

**MARTIN LUTHER KING, JR. OUTPATIENT CENTER
POLICY AND PROCEDURE**

DIVISION: CLINICAL	NUMBER: 2.305
SUBJECT: PROCOLED ORDERS FOR URGENT CARE	
SECTION: PATIENT SERVICES	PAGE: 1 OF: 5
REVIEWED BY: POLICY AND PROCEDURE COMMITTEE	EFFECTIVE DATE: 5/28/15
TO BE PERFORMED BY: NURSING STAFF	REVIEWED DATE: REVISED DATE: 5/28/15, 11/3/15, 1/20/16, 12/16/16, 3/29/17

PURPOSE

1. To facilitate patient care and service while safely decreasing the wait time for patients in the Urgent Care.
2. To create a standard practice protocol in which the UCC RN, LVN, or CMA may perform screening tests

DEFINITION

Protooled Order: An order that does not require a provider co-signature to initiate.

Nursing Staff: UCC RN, LVN, or CMA.

In order to facilitate new patient intake, care coordination and patient evaluation, there will be a set of standing orders to be utilized by primary care clinic nursing staff if applicable to clinical area. Nursing staff will be able to initiate the orders below in the electronic medical record without provider co-signature required as per protocol.

PROCEDURE:

I. Vital Signs and Screening

ADULT PATIENTS (> 18 years of age)

Obtain on ALL adult patients:

- Temperature
- Heart Rate
- Respiratory Rate
- Systolic and Diastolic Blood Pressure
- Pain Score
- Weight

Obtain on SPECIFIC patients:

Respiratory Complaints:

Pulse Oximetry for:

- Patients with shortness of breath or difficulty speaking
- Patients with asthma symptoms or wheezing
- Patients with cough and Fever

Chest X-ray (2 views PA and lateral) for:

- Patients with productive cough for 7 or more days and a history of smoking
- Patients with cough AND temperature >37.8 degrees F AND HR greater than 100 OR RR > 20

Chest Pain:

EKG for:

- Patients over age 35 with chest pain without trauma or other identified trigger
- Any patient based on RN assessment

Visual Complaints:

- Visual acuity test
- Point of care blood sugar for patients to evaluate for undiagnosed diabetes

Abdominal Pain:

- LMP on all women age 12 – 55
- Urine pregnancy test on all women ages 12-55
- Urinalysis for all individuals complaining of dysuria
- Urinalysis at discretion of RN for individuals without dysuria

Bleeding:

- Hemocue for active bleeding from a wound at RN discretion

Vaginal Bleeding:

- Hemocue
- Urine pregnancy test

HIV Screening (opt-out):

HIV Antibody/Antigen Screen for:

- Any patient with concern for or requesting testing for sexually transmitted infections
- All patients age 13-65 years of age who are getting a serum blood draw for any other reason

Diabetics:

- Blood sugar for individuals presenting with an acute illness or request for medication refill
- Blood sugar at RN discretion for individuals presenting for follow-up care, for test results, or any other concerns

Musculoskeletal Complaints:

Radiographic studies may be ordered by the Registered Nurse on patients who present to the urgent care following articular or long-bone injury with obvious swelling and/or deformity.

Pregnancy tests should be performed in any pre-menopausal women of child bearing age (15-49 years) who MAY be pregnant prior to any radiographic study. If the pregnancy test is positive, consult with the provider prior to ordering any x-ray studies.

Consideration should be given to ordering radiographic studies of the joint above and below the site of injury, i.e. elbow. When in question always consult with the provider.

Patients referred from an outside facility with a fracture seeking an orthopedic referral, shall have x-rays repeated here at the urgent care, and if the patient has a splint, the x-ray shall be performed with the splint on.

The urgent care provider shall be consulted on any case in question.

- | | | | |
|-----------------------------------|---|---|---------------|
| <input type="checkbox"/> Shoulder | L | R | (Complete) |
| <input type="checkbox"/> Elbow | L | R | (Complete) |
| <input type="checkbox"/> Humerus | L | R | (Only L or R) |
| <input type="checkbox"/> Forearm | L | R | (2 views) |
| <input type="checkbox"/> Hand | L | R | (2 views) |
| <input type="checkbox"/> Wrist | L | R | (Complete) |

- Pelvis L R (1 or 2 view)
- Hip L R (1 view or Complete)
- Femur L R (Only L or R)
- Knee L R (Complete/3 views)
- Tibia/Fibula L R (Only L or R)
- Ankle L R (Complete/2 views)
- Foot L R (2 views)
- Ribs L R (2 views)

PEDIATRIC PATIENTS

Vital Signs for ALL pediatric patients:

- Temperature
- Heart Rate
- Respiratory Rate
- Weight

Vital Signs for Specific Pediatric Patients

Blood Pressure

- Children over 3 years

Pain Score:

- Children over 3 years

Respiratory Complaints:

Pulse Oximetry for:

- Patients with shortness of breath or difficulty speaking
- Patients with asthma symptoms or wheezing
- Patients with cough and Fever

II. Reporting Abnormal Vital Signs

Chain of Reporting:

- CMA and LVN report to RN covering triage
- RN is responsible for reporting to the clinician on duty
- If for any reason an RN is not available, report directly to the provider on duty

Immediate Notification:

- Any patient who appears to be seriously ill, who has difficulty breathing or speaking, who has unilateral arm and/or leg weakness, who has severe chest pain, or who appears to have an altered level of consciousness
- Any patient who has an obvious open wound or displaced fracture
- Any patient who reports pain ≥ 8 and whose clinical condition warrants expedited care based on RN assessment. The RN should take into account the stated pain score and physiologic changes, such as blood pressure and heart rate, in making his/her assessment.

Notify the assigned RN or Provider for Abnormal Vital Signs as Follows:

ADULT VITAL SIGNS		
Vitals and Tests	Normal	Notify RN or Provider
Systolic Blood Pressure	100-139	<85 or >190

Diastolic Blood Pressure	80-89	<45 or >110
Respiratory Rate	16-20	<10 or > 28
Temperature	98.6 F or 37 C	> 102 F or 39 C

PEDIATRIC VITAL SIGNS				
Vital Sign	Age Range	Normal		Notify RN or Provider
Heart Rate		Awake	Asleep	Notify if abnormal
	Newborn to 3 mos	85-205	80-160	
	3 mos to 2 years	100-190	75-160	
	2 years to 10 years	60-140	60-90	
	>10 years	60-100	50-90	
Respiratory Rate	Newborn to 3 mos	30-60		Notify if abnormal
	3 mos to 12 mos	30-40		
	12 mos to 2 years	24-40		
	2 years to 5 years	22-34		
	6 years to 11 years	18-30		
	Adolescent	12-20		
Systolic Blood Pressure	Term neonates	<60 mm Hg		Notify if abnormal
	Infants 1-12 months	<70 mm Hg		
	1-10 years	70+(age in years x2)		
	10 years to 15 years	70-95		
	>15 years	80-140		
Temperature	0 – 3 mos	98.6 F, 37C		Notify if > 100.4F, 38 C
	>3 mos	98.6		Notify if > 103 F, 40 C

Any CMA, LVN, or RN should complete all above standing orders for vital signs if patients have not already received initial screening at the intake area.

III. Treatment Orders:

Fever:

Adults

- Give Ibuprofen to adults with temperature over 100.4 °F or 38 °C per dosing table.
- OR
- Give acetaminophen per dosing table as alternative in patients who have already taken ibuprofen or who have allergy to ibuprofen
- AND
- Passive Cooling Methods

Dosing for adults over 50kg:

- Acetaminophen 650mg PO x 1 dose
- Ibuprofen 800 mg PO x 1 dose

Pediatrics:

- 0-6 months: Give acetaminophen per dosing instructions for fever >100.4 F or 38 °C
- >6 months: Give Ibuprofen per dosing instructions for fever >100.4 F or 38 °C.

OR

- >6 months: Give acetaminophen per dosing instructions if child has already had ibuprofen or has an allergy

AND

- Passive Cooling Methods

Dosing for Pediatric Patients:

- Acetaminophen 15 mg/kg PO x 1 dose
- Ibuprofen 10mg/kg PO x 1 dose

Asthma:

Initiate albuterol nebulizer and notify the responsible provider

Dosing:

- For patients ≥ 3 years of age, give Albuterol 5mg nebulizer x 1
- For patients < 3 years of age, give Albuterol 2.5 mg nebulizer x 1
- For patients ≤ 1 year of age, consult with the provider before initiating treatment

Chest Pain

- RN may initiate cardiac monitoring based on her assessment
- RN may complete an EKG if it was not already done based on her assessment

NOTED AND APPROVED:

Cynthia M. Oliver, Chief Executive Officer

Date

Ellen Rothman, M.D., Chief Medical Officer

Date

Lessie Barber, RN, Nursing Director

Date

Signature(s) on File.