



Change order details by crossing out unwanted information and writing in desired details/instructions.
Place a line through the to remove the pre-checked option.

HYDRATION THERAPY PLAN [11500954] Therapy Plan To Be Used In Infusion Center

Infusion Center Location: _____ Start Date: _____

Diagnosis/Indication: _____

Authorization Number: _____

Patient Name _____ DOB _____ Height _____ Weight _____

Hydration	Interval
<input type="checkbox"/> sodium chloride 0.9 % bolus 1,000 mL <i>Starting when released, For 1 dose, Administer fluids _____ times per week at _____ ml/hr for the next _____ weeks, then reassess and review with provider.</i>	PRN Route: IV
<input type="checkbox"/> lactated ringers bolus 1,000 mL <i>Starting when released, For 1 dose, Administer fluids _____ times per week at _____ ml/hr for the next _____ weeks, then reassess and review with provider.</i>	PRN Route: IV
<input type="checkbox"/> dextrose 5 % and 0.9% NaCl 5-0.9 % bolus 1,000 mL <i>Starting when released, For 1 dose, Administer fluids _____ times per week at _____ ml/hr for the next _____ weeks, then reassess and review with provider.</i>	PRN Route: IV
<input type="checkbox"/> dextrose 5 % and 0.45% NaCl 5-0.45 % bolus 1,000 mL <i>Starting when released, For 1 dose, Administer fluids _____ times per week at _____ ml/hr for the next _____ weeks, then reassess and review with provider.</i>	PRN Route: IV
<input type="checkbox"/> dextrose 5 % bolus 1,000 mL <i>Starting when released, For 1 dose, Administer fluids _____ times per week at _____ ml/hr for the next _____ weeks, then reassess and review with provider.</i>	PRN Route: IV

Provider Communication Orders	Interval
<input type="checkbox"/> Provider Communication <i>Starting when released Select most appropriate orders (one set only) for IV access / central line - if selecting a central line access set of orders, then de-select IV access.</i>	Once

Nursing Orders	Interval
<input type="checkbox"/> Nursing Communication <i>Starting when released Discontinue therapy plan after treatment complete.</i>	Every visit
<input type="checkbox"/> Insert peripheral IV <i>Starting when released</i>	PRN
<input type="checkbox"/> Access & Use Central Line/CVAD <i>Starting when released Access vascular device and confirm patency.</i>	PRN
<input type="checkbox"/> Access & Use Central Line/CVAD <i>Starting when released Access vascular device and confirm patency.</i>	PRN
<input type="checkbox"/> sodium chloride (NS) flush 10 mL <i>Line Care, Starting when released</i>	PRN Route: IV

 Provider Signature EHR User ID Date Time

Initials

Place Patient Label Here

<input type="checkbox"/>	Initiate Central Line (Non-PICC) Maintenance Protocol <i>Starting when released</i>	PRN	
<input type="checkbox"/>	Initiate PICC Maintenance Protocol <i>Starting when released</i>	PRN	
<input type="checkbox"/>	sodium chloride 0.9 % injection 10 mL <i>Other, Line Care prior to medication administration, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	Nursing Communication <i>Starting when released Change PICC line dressing weekly and as needed.</i>	PRN	
<input type="checkbox"/>	sodium chloride 0.9 % injection 10 mL <i>Other, Line Care post medication administration, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	sodium chloride 0.9 % injection 10 mL <i>Other, Line Care prior to medication administration, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	sodium chloride 0.9 % injection 20 mL <i>Other, Line Care post lab draw, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	sodium chloride 0.9 % injection 10 mL <i>Other, Line Care post medication administration, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	sodium chloride 0.9 % injection 10 mL <i>Other, Line Care at discharge and de-access, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	sodium chloride 0.9 % injection 20 mL <i>Other, Line Care post lab draw, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	heparin, porcine (PF) 100 unit/mL flush 500 Units <i>Line Care, for de-access, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	alteplase (CATHFLO) injection 2 mg <i>Other, Line Care, Starting when released, For 2 dose, For clearing central line catheter. Add 2.2 mL sterile water for injection to vial; let the vial stand undisturbed to allow large bubbles to dissipate. Mix by gently swirling until completely dissolved (complete dissolution should occur within 3 minutes); do not shake. Final concentration: 1 mg/mL. Retain in catheter for 30 minutes to 2 hours, instill a 2nd dose if occluded.</i>	PRN	Route: Intra-Catheter
<input type="checkbox"/>	alteplase (CATHFLO) injection 2 mg <i>Other, Line care, Starting when released, For 2 dose, For clearing central line catheter. Add 2.2 mL sterile water for injection to vial; let the vial stand undisturbed to allow large bubbles to dissipate. Mix by gently swirling until completely dissolved (complete dissolution should occur within 3 minutes); do not shake. Final concentration: 1 mg/mL. Retain in catheter for 30 minutes to 2 hours, instill a 2nd dose if occluded</i>	PRN	Route: Intra-Catheter
PRN Medications		Interval	
<input type="checkbox"/>	alteplase (CATHFLO) injection 2 mg <i>2 mg As Needed Intra-Catheter Other, Occluded Catheter, Starting when released, For clearing central line catheter. Add 2.2 mL SWFI to the vial; let the vial stand undisturbed to allow large bubbles to dissipate. Mix by gently swirling until completely dissolved (complete dissolution should occur within 3 minutes); do not shake. Final concentration: 1 mg/mL. Retain in catheter for 30 minutes to 2 hours, instill a 2nd dose if occluded.</i>	PRN	Route: Intra-Catheter

Provider Signature	EHR User ID	Date	Time
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Initials

Place Patient Label Here