

Name: _____
Room #: _____

STAT

EMERGENCY DEPARTMENT – MEDICAL HOLDING ORDERS

1. Admit to Dr. _____
2. Consultant: _____
3. Diagnosis: _____
4. Observation (floor) _____ Admission (floor) _____
5. Activity: Complete bedrest To bathroom Ad Lib Other _____
6. Diet: Regular Clear Liquid NPO Other _____
7. Vital Signs: _____
8. I & O if on IV's
9. IV of _____ at _____ mL/hr _____
10. Allergies: _____
11. Oxygen
12. Medications: _____

13. Home meds to continue
14. Lab/Diagnostic Studies: _____
15. Old records to floor ASAP
16. Call attending physician for any problems, change in clinical status, or further orders.
17. As discussed with _____ M.D. at _____ hours
(Receiving Physician)

As per the Medical Staff Bylaws, it is understood that once this patient leaves the Emergency Department, the responsibility for patient care is transferred to the receiving physician.

Note: Unless renewed, these orders expire at the time of the receiving MD's visit or 24 hours after the above orders are written.

ED Physician Signature: _____

Date: _____ Time: _____