

1. Additional Orders

- Pulse oximetry on admission and with vitals.
- Notify physician of pulse oximetry less than 93%.
- If temperature ≥ 101.5 (not previously noted), call physician.
- Up in chair within 24 hours of admission.
- Heating pads prn for pain
- Incentive Spirometry 10 times per hour while awake
- Other: _____

2. IV fluids:

- D5- 1/4 NS with 20 mEq KCl/L @ _____ ml/hr. (1 1/4 -2 times maintenance)
- D5- 1/2 NS with 20 mEq KCl/L @ _____ ml/hr. (1 1/4 -2 times maintenance)
- Other: _____ @ _____ ml/hr.

3. Diagnostic Studies: (on admission IF not completed in the ED or outpatient office)

- CBC with differential
- CMP (if BMP performed prior to admit, add Hepatic Function Panel to blood already drawn)
- Reticulocyte count
- UA
- Hold for possible cross match (3cc red top)
- CXR PA and Lateral.
- Other: _____

• Recommended Labs if febrile (≥ 100.5)

- UA with Culture and Sensitivity.
- Blood culture x 2.
- Pulse Oximetry or ABG (circle one)

4. Medications:

- Folic Acid 1 mg PO daily.
- Hydroxyurea 500 mg _____.
- Other: _____

5. Narcotics: (Recommend continuous and intermittent narcotics)

- Pain Score Rating q 4 hours while awake 1-10 (1=least pain and 10=worst pain) and chart pain score
- Fentanyl PCA Orders.
 - NSAID protocol.
 - Acetaminophen protocol.
- Morphine PCA protocol.
- Other: _____.

6. Transfusion: (NOT indicated for a typical pain crisis)

(Indicated for Aplastic crisis, Chest syndrome with hypoxia, CNS events, splenic sequestration, and parvo B19 inf.)

- Type, cross, and transfuse _____ units PRBC. Transfuse each unit over 2 hours.

Physician Signature