

COPD Standing Admission Orders

- ^A Obtain copy of last PFT and/or spirometry.
- ^A Verify number of hospitalizations for COPD in the past 12 months. _____
- ^A Verify date of last pneumococcal vaccine: Pneumovax - 23 ____/____/____ **or** Prevnar - 13 ____/____/____.
- ^A Verify date of last flu vaccine: ____/____/____.
- Nursing evaluation for proper technique with use of nebulizer and/or meter dose inhaler/spacer.
- Daily lung sound assessment and documentation of findings before and after use of beta -agonist medication for the first 7 days; then once weekly and PRN with change in assessment findings.
- SpO2 daily and PRN for 7 days, then weekly and prn with any change in condition or symptoms, i.e. dusky nail beds, shortness of breath, pain in chest.
- Report to Dr/NP:
 - New onset of fever, change in sputum color/characteristics, SOB, wheezing
 - Decrease in oxygen saturation level
- Verify whether or not patient has an IPOST/POLST
- PT/OT/ST assess and treat for oxygen and energy conservation.
- Oxygen 2-4 lpm to keep SpO2 > 91% PRN.

Is resident an active smoker: YES / NO

Is resident managed by a pulmonologist? YES / NO. If yes, is there a follow up appointment pending: NO / YES - Date: ____/____/____ Dr. _____.

How many hospitalizations has resident had for COPD in the past year? _____

New Orders:

1. Verify orders for the following:

- Short acting bronchodilator: YES NO. If no explain: _____
 - New orders:
 - Albuterol 90 mcg MDI 2 puffs q 6 hrs PRN
 - Albuterol nebulizer 0.083%/3ml q 6 hrs PRN – (if unable to properly use MDI i.e., unable to breathe deeply and hold breath for 10 seconds and/or during acute exacerbations).
- Long acting beta-agonist / Inhaled corticosteroid: YES NO. If no explain: _____
 - New orders:
 - Advair 250/50 mcg 1 inhalation BID. Instruct resident to rinse mouth or preform oral care after inhalation.
 - Symbicort 160/4.5 mcg 1 inhalation BID. Instruct resident to rinse mouth or preform oral care after inhalation.
 - Breo Ellipta 100/25 mcg 1 inhalation QD. Instruct resident to rinse mouth or preform oral care after inhalation.
 - Brovana 15 mcg/2ml 1 neb BID. Instruct resident to rinse mouth or preform oral care after inhalation.
 - Pulmicort Respules 1 mg/2ml 1 neb BID. Instruct resident to rinse mouth or preform oral care after inhalation.
- Anticholinergics: YES NO. If no explain: _____
 - New orders:
 - Spiriva 18 mcg MDI 2 puffs (1cap) QD
 - Ipratropium bromide 0.5mg/2.5 ml neb 1 q 6 hours (may be given with albuterol).
- Miscellaneous:
 - DuoNeb 0.5mg/2.5 mg/3 ML 1 neb QID
 - Resident to use spacer with MDI
 - Please administer medications containing albuterol 10 – 15 minutes prior to other inhalers/nebs.

2. Spirometry reviewed and reveals actual FEV₁/Predicted FEV₁ of:

- Mild > 80%
- Moderate 50 – 79%
- Severe 30 – 49%
- Very Severe < 30%.

3. * Smoking Cessation

- Educated resident regarding smoking cessation: YES NO N/A.
- Resident interested in smoking cessation: YES NO N/A.
 - New orders –
 - Nicoderm CQ 21 mg TD QD x 6 weeks, then 14 mg TD QD x 2 weeks, then 7 mg TD QD x 2 weeks. Start on cigarette quit day.
 - Nicoderm CQ 14 mg TD QD x 6 weeks, then 7 mg TD QD x 2 weeks. Start on cigarette quit day.

4. Administer Pneumococcal Vaccination:

- Pneumovax 23 – 0.5 ml IM x 1 dose
- Prevnar 13 – 0.5 ml IM x 1 dose

5. Referral for pulmonary rehabilitation.

6. * Referral to Pulmonary Associates, first available.

* Refer to pulmonology if mixed restrictive and obstructive pattern, has more than 2 admissions/year, has rapid FEV₁ decline, has had a lung surgery, lung transplant, is on oxygen therapy, 3 drugs for COPD or more, on phosphodiesterase-4 inhibitors.