Defaults for orders not otherwise specified below:
- Interval: Once
- Interval: PRN: _____# of appointment requests every _____ days
- Interval: Every _____ day

Duration:
- Until date: __________
- 1 year
- _____# of Treatments

Anticipated Infusion Date ____________ ICD 10 Code with Description ____________________________

Height ____________ (cm) Weight ____________ (kg) Allergies ______________________________________

Provider Specialty
- Allergy/Immunology
- Cardiology
- Gastroenterology
- Genetics
- Site of Service
- SH Gerber
- SH Helen DeVos (GR)
- SH Lemmen Holton (GR)
- SH Pennock
- SH Reed City
- SH United Memorial
- SH Ludington
- SH Helen DeVos (GR)
- SH Lemmen Holton (GR)
- SH Pennock
- SH Reed City
- SH United Memorial
- Cardiology
- Internal Med/Family Practice
- Nephrology
- Neurology
- OB/GYN
- Other
- Otolaryngology
- Pulmonary
- Rheumatology
- Surgery
- Urology
- Wound Care

Appointment Requests

☑ Infusion Appointment Request
Status: Future, Expected: S, Expires: S+366, Sched. Tolerance: Schedule appointment at most 3 days before or at most 3 days after,

Update the INTERVAL and DURATION on ALL the signed orders in the Therapy Plan to reflect the patient specific treatment

Nursing Orders

☑ ONC NURSING COMMUNICATION 100
May Initiate IV Catheter Patency Adult Protocol

Electrolyte Replacement: Magnesium

☑ ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 4
Magnesium serum level = 1.8 to 2.5 mg/dL: No intervention

☑ magnesium sulfate injection 2 g/50mL (Premix)
  2 g, Intravenous, Administer over 60 Minutes (50 ml/hr), Once, Starting S, For 1 Doses
  Magnesium serum level = 1.6 to 1.7 mg/dL. Total dose 2 Gm.

☑ magnesium sulfate injection 2 g/50mL (Premix)
  2 g, Intravenous, Administer over 60 Minutes (50 ml/hr), Every 1 hour, Starting S, For 2 Doses
  Magnesium serum level = 1.4 to 1.5 mg/dL. Total dose 4 Gm.

☑ magnesium sulfate injection 2 g/50mL (Premix)
  2 g, Intravenous, Administer over 60 Minutes (50 ml/hr), Every 1 hour, Starting S, For 3 Doses
  Magnesium serum level = 1.2 to 1.3 mg/dL. Total dose 6 Gm.

☑ magnesium sulfate injection 2 g/50mL (Premix)
  2 g, Intravenous, Administer over 60 Minutes (50 ml/hr), Once, Starting S, For 1 Doses
  Magnesium serum level LESS THAN 1.2 mg/dL: Initiate Magnesium Sulfate 2 Gm IVPB ONCE AND notify APP or attending for additional magnesium sulfate supplementation and/or laboratory orders

CONTINUED ON PAGE 2 ➔

NOTE: Epic Treatment/Therapy Plan Orders. To be scanned/attached to the appropriate Infusion Referral Order in Epic.
Electrolyte Replacement: Potassium

☐ ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 5
Potassium serum level = 3.5 to 4.9 mmol/L: No intervention

☐ ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 5
Potassium GREATER THAN 5 mmol/L: Notify APP or attending AND release order for 12-lead electrocardiogram

☐ potassium chloride SA (K-DUR, KLOR-CON M) CR tablet 40 mEq
40 mEq, Oral, Once, Starting S, For 1 Doses
Potassium serum level = 3.3 to 3.4 mmol/L. Give ORAL replacement if patient is able to tolerate PO.

☐ potassium chloride 20 mEq in 100mL bag (Premix)
20 mEq, Intravenous, Administer 60 Minutes (100 ml/hr), Once, Starting S, For 1 Doses
Use IV route if patient is unable to tolerate oral replacement. Potassium serum level = 3.3 to 3.4 mmol/L. Total dose 20 mEq.

☐ potassium chloride 20 mEq in 100mL bag (Premix)
20 mEq, Intravenous, Administer 60 Minutes (100 ml/hr), Every 1 hour, Starting S, For 2 Doses
Potassium serum level = 3.1 to 3.2 mmol/L. Total dose 40 mEq.

☐ potassium chloride 20 mEq in 100mL bag (Premix)
20 mEq, Intravenous, Administer 60 Minutes (100 ml/hr), Every 1 hour, Starting S, For 3 Doses
Potassium serum level 2.8 to 3 mmol/L. Total dose 60 mEq. Check potassium level after completion of infusions.

☐ potassium chloride 20 mEq in 100mL bag (Premix)
20 mEq, Intravenous, Administer 60 Minutes (100 ml/hr), Once, Starting S, For 1 Doses
For patients with serum potassium level LESS THAN 2.8 mmol/L initiate potassium chloride 20 mEq over 1 hour, notify provider and release order for 12-lead electrocardiogram; release order and collect sample for potassium blood level after completion of infusion.

☐ Electrocardiogram, Complete
Routine, Hospital Performed, Status: Future, Expected: S, Expires: S+365

☐ Potassium, Blood Level
Status: Future, Expires: S+365, URGENT, Clinic Collect, Blood, Blood, Venous

Telephone order/Verbal order documented and read-back completed. Practitioner's initials ____________

NOTE: Unless Order is written DAW (dispense as written), medication may be supplied which is a generic equivalent by nonproprietary name.