

**CF ADMISSION PLAN**  
**TODAY'S DATE:**

**PATIENT NAME:**  
**MR#:**  
**HT:**  
**WT:**  
**IV ANTIBIOTICS:**

1. Beta lactam antibiotic.
  2. Tobramycin 3 to 4 mg/kg/dose
  3. Albuterol neb 2.5 mg QID.
  4. Chest PT QID.
  5. Pulmozyme 2.5 mg BID (unless specified qd by MD)
  6. Continue usual outpatient enzymes and vitamins.(see home meds list below)  
Can d/c oral antibiotics (except Zithromax); can d/c inhaled antibiotics/TOBI.
  7. Check weights 3 x/week.
  8. Nutrition and PT consults.
  9. LABS: CBC with diff, ESR, Chem 8  
Hepatic Panel including GGT, Pre-albumin, HbA1c, total IgE,  
Vitamin A, D (1,25 OH), and E, PT/PTT, Calcium and Zinc levels  
Consider urine HCG if appropriate. Weekly Tobra TROUGH AND Creatinine.
  10. Room air O2 sat q shift.
  11. U/A.
  12. Sputum Cx **\*\*Label specimen as CF patient and put on special comments section (in computer): CF patient**  
(call Microbiology: Send to Columbia for Synergy testing if multiply resistant).
  13. Tobra levels (trough just prior to hanging  
the 3rd dose and peak is 30 minutes after end of infusion of 3rd dose)
  14. PICC line placement (ask patient if:  
PICU (Kathy Culver) or Interventional Radiology (make appropriate scheduling)
  15. CXR (P/A and lateral).
  16. Spirometry (call 48137) on admission, 1 week and end of 2 weeks  
Full PFTs when needed (call 48137 ask for Susan or Natalie, and schedule ahead of time)
  17. Others: \_\_\_\_\_Steroids. \_\_\_\_\_Endocrine. \_\_\_\_\_GI/GER. \_\_\_\_\_Psych.  
\_\_\_\_\_Pain Service. \_\_\_\_\_ABPA w/u. \_\_\_\_\_MAI/AFB.  
\_\_\_\_\_ENT. \_\_\_\_\_CT SINUSES.
- Baseline FEV1 (recent date: \_\_\_\_\_):  
FEV1 on admission (date done: \_\_\_\_\_):  
Previous Sputum culture (recent date: \_\_\_\_\_):

**HOME MEDS:**