



ORDERS

COVID-19 (SUSPECTED OR CONFIRMED)

ADMISSION ORDERS

(items with check boxes must be selected to be ordered)

DATE:
TIME:

Noted
by:

Avoid unnecessary imaging and frequent labwork. Minimize patient transportation. Use once daily meds if possible. D-dimer values will be elevated in sick patients; markedly elevated in COVID infection. This does not warrant a CTPE protocol. Please only order CTPE protocol if your clinical suspicion truly is PE as the cause of the D-dimer elevation.

ADMISSION INSTRUCTIONS: Admitted to Dr. _____

CODE STATUS: Refer to completed Medical Orders for Scope of Treatment (MOST) form

PATIENT ISOLATION: Droplet and Contact precautions, use appropriate eye protection;
use Airborne precautions with aerosol-generating medical procedures (AGMP)

DIET: Regular

ACTIVITY: Activity as tolerated

CONSULTS: Do not place Allied Health Consult order without confirmation from MRP

MONITORING: Vital signs Q8H and PRN Q6H and PRN Q4H and PRN Q1H and PRN
Pulse Oximetry Q8H and PRN Q6H and PRN Q4H and PRN Q1H and PRN
Notify MRP if patient deteriorating

LABORATORY: CBC and Differential, Chem 16, magnesium, calcium, phosphate
Troponin, INR, PTT, Fibrinogen, D-Dimer, Ferritin, Lactate, CRP

- Nasopharyngeal swab for COVID-19, Influenza A, B and RSV NAT
- Blood Culture x 2 Sputum C&S

- CBC and Differential, Chem 16, CRP, INR, PTT daily x _____ days
- magnesium daily x _____ days calcium daily x _____ days phosphate daily x _____ days
- If ferritin is greater than 2000 mcg/L, triglycerides Q2days x _____ days

DIAGNOSTICS: Electrocardiogram 12 lead (if not already done in ED)
Portable CXR (if not already done in ED)

TREATMENTS: Titrate O₂ to maintain oxygen saturation 92% or greater
Call MRP if any change in O₂ requirements. MRP to consult Anesthesia if patient requiring O₂ of 2L/min or more

INTRAVENOUS: Note for Physician: Remember judicious IV fluids are required for patients with COVID infection - allow relative hypotension in the absence of worsening shock (lactate/acute renal failure). Use boluses of only 250 to 500 mL and frequent reassessment of volume status

Insert peripheral IV catheter
Do not initiate any IV fluids without an order from the MRP

MEDICATIONS: Notes for Physician: Use caution if initiating ACEI/ ARBs/ NSAIDs/ steroids.
Supply of bronchodilator inhalers is limited. Order selectively for appropriate clinical indications (e.g. wheezing). Nebulizers can be ordered and administered if the patient is in a single room with door closed, or dedicated COVID ward with personnel wearing appropriate PPE. Please don't use MDIs preferentially.

- acetaminophen 975 mg PO QID PRN pain or fever; (Max acetaminophen from all sources 4 g/ 24 h)
- acetaminophen 325 mg PO QID PRN pain or fever; (Max acetaminophen from all sources 2 g/ 24 h)
- ondansetron 4 to 8 mg PO Q8H PRN nausea or vomiting
- ondansetron 4 to 8 mg IV Q8H PRN nausea or vomiting
- Bowel Care – Laxative of Choice: Refer to SHOP D-00-07-30174

VTE Prophylaxis: Refer to VTE Risk Assessment and Prophylaxis Orders (VCH.CO.3032)

Printed Name _____

Signature _____

College ID _____

Pager/Cell _____