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| **Practice Site Location(s)** |
| [ ]  VUH | [ ]  Children’s | [ ]  DOT | [ ]  VMG Off-site locations | [ ]  VMG | [ ]  VPH | [ ]  Other |
| **Developed & Approved by:** |
| **Name**: **Name of Supervising Physician** **Title: Supervising Physician** |
| XXXXX **APRNs/PAs assigned to this protocol in the VUMC Protocol Warehouse** |

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1. Population:

Define target patient population here

1. Indications:

Insert brief statement regarding indication(s) for use of protocol.

1. Definitions:
	1. Insert definitions here if indicated for this protocol
	2. If there are no definitions, write “None” in this section.
2. Additional Competencies Required:
	1. Insert competency detail here if indicated for this protocol.
	2. If there are no Additional Competencies Required, write “None” in this section.
3. Assessment:
4. Physical Exam: describe typical physical exam findings for disease process
5. History: describe typical history findings for disease process
6. Diagnostic Data:

Describe typical diagnostic data to be obtained (lab, radiology, other diagnostics)

1. Differential Diagnosis:

List other possible diagnoses requiring “rule out” and/or further evaluation.

1. Goal(s) of Treatment:

Expected outcomes related to treatment of disease process

1. Intervention/Treatment:
	1. List specific interventions and treatments
	2. Include criteria for when to consult physician:

1. Complications:

List specific complications for disease process and treatment; include monitoring criteria and specific interventions for complications

1. Medications by Formulary:

List medications by formulary typically used in conjunction with this procedure (include pre-procedure medications and discharge medications)

1. References:

List relevant references used in the development of the protocol.

Use APA format [for assistance, visit <http://owl.english.purdue.edu/owl/resource/560/01/>]