



1PO

Last Admit Date:

OB ADMISSION ORDERS

DIAGNOSIS

ADMIT TO Dr. (with Dr. covering) ☐ HospitalistSTATUS ☐ Referred for Observation ☐ Inpatient ☐ OPS Expected LOS > two midnights ☐ YES ☐ NOMEDICAL NECESSITY DATA
(S&S, LAB/XRAY REPORTS etc)SERVICE ☐ Medical ☐ Surgical ☐ ICU/IMCU ☐ WH ☐ OB/GYN ☐ Pediatrics ☐ OrthoCONDITION ☐ Stable ☐ Guarded ☐ Poor ☐ Critical ☐ Continue DNRCONSULT ☐ Dr. ☐ Done ☐ Page on Arrival ☐ Page in AMCONTACT
MD☐ For any question/problems ☐ In AM w/ room # ☐ On arrival to floor ☐ Further Orders

1. NPO except ice chips

2. ☐ CBC with diff ☐ RPR ☐ Type & Screen inductions and previous C-Section
Urinalysis: ☐ Routine ☐ C&S ☐ HIV3. Maintain IVF: ☐ RL ☐ D5RL ☐ D5 1/2NS

4. GBS prophylaxis if indicated

5. Epidural anesthesia at 4cm's if desired – bolus RL if indicated

6. ☐ Foley, may use Xylocaine 1% gel as lubricant
Reason—7. If no prenatal care: CBC, UA with micro and C&S, Rubella Titer, RPR,
Type & Screen, HBSAG, Urine Drug Screen, HIV (must obtain patient's
written consent)

8. Preterm Labor less than 37 weeks, obtain Urine Drug Screen

9. ☐ mini prep ☐ enema – fleets/ss

10. Continuous Fetal Monitor

MEDICATION
ORDERS
(if Checked)

- ☐ Call Physician for meds
- ☐ Zofran 4mg IVP every 4 hrs PRN N/V
- ☐ Ambien 10mg PO every HS prn insomnia
- ☐ Mylanta 30ml PO every 4 hrs prn indigestion/heartburn
- ☐ Tylenol 650mg PO every 4 hrs prn headache, Maximum 4 gram dose in 24 hours
- ☐ Carbocaine 1% or ☐ Lidocaine 1% for episiotomy (Check one)
- ☐ Cytotec 25 micrograms intra vaginally behind the cervix every 3 hrs per protocol
- ☐ Pitocin Per Protocol
- ☐ Zithromax 500mg/NS250ml with filter IVPB once if Rupture of Membranes

Pain Management: (SELECT ONLY ONE)

- ☐ Stadol 2mg SIVP every 2 hrs prn pain
- ☐ Demerol 50mg ☐ SIVP ☐ IM ☐ PO every 4 hrs prn pain
- ☐ Nubain 10mg IV every 2 hrs PRN as needed for pain
- ☐ Vistaril 50mg give 2 tabs PO once PRN Insomnia, anxiety, pain.

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LAST, FIRST MNAME ROOM-BED s
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