



Summary of Changes – October 2006

Admission to CCU for Acute Coronary Syndrome Order Set

Vitals, Activity, Nursing

Added nursing discretion option for nasal cannula or mask for oxygen.

Glucose screening now has option for four times daily as well as a subcutaneous insulin management protocol. Institutions are encouraged to consider an IV insulin protocol for persistently elevated blood sugars.

Added option for Foley catheter to be inserted and removed at nursing discretion.

Added diet options of no caffeine if adenosine stress test planned, NPO, and Consistent Carbohydrate diet.

Added recommendation for depression screening on day 2 with references from *Consensus Development Conference, 2006; Fish, 2003; and Glassman, 2002.*

Sedative/Symptom Medication, Medication/Home Medication

- * Recommended each institution choose one agent then establish patient selection and dosing criteria guidelines for low molecular weight heparin.
- * Added PTT every 6 hours after start of drip then 6 hours after every drip rate change to unfractionated heparin.

Lab/Diagnostics

Removed Liver profile from tests.

Added AST to check for putting patients on statins.

Listed troponin every ___ hours with footnote that each institution should choose either the troponin T or the troponin I test.

Removed CKMB.

Added PTT every AM while on heparin.

**An asterisk indicates any changes in clinical practice recommendations*