



Note the **date** and **time**. Ensure **correct patient identification** using multiple identifiers.



ADMIT to General Pediatrics under the **attending physician**. Specify the admitting **team, location, and level of care**. Update medical history, mediations, and allergies.

A



DIAGNOSIS: provide the **working diagnosis/reason for admission** to hospital.

D



DIET: order an **age-appropriate diet** based on the child's presentation, considering available options such as breastfed, expressed breast milk (EBM), or formula for infants. For children, purees, regular diet, clear fluids, full fluids, easy-to-chew, low sodium, diabetic, etc. Specify the **route of administration** (NG tube, G-tube, PO) and consider any **dietary restrictions**. If the child is scheduled for upcoming procedures, sedated imaging, or surgery, consider the need for **NPO (nothing by mouth) status** and communicate this clearly in the dietary orders.

D



ACTIVITY: indicate any necessary activity restrictions based on the child's medical needs. Include details such as **limitations on physical activities, play, or mobility**. Consider any precautions such as **seizure or reflux precautions**.

A



VITAL SIGNS: specify the **frequency** for monitoring vital signs based on the child's condition and the level of acuity (eg. q1h, q4h, q8h, qShift). Include **parameters** for temperature, heart rate, respiratory rate, SpO2, and blood pressure. The decision to use **cardiorespiratory monitors** depends on the severity of the child's condition. **Continuous pulse oximetry** may be sufficient depending on the presentation.

V



IV/NG FLUIDS: order fluid type, route, and rate.

INTAKE AND OUTPUT: closely monitor intake and output, specify frequency, and notifying the physician if **urine output is < 1 cc/kg/hr**.

INVESTIGATIONS: order appropriate investigations based on the patient's condition, including but not limited to blood tests, imaging studies, cardiac investigations (ECG, echocardiogram), microbiological tests (blood cultures, urine culture, RPP, throat swab, etc.), and others, specifying the **urgency** (timed vs. STAT).

ISOLATION: specify the appropriate isolation precautions based on the child's medical condition (**airborne, contact, droplet, contact & droplet, sporicidal**, etc.).

I



DRUGS: ensure continuity of **home medications** as appropriate. Order any needed **PRN medications** and **essential treatments** based on the patient's presentation.

DRAINS: note any drains, monitor drain output, and drainage characteristics.

DRESSINGS: specify the type of dressing as well as the frequency of changes.

D

Do not forget to sign your orders.



March 2024

Dr. Katharine V. Jensen (Pediatrics Resident, University of Alberta) and Dr. Karen Forbes (Professor of Pediatrics, University of Alberta) for www.pedscases.com