

**REMINDER: ALL MEDICATION ORDERS REQUIRE DOSE, ROUTE, FREQUENCY AND INDICATION
DO NOT USE ABBREVIATIONS**

DOCTORS ORDERS ANISTREPLASE (EMINASE®)	CHECK OFF/ INITIALS
1. CXR, CBC with platelets, PT, APTT, CMP, Type and Screen packed cells.	
2. CPK and CK-MB on admission and repeat in 3 hours, 12 hours, and 24 hours AFTER INFUSION COMPLETED	
3. EKG just prior to infusion unless done in Emergency Room shortly before initiation of infusion and repeat 1 hour after infusion completed.	
4. Place (3) #18 gauge Intravenous Catheters peripherally-connect to Heparin locks. No lines are to be discontinued the first 12-24 hours after Anistreplase (Eminase®) infusion.	
5. Nitroglycerin (Nitrostat®) 0.4mg sublingual X 2, check for ST segment changes.	
6. Start Nitroglycerin Intravenous at 10mcg/minute and increase at 10mcg/minute increments at 5-minute intervals to maintain Systolic Blood Pressure between 100-120mmHg.	
7. Hydrocortisone (Solu-Cortef®) 100mg Intravenous prior to Anistreplase (Eminase®) infusion.	
8. Have patient chew (1) low dose Aspirin (81mg) and start low dose Aspirin 1 tablet (81mg) by mouth every day	
9. Attach non-invasive Blood Pressure monitor to one arm.	
10. Anistreplase (Eminase®) 30 units in 5mL sterile water. DO NOT shake the vial. Infuse over 2-5 minutes. If Blood Pressure falls, elevate patient's legs and stop Nitroglycerin infusion temporarily.	
11. During Anistreplase (Eminase®) infusion, record a short rhythm strip with the highest ST segment every 10 minutes X 4.	
12. Hgb and Hct every day X 3	
13. No IM injections for 48 hours after Anistreplase (Eminase®) infusion is ended	
14. Draw lab work via Heparin locks only.	
15. No arterial punctures.	

Physician/Date/Time:	Nurse/Date/Time:	Secretary/Date/Time:
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Full page of orders requires only one physician, one nurse and one clerical signature



Original to Patient's Chart