

PHYSICIAN ORDER - NEWBORN CARE ORDERS

Room No. _____

ALLERGIES (list reactions):

HT _____(Cm) WT _____(Kg)

A Indicates a selected order. If a defaulted order is not appropriate or there is a change to an order, draw a line through the order and initial.

REMINDER: Nursing will also be completing STP 910 Admission of a Newborn.

NURSING

- Notify MD Of Results within 12 Hrs if Maternal GBS, HBsAG, or VDRL are Positive.
- HBIg RN Communication Order: If unable to administer HB IG (if ordered) prior to discharge, RN follow procedure in Hepatitis B Immunization policy (WS – 163) to ensure that the HBIG dose is administered in the OP setting prior to 7 days of age. RN to notify St. Joseph Hospital Epidemiology of positive maternal results.
- Newborn Hearing Screen prior to discharge. Schedule outpatient rescreen referral if needed, by contacting case management
- May discharge after 24 Hrs if Discharge Criteria met

RESPIRATORY.

- Perform pulse oximetry screening prior to discharge (WS-200)
 - When the saturation is $\geq 95\%$ then the newborn has passed the screen and can proceed with discharge
 - When the saturation is $\leq 94\%$ or a $> 3\%$ difference in right hand vs. the foot the test is a refer. Transport the newborn to the transitional nursery for observation and monitoring. Start O2 at 5 L/min blow by or 1L/NC.
 - If a newborn continues to have saturations $\leq 94\%$ or a $> 3\%$ difference, order a STAT Echocardiogram with Doppler. Reason: possible Congenital Heart Disease
 - For saturations $< 90\%$, call attending MD immediately for additional orders.

MEDICATIONS

- Zinc Oxide (Desitin) ointment. Apply topically to diaper rash areas Prn with each diaper change

HBIG Orders *Physician to choose ONE option only*

**If Mother is HBsAg (Hepatitis B Surface Antigen) POSITIVE orders

- Hepatitis B Immune Globulin 0.5 mL IM x 1 dose in LEFT thigh Prn if mother is HBsAg (Hepatitis B Surface Antigen) positive. Must give within 12 Hrs of birth per policy. (WS-163)


**Do NOT wait for maternal Hepatitis HBsAg results orders

- Hepatitis B Immune Globulin 0.5 mL IM x 1 dose in LEFT thigh Prn if mother is HBsAg (Hepatitis B Surface Antigen) unknown. Must give within 12 Hrs of birth.

**Wait for maternal Hepatitis HBsAg results orders

- Hepatitis B Immune Globulin 0.5 mL IM x 1 dose in LEFT thigh Prn if Mother is HBsAg (Hepatitis B Surface Antigen) unknown, wait for maternal Hepatitis HBsAG result. Give as soon as possible or prior to discharge.

Other medications: _____

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LABORATORY - Chemistry

- RN To Draw Total Bilirubin if Transcutaneous Bilirubin (TcB) is greater than or equal to 6.5mg/dL at 24 Hrs of age. Notify MD if Total Serum Bilirubin greater than 8mg/dL. Refer to STP 910 for instructions.
- Perform Transcutaneous Bilirubin (TcB) at 36 Hrs of age, plot on nomogram.
If results are ≥ 8.5 mg/dL, draw Total Bilirubin (BILT), plot on serum nomogram.
Call results to MD if ≥ 11 mg/dL. If breast feeding, order a Lactation Consult if not already done

REQUESTS FOR SERVICE

- Lactation consult Prn (if breast feeding criteria met per WS 112)

12-hour Chart Check _____ RN DATE: ___ / ___ / ___ TIME: _____

T.O. _____ Taken by: _____ / ___ / ___, TIME: _____


CPOE Entry By: _____ / ___ / ___, TIME: _____ NOTED BY: _____ / ___ / ___, TIME: _____

Sent to Pharmacy _____ (INITIALS) DATE: _____ TIME: _____

PHYSICIAN SIGNATURE: _____ DATE: _____ TIME: _____

PRINTED NAME/ID#: _____

(COUNTER-SIGN ALL T.O. ORDERS WITHIN 48 HOURS, AND INCLUDE THE DATE/TIME AUTHENTICATED)

	Patient ID
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