

Adult Anesthesia Post-Op [1461]

Nursing

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<input checked="" type="checkbox"/> Bedside glucose	Routine, Once For 1 Occurrences Via Finger Stick or Serum for all diabetic patients on arrival to PACU, PACU
<input checked="" type="checkbox"/> Notify Anesthesia	Routine, Until discontinued, Starting S, If glucose is below 70 mg/dL or above 250 mg/dL, PACU
<input checked="" type="checkbox"/> Bedside glucose	Routine, Conditional Frequency For 1 Occurrences Via serum or finger stick for all diabetic patients on arrival to PACU, PACU
<input type="checkbox"/> Ok to use Central Line	Routine, Until discontinued, Starting S Device: Central Line PACU
<input type="checkbox"/> Discontinue arterial line	Routine, Once Prior to discharge from the PACU, PACU
<input type="checkbox"/> Deaccess Port-A-Cath	Routine, Once, PACU

IV Fluids

Maintenance IV Fluids (Single Response)

<input type="checkbox"/> lactated Ringer's infusion	30 mL/hr, intravenous, continuous, Post-op
<input type="checkbox"/> For patients on dialysis OR coming for dialysis access - sodium chloride 0.9 % infusion	30 mL/hr, intravenous, continuous, Post-op
<input checked="" type="checkbox"/> For patients diagnosed with Renal Failure and/or CHF - sodium chloride 0.9 % infusion	500 mL, intravenous, at 30 mL/hr, PRN, If Patient diagnosed with Renal Failure and/or Congestive Heart Failure, Post-op

Post-Op Medications

Post-Op Pain Medications: Option 1 (Single Response)

<input checked="" type="checkbox"/> Option 1 (Single Response)	
<input checked="" type="checkbox"/> fentaNYL (SUBLIMAZE) injection	25 mcg, intravenous, every 5 min PRN, severe pain (score 7-10), OR any Pain Score GREATER than 0 while in the PACU, For 6 Doses, PACU Option 1 Medication: Monitor and record pain scores and respiratory status.
<input type="checkbox"/> morPHINE injection	3 mg, intravenous, every 5 min PRN, severe pain (score 7-10), OR any Pain Score GREATER than 0 while in the PACU, For 5 Doses, PACU Option 1 Medication: Monitor and record pain scores and respiratory status.
<input type="checkbox"/> HYDROmorphone (DILAUDID) injection	0.3 mg, intravenous, every 5 min PRN, severe pain (score 7-10), OR any Pain Score GREATER than 0 while in the PACU, For 6 Doses, PACU Option 1 Medication: Monitor and record pain scores and respiratory status.

Post-Op Pain Medications: Option 2 (Single Response)

Option 2 will only be administered ONLY if patient has failed to achieve adequate pain relief from Option 1 maximum dose

<input checked="" type="checkbox"/> Option 2 (Single Response)	
<input type="checkbox"/> fentaNYL (SUBLIMAZE) injection	25 mcg, intravenous, every 5 min PRN, severe pain (score 7-10), OR any Pain Score GREATER than 0 while in the PACU, For 6 Doses, PACU Option 2 Medication: Option 2 will only be administered ONLY if patient has failed to achieve adequate pain relief from Option 1 maximum dose Monitor and record pain scores and respiratory status.

<input type="checkbox"/> morPHINE injection	3 mg, intravenous, every 5 min PRN, severe pain (score 7-10), OR any Pain Score GREATER than 0 while in the PACU, For 5 Doses, PACU Option 2 Medication: Option 2 will only be administered ONLY if patient has failed to achieve adequate pain relief from Option 1 maximum dose Monitor and record pain scores and respiratory status.
<input checked="" type="checkbox"/> HYDROmorphone (DILAUDID) injection	0.3 mg, intravenous, every 5 min PRN, severe pain (score 7-10), OR any Pain Score GREATER than 0 while in the PACU, For 6 Doses, PACU Monitor and record pain scores and respiratory status.Option 2 Medication: Option 2 will only be administered ONLY if patient has failed to achieve adequate pain relief from Option 1 maximum dose Monitor and record pain scores and respiratory status.

Post-Op Pain Medications: Additional

<input type="checkbox"/> acetaminophen (OFIRMEV) injection	1,000 mg, intravenous, for 15 Minutes, once, For 1 Doses, PACU
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No Analgesics Indicated for Post Op Pain Management

<input type="checkbox"/> Anesthesia communication	Routine, Until discontinued, Starting S No analgesics indicated for post op pain management, PACU
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Post-Op Shivering

<input type="checkbox"/> meperidine (DEMEROL) injection	12.5 mg, intravenous, every 5 min PRN, shivering, For 2 Doses, PACU May give a second dose of 12.5 milligrams after 5 minutes if patient continues to shiver. For PACU Use Only. Monitor and record respiratory status. Formulary approved non-pain management indication(s) :
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naloxone (NARCAN) - for Respiratory Depression

For patients with Respiratory Rate LESS than 8 per minute OR if patient is stuporous or unarousable.

<input checked="" type="checkbox"/> naloxone (NARCAN) injection	0.1 mg, intravenous, every 1 min PRN, respiratory depression, as needed for respiratory rate 8 per minute or less OR patient somnolent and difficult to arouse (POSS GREATER than 3)., PACU Repeat Naloxone 0.1 mg once in 2 minutes if necessary (MAXIMUM 0.2 mg). If naloxone is needed, please call the ordering physician and/or CERT team. Monitor vital signs (pulse oximetry, P/R/BP) every 15 minutes for 3 times. Notify Anesthesia if administered.
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Post-Op Antiemetics

<input checked="" type="checkbox"/> ondansetron (ZOFTRAN) IV or Oral	"Or" Linked Panel
<input checked="" type="checkbox"/> ondansetron ODT (ZOFTRAN-ODT) disintegrating tablet	4 mg, oral, once PRN, nausea, vomiting, For 1 Doses, PACU Give if patient is able to tolerate oral medication.
<input checked="" type="checkbox"/> ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, once PRN, nausea, vomiting, For 1 Doses, PACU Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) IV or Oral	"Or" Linked Panel
<input checked="" type="checkbox"/> promethazine (PHENERGAN) IV	6.25 mg, intravenous, every 6 hours PRN, nausea, vomiting, PACU Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) tablet	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, PACU Give if patient is able to tolerate oral medication.

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<input checked="" type="checkbox"/> ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, once PRN, nausea, vomiting, For 1 Doses, PACU Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) IV or Oral	"Or" Linked Panel
<input checked="" type="checkbox"/> promethazine (PHENERGAN) 12.5 mg in sodium chloride 0.9 % 0.9 % 20 mL for Alaris pump syringe option	6.25 mg, intravenous, every 6 hours PRN, nausea, vomiting, PACU Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral or rectal medication OR if a faster onset of action is required.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) tablet	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, PACU Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.

Post-Op Antiemetics

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<input checked="" type="checkbox"/> ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, once PRN, nausea, vomiting, For 1 Doses, PACU Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) IV or Oral	"Or" Linked Panel
<input checked="" type="checkbox"/> promethazine (PHENERGAN) 25 mg in sodium chloride 0.9 % 50 mL IVPB	12.5 mg, intravenous, for 30 Minutes, every 6 hours PRN, nausea, vomiting, PACU Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral or rectal medication OR if a faster onset of action is required.
<input checked="" type="checkbox"/> promethazine (PHENERGAN) tablet	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, PACU Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.

Post-Op Antihypertensives

<input type="checkbox"/> labetalol (NORMODYNE, TRANDATE) injection vial	10 mg, intravenous, every 15 min PRN, high blood pressure, for Systolic Blood Pressure GREATER than 160., For 2 Doses, PACU Do not give if heart rate is LESS than 60 beats per minute. Maximum daily dose of 20 mg. For PACU Use Only
<input type="checkbox"/> hydrALAZINE (APRESOLINE) injection	5 mg, intravenous, every 20 min PRN, high blood pressure, for Systolic Blood Pressure GREATER than 160., For 2 Doses, PACU Use for heart rate LESS than 60 beats per minute. Maximum Daily Dose of 10 mg. For PACU Use Only HOLD parameters for this order: Contact Physician if:

Post-Op Muscle Relaxers

<input type="checkbox"/> methocarbamol (ROBAXIN) 750 mg in sodium chloride 0.9 % 100 mL IVPB	750 mg, intravenous, for 60 Minutes, once PRN, muscle spasms, spasms, For 1 Doses, PACU
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Post-Op Anxiolytics (Single Response)

<input type="checkbox"/> midazolam (VERSED) injection	2 mg, intravenous, once PRN, anxiety, For 1 Doses, PACU
<input type="checkbox"/> LORazepam (ATIVAN) injection	0.5 mg, intravenous, once PRN, anxiety, may repeat one time in 10 minutes., For 1 Doses, PACU

Post-Op Respiratory

[] albuterol (PROVENTIL) nebulizer solution	2.5 mg, nebulization, once, For 1 Doses, PACU Aerosol Delivery Device:
[] ipratropium (ATROVENT) 0.02 % nebulizer solution	0.5 mg, nebulization, once, For 1 Doses, PACU Aerosol Delivery Device:

Post-Op Itching

[] diphenhydrAMINE (BENADRYL) injection	25 mg, intravenous, once PRN, itching, For 1 Doses, PACU Diphenhydramine (BENADRYL) injection is the 1st choice for itching.
[] nalbuphine (NUBAIN) injection	2 mg, intravenous, every 2 hour PRN, itching, PACU Nalbuphine (NUBAIN) injection is the 2nd option for itching if diphenhydramine (BENADRYL) is ineffective.

Post-Op Infusions

[] DEXMEDETomidine (PRECEDEX) 4 mcg/mL in sodium chloride 0.9 % 50 mL infusion	0.1-0.7 mcg/kg/hr, intravenous, continuous, PACU
[] norepinephrine (LEVOPHED) infusion	2-30 mcg/min, intravenous, continuous, PACU

Post-Op AOD Medications

Post-Op AOD orders are only for AOD or PACU patient prior to being discharged home

Post-Op AOD Mild Pain (Pain Score 1-3) (Single Response)

() acetaminophen (TYLENOL) tablet	650 mg, oral, once PRN, mild pain (score 1-3), For 1 Doses, PACU For PACU/AOD Use Only
() acetaminophen (TYLENOL) tablet	1,000 mg, oral, once PRN, mild pain (score 1-3), For 1 Doses, PACU For PACU/AOD Use Only

Post-Op AOD Moderate Pain (Pain Score 4-6) (Single Response)

() HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	1 tablet, oral, every 4 hours PRN, moderate pain (score 4-6), PACU For PACU/AOD Use Only
() HYDROcodone-acetaminophen (NORCO) 7.5-325 mg per tablet	1 tablet, oral, every 4 hours PRN, moderate pain (score 4-6), PACU For PACU/AOD Use Only
() HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	1 tablet, oral, every 4 hours PRN, moderate pain (score 4-6), PACU For PACU/AOD Use Only
() HYDROcodone-acetaminophen (HYCET) 7.5-325 mg/15 mL solution	10 mL, oral, every 4 hours PRN, moderate pain (score 4-6), PACU For PACU/AOD Use Only.
() If patient received IV Acetaminophen during procedure - HYDROmorphine (DILAUDID) tablet	1 mg, oral, every 6 hours PRN, moderate pain (score 4-6), PACU For PACU/AOD Use Only.
() If patient received IV Acetaminophen during procedure - oxyCODONE (ROXICODONE) immediate release tablet	2.5 mg, oral, every 4 hours PRN, moderate pain (score 4-6), PACU For PACU/AOD Use Only.

Post-Op AOD Severe Pain (Pain Score 7-10) (Single Response)

() HYDROcodone-acetaminophen (NORCO) 7.5-325 mg per tablet	2 tablet, oral, every 4 hours PRN, severe pain (score 7-10), PACU For PACU/AOD Use Only
() HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	2 tablet, oral, every 4 hours PRN, severe pain (score 7-10), PACU For PACU/AOD Use Only
() If patient received IV Acetaminophen during procedure - HYDROmorphine (DILAUDID) tablet	2 mg, oral, every 6 hours PRN, severe pain (score 7-10), PACU For PACU/AOD Use Only

() If patient received IV Acetaminophen during procedure - oxyCODONE (ROXICODONE) immediate release tablet 5 mg, oral, every 4 hours PRN, severe pain (score 7-10), PACU
For PACU/AOD Use Only

Post-Op AOD - Other Pain Meds

[] gabapentin (NEURONTIN) oral, once, For 1 Doses, PACU
For PACU/AOD use only

[] traMADol (ULTRAM) tablet 50 mg, oral, once, For 1 Doses, PACU
For PACU/AOD use only

Labs

Cardiology

Imaging

Diagnostic X-Ray

[] Chest 1 Vw Portable Routine, 1 time imaging For 1
If NEW central line is placed perioperatively, PACU & Post-op

Respiratory

Respiratory

[] Mechanical ventilation Routine
Mechanical Ventilation:
Vent Management Strategies:
Vent Management Strategies:
Vent Management Strategies:
Vent Management Strategies:

[X] Oxygen therapy Routine, Continuous
Device 1: Nasal Cannula
Rate in liters per minute:
Rate in tenths of a liter per minute:
O2 %:
Device 2:
Device 3:
Titrate to keep O2 Sat Above: Other (Specify)
Specify titration to keep O2 Sat (%) Above: 94
Indications for O2 therapy: Immediate post-op period
CONT/O2, Nasal Cannula or Mask to keep SaO2 greater than 94%. If unable to wean off Mask may transfer to next level of care with up to 6 liters per minute Oxygen.
PACU & Post-op

Rehab

Additional Orders