

- Facilities:
- Ascension St. Vincent's Riverside
  - Ascension St. Vincent's Southside
  - Ascension St. Vincent's Clay County
  - Ascension St. Johns County

AFFIX PATIENT LABEL

**RAD Angiogram Pre-Procedure  
Non Categorized**

Last Revision Date  
 2023/02

**Admit/Transfer/Discharge**

Place in Outpatient Status

- I certify that hospital services are medically necessary.

Admit as Inpatient

- I certify that hospital inpatient services are reasonable and necessary, and appropriately provided as inpatient services in accordance with the two midnight benchmark under 42 CFR 412.3(e).

Code Status

- Full Code Resuscitation
- Allow Natural Death Allow Natural Death / Do Not Resuscitate, Do not intubate, Do not perform CPR, Do not defibrillate, Do not treat arrhythmias, Do not use vasoactive drugs
- May Initiate Emergency Standing Orders
- Respiratory Patient Driven Protocols

**Vital Signs**

Vital Signs

- once prior to procedure

**Diet**

NPO

- NPO except for medications with sips of water
- No exceptions

**Patient Care**

IV Line

- Insert INT

Procedural Prep

- Complete Pre Anesthesia Moderate Sedation Assessment patient section

Procedural Prep

- Have patient void bladder when called for procedure

**LINKED CONTENT:** Urinary Foley Catheter Orders

Gastric Tube

- T;N Nasogastric Tube for IR procedure

**Continuous Infusions**

NS

- 1,000 mL IV 125 mL/hr

1/2 NS

- 1,000 mL IV 125 mL/hr

**Medications**

**Analgesics**

ketorolac

Nursing Signature \_\_\_\_\_ Date/Time \_\_\_\_\_

Physician Signature \_\_\_\_\_ Date/Time \_\_\_\_\_



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- 30 mg inj IV slow push once PRN pain HYDRomorphone
- 1 mg inj IV slow push once PRN pain Hold for < 90 Hold if </= 12 morphine
- 2 mg inj IV slow push once PRN pain Hold for < 90 Hold if </= 12

**Antiemetics**

- ondansetron
  - 4 mg inj IV slow push once PRN nausea
- promethazine
  - 12.5 mg inj IV slow push once PRN nausea If zofran also ordered, use zofran first.

**Acid Suppression Agents**

- famotidine
  - 20 mg inj IV slow push once

**Miscellaneous Medications**

- diphenhydrAMINE
  - 25 mg inj IV slow push once

**Contrast Allergy Premedication**

- dexAMETHasone
  - 8 mg inj IV slow push once
- diphenhydrAMINE
  - 50 mg inj IV slow push once

**Laboratory**

- CBC/Plt/Diff
  - Blood Stat T;N Nurse Collect : No
- Prothrombin Time with INR
  - Blood Stat T;N Nurse Collect : No
- Act Part Thrombo Time
  - Blood Stat T;N Nurse Collect : No
- Basic Metabolic Panel
  - Blood Stat T;N Nurse Collect : No
- Comprehensive Metabolic Panel
  - Blood Stat T;N Nurse Collect : No
- Beta hCG Qual Urine
  - Urine, Unspecified Stat

**Diagnostic Tests**

- EKG
  - T;N Stat

Nursing Signature \_\_\_\_\_ Date/Time \_\_\_\_\_

Physician Signature \_\_\_\_\_ Date/Time \_\_\_\_\_

