIRED
- Bilirubin, neonatal, fractionated
  - Once, Starting today
  - **Birth Time:** __________ REQUIRED

#### Hematology
- Type and screen
  - Once, Starting today
  - Has patient been transfused within 90 days? **Yes/No** REQUIRED
- Newborn DAT
  - Once, Starting today
- Hematocrit
  - Once, Starting today

#### Microbiology
- MRSA PCR
  - Once, Starting today
  - **Specimen Source** __________ REQUIRED

#### Point of Care
- POCT glucose
  - Routine, Per unit routine, Starting today, Blood Glucose on admission and per protocol

### IV Fluids
#### IV Fluids
- IV fluid builder for nursery
  - IntraVEnous, Continuous
  - **Infusion Site:** _______________ REQUIRED
  - **Routine Base Solution:** _______________ REQUIRED

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**Date:** __________ **Time:** __________  **Printed Name of Ordering Provider:** ____________________________

**Provider Signature:** ____________________________

**Date:** __________ **Time:** __________  **RN Acknowledged:** ____________________________

**Provider Initial:** ______________

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**Hyperbilirubinemia** [30400681]