

**Nursing**

**Vitals**

Vital signs - T/P/R/BP (for Preservative Free Morphine Administration) Routine, Every 30 min For 24 Hours  
Nurse to reschedule vitals:

- Every 30 Minutes for 4 Times (First 2 Hours)
- Then, every 1 Hour for 6 Times (Next 6 Hours)
- Then, every 2 Hours for 6 Times (Next 12 Hours)
- Then, every 4 Hours for 1 Time (Next 4 Hours), PACU & Post-op

Pulse oximetry Routine, Every 30 min For 24 Hours  
Current FIO2 or Room Air:  
Nurse to reschedule vitals:

- Every 30 Minutes for 4 Times (First 2 Hours)
- Then, every 1 Hour for 6 Times (Next 6 Hours)
- Then, every 2 Hours for 6 Times (Next 12 Hours)
- Then, every 4 Hours for 1 Time (Next 4 Hours), PACU & Post-op

**Level of Sedation**

Neurological assessment Routine, Once  
Assessment to Perform: Level of Consciousness  
Nurse to reschedule vitals:

- Every 30 Minutes for 4 Times (First 2 Hours)
- Then, every 1 Hour for 6 Times (Next 6 Hours)
- Then, every 2 Hours for 6 Times (Next 12 Hours)
- Then, every 4 Hours for 1 Time (Next 4 Hours), PACU & Post-op

**Peripheral Vascular Assessment**

Peripheral vascular assessment Routine, Every 2 hours  
Until numbness/tingling is resolved., PACU & Post-op

**Nursing**

Straight cath Routine, Once For 1 Occurrences  
For URINARY RETENTION: If patient unable to void for 6 hours, one time, PACU & Post-op

Foley catheter care Routine, Until discontinued, Starting S  
Orders: Maintain  
PACU & Post-op

**Notify Anesthesia**

[X] Notify Anesthesia	Routine, Until discontinued, Starting S, -Nausea refractory to Promethazine
	-Respiratory rate less than 10/min and SpO2 less than 92%
	-Itching refractory to Nalbuphine
	-Patient not arousable
	-URINARY RETENTION: If patient unable to void for 6 hours, PACU & Post-op

## Medication

### Scheduled Medications

[X] acetaminophen (TYLENOL) tablet	650 mg, oral, every 6 hours, For 48 Hours Total Tylenol/acetaminophen dose (which includes IV, PO or combination i.e. Norco, APAP, etc.) should not exceed 3g/day and 2g/day in case of cirrhotic patients.
[X] Ketorolac 30 mg followed by 15 mg	<b>"Followed by" Linked Panel</b>
[X] ketorolac (TORADOL) injection 30 mg x 1	30 mg, intravenous, once, For 1 Doses Give 30mg dose if not already given in OR. Administer on arrival after verification with anesthesia team. Max dosage 120mg in 24 hours.
[X] ketorolac (TORADOL) injection 15 mg	15 mg, intravenous, every 6 hours, Starting H+6 Hours, For 24 Hours Maximum dosage not to exceed 120 mg in 24 hours.
[X] ibuprofen (ADVIL, MOTRIN) tablet	600 mg, oral, every 6 hours, Starting H+30 Hours, For 24 Hours Start 6 hrs after final dose of ketorolac administered. Max dose 3200mg per day.

### Antiemetics - HMSL, HMWB Only

[X] ondansetron (ZOFTRAN) IV or Oral	<b>"Or" Linked Panel</b>
[X] ondansetron ODT (ZOFTRAN-ODT) disintegrating tablet	4 mg, oral, every 8 hours PRN, nausea, vomiting, For 24 Hours, PACU & Post-op Give if patient is able to tolerate oral medication.
[X] ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, For 24 Hours, PACU & Post-op Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
[X] promethazine (PHENERGAN) IV or Oral or Rectal	<b>"Or" Linked Panel</b>
[X] promethazine (PHENERGAN) 12.5 mg in sodium chloride 0.9 % 0.9 % 20 mL for Alaris pump syringe option	6.25 mg, intravenous, at 60 mL/hr, for 20 Minutes, every 6 hours PRN, nausea, vomiting, For 24 Hours, PACU & Post-op 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.
[X] promethazine (PHENERGAN) tablet	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, For 24 Hours, PACU & Post-op Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.
[X] promethazine (PHENERGAN) suppository	12.5 mg, rectal, every 6 hours PRN, nausea, vomiting, For 24 Hours, PACU & Post-op Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.

### Antiemetics - HMH Only

[X] ondansetron (ZOFTRAN) IV or Oral	<b>"Or" Linked Panel</b>
[X] ondansetron ODT (ZOFTRAN-ODT) disintegrating tablet	4 mg, oral, every 8 hours PRN, nausea, vomiting, For 24 Hours Give if patient is able to tolerate oral medication.

[X] ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, For 24 Hours Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
[X] promethazine (PHENERGAN) IV or Oral or Rectal	<b>"Or" Linked Panel</b>
[X] promethazine (PHENERGAN) 12.5 mg IV	6.25 mg, intravenous, every 6 hours PRN, nausea, vomiting, For 24 Hours 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.
[X] promethazine (PHENERGAN) tablet	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, For 24 Hours Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.
[X] promethazine (PHENERGAN) suppository	12.5 mg, rectal, every 6 hours PRN, nausea, vomiting, For 24 Hours Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.

#### Antiemetics - HMSJ, HMW, HMSTC, HMTW Only

[X] ondansetron (ZOFTRAN) IV or Oral	<b>"Or" Linked Panel</b>
[X] ondansetron ODT (ZOFTRAN-ODT) disintegrating tablet	4 mg, oral, every 8 hours PRN, nausea, vomiting, For 24 Hours Give if patient is able to tolerate oral medication.
[X] ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, For 24 Hours Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
[X] promethazine (PHENERGAN) IV or Oral or Rectal	<b>"Or" Linked Panel</b>
[X] promethazine (PHENERGAN) 12.5 mg IV	12.5 mg, intravenous, every 6 hours PRN, nausea, vomiting, For 24 Hours 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.
[X] promethazine (PHENERGAN) tablet	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, For 24 Hours Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.
[X] promethazine (PHENERGAN) suppository	12.5 mg, rectal, every 6 hours PRN, nausea, vomiting, For 24 Hours Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.

#### Antiemetics - HMSTJ Only

[X] ondansetron (ZOFTRAN) IV or Oral	<b>"Or" Linked Panel</b>
[X] ondansetron ODT (ZOFTRAN-ODT) disintegrating tablet	4 mg, oral, every 8 hours PRN, nausea, vomiting, For 24 Hours, PACU & Post-op Give if patient is able to tolerate oral medication.
[X] ondansetron (ZOFTRAN) 4 mg/2 mL injection	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, For 24 Hours, PACU & Post-op Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
[X] promethazine (PHENERGAN) IVPB or Oral or Rectal	<b>"Or" Linked Panel</b>
[X] promethazine (PHENERGAN) 25 mg in sodium chloride 0.9 % 50 mL IVPB	6.25 mg, intravenous, for 30 Minutes, every 6 hours PRN, nausea, vomiting, For 24 Hours, PACU & Post-op 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.
[X] promethazine (PHENERGAN) tablet	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, For 24 Hours, PACU & Post-op Give if ondansetron (ZOFTRAN) is ineffective and patient is able to tolerate oral medication.

<input checked="" type="checkbox"/> promethazine (PHENERGAN) suppository	12.5 mg, rectal, every 6 hours PRN, nausea, vomiting, For 24 Hours, PACU & Post-op Give if ondansetron (ZOFTRAN) is ineffective and patient is UNable to tolerate oral medication.
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**Itching**

<input checked="" type="checkbox"/> nalbuphine (NUBAIN) injection	2 mg, intravenous, every 2 hour PRN, itching, For 8 Doses, PACU & Post-op
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**Respiratory (Naloxone)**

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)., For 24 Hours, PACU & Post-op 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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**Moderate Pain (Pain Score 4-6)**

<input type="checkbox"/> ketorolac (TORADOL) IV - do not order if scheduled ketorolac is ordered (Single Response)	
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Do NOT use in patients with eGFR LESS than 30 mL/min AND/OR patients LESS than 17 years of age.  
WARNING: Use is contraindicated for treatment of perioperative pain OR in the setting of coronary artery bypass graft (CABG) surgery.

<input type="checkbox"/> For patients ages GREATER than 64 OR weight LESS than 50 kg OR eGFR 30-59 mL/min - ketorolac (TORADOL) injection	15 mg, intravenous, every 6 hours PRN, moderate pain (score 4-6), For 24 Hours Do not order/administer PRN Ketorolac within the first 24 hours with scheduled Ketorolac. PRN Ketorolac may not be administered within 6 hours of last dose.
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<input type="checkbox"/> For patients ages 17-64 AND weight GREATER than or EQUAL to 50 kg AND eGFR at least 60 mL/min - ketorolac (TORADOL) injection	30 mg, intravenous, every 6 hours PRN, moderate pain (score 4-6), For 24 Hours Do not order/administer PRN Ketorolac within the first 24 hours with scheduled Ketorolac. PRN Ketorolac may not be administered within 6 hours of last dose.
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<input type="checkbox"/> oxyCODone (ROXICODONE) or oxyCODONE-acetaminophen (PERCOCET) (Single Response)	
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<input type="checkbox"/> oxyCODone (ROXICODONE) immediate release tablet	5 mg, oral, every 4 hours PRN, moderate pain (score 4-6)
<input type="checkbox"/> oxyCODONE-acetaminophen (PERCOCET) 5-325 mg per tablet	1 tablet, oral, every 4 hours PRN, moderate pain (score 4-6), For 24 Hours, PACU & Post-op

**Severe Pain (Pain Score 7-10) (Single Response)**

<input type="checkbox"/> oxyCODone (ROXICODONE) immediate release tablet	10 mg, oral, every 4 hours PRN, severe pain (score 7-10)
<input type="checkbox"/> oxyCODONE-acetaminophen (PERCOCET) 5-325 mg per tablet	2 tablet, oral, every 4 hours PRN, severe pain (score 7-10), For 24 Hours, PACU & Post-op