

Name: _____
 Room #: _____

STAT

CONGESTIVE HEART FAILURE ADMITTING ORDERS

1. Observation status *or* admit to: ICU 5th Telemetry Unmonitored bed
2. Primary MD: _____ Admitting MD: _____
3. Old charts to unit. Obtain copy of Echo report from previous admission.
4. Cardiology Consult Yes No MD: _____

5. Labs

Upon admission, if not already done in ED/Urgent Care

- BMP, Magnesium
- CBC with Diff
- Digoxin Level Yes No
- Cardiac Enzymes q 8 hours x 2 Yes No
- BNP Yes No
- Other: _____

Next day in early a.m.

- BMP, Magnesium

Other: _____

6. Diagnostics if not already done in ED/Urgent Care

- EKG on admission.
- CXR – PA and Lateral
- Echocardiogram: Yes No STAT Doppler: Yes No

MD to read: _____

7. O₂ at 2-4 L via NC to maintain SaO₂ greater than 92%. If SaO₂ less than 92% on 4L, notify physician.
8. Weigh on admission per bed scale, then every a.m.
9. Vital signs per routine. Strict I & O measures every eight hours.

10. Activity

- Bedrest Bedrest with Bathroom Privileges Up with Assistance Up ad lib

11. Nutrition

- NPO 4 Gm Na Diet Other _____

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- _____ mL Fluid Restriction

12. If patient arrives in the Emergency Department or on unit with IV fluids, change to saline lock.

13. Medications

- Ace I
 - Captopril (Capoten[®]) _____ mg PO q 8 hrs
 - Enalapril (Vasotec[®]) _____ mg PO q 12 hrs
 - Lisinopril (Zestril[®]) _____ mg PO daily
 - None (contraindicated) reason _____ →
- ARBs
 - Irbesartan (Avapro[®]) _____ mg PO daily
- Diuretics
 - Furosemide (Lasix[®]) _____ IV / PO (circle one) q _____ hrs
 - Bumetanide (Bumex[®]) _____ IV / PO (circle one) q _____ hrs
 - Metolazone (Zaroxolyn[®]) _____ PO daily
- Potassium Supplement
 - Potassium chloride _____ mEq PO q _____ hrs
 - Replace potassium using Potassium Replacement Administration Standing Orders
- Aldosterone Inhibitor
 - Spironolactone (Aldactone[®]) _____ mg PO daily
- Beta Blocker
 - Metoprolol (Lopressor[®]) _____ mg PO q 12 hrs
 - Metoprolol XL (Toprol XL[®]) _____ mg PO daily
 - Carvedilol (Coreg[®]) _____ mg PO q 12 hrs
 - Atenolol (Tenormin[®]) _____ mg PO daily
- Other Medications
 - Digoxin _____ mg IV / PO (circle one) daily
 - hydrALAZINE (Apresoline[®]) _____ mg IV / PO (circle one) q _____ hrs
 - Isosorbide mononitrate (Imdur[®]) _____ mg PO daily
 - Nitroglycerin paste _____ inch(s) q _____ hrs
 - Acetaminophen (Tylenol) 650 mg PO q 4-6 hours PRN
 - Temazepam (Restoril) 15 mg PO nightly PRN. May repeat x 1.
 - Other _____

- Intolerance/Allergy
- Serum Potassium greater than 5.5
- Serum Creatinine greater than 3
- Renal Artery Stenosis
- Intractable Cough
- Mitral/Aortic Stenosis
- Symptomatic Hypotension (systolic less than 90 mm Hg)

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14. Consults

- Notify Cardiac Rehab for initiation of teaching
- Dietitian Consult YES NO
- Pharmacist to see patient YES NO
- Discharge Planning to see patient/family YES NO

Physician Signature: _____

Date: _____

Time: _____