

Primary Hyperparathyroidism Parathyroidectomy Discharge [3585]

General

Discharge (Single Response)

(X) Discharge patient	Discharge at 12:00 AM Specific Destination: Is a readmission planned within 30 days?
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Discontinue tubes/drains/telemetry

[] Discontinue Telemetry	Routine, Once
[] Discontinue Foley catheter	Routine, Once
[] Discharge home with Foley catheter	Routine, Once
[X] Discontinue IV	Routine, Once For 1 Occurrences
[] Deaccess port	
[] Deaccess Port-a-cath	Routine, Once
[] heparin, porcine (PF) 100 unit/mL injection	intra-catheter, once

Discharge Activity (Selection Required)

[X] Activity as tolerated	Routine, Normal
[] Ambulate with assistance or assistive device	Routine, Normal
[] Lifting restrictions	Routine, Normal, No lifting over 10 pounds.
[] Weight bearing restrictions (specify)	Routine, Normal Weight Bearing Status: Extremity: ***
[] Moderate bedrest with complete pelvic rest (no tampons, douching, sex)	Routine, Normal
[] Complete pelvic rest (no tampons, douching, sex)	Routine, Normal
[] No driving for 2 weeks	Routine, Normal
[] Other restrictions (specify):	Routine, Normal, ***

Discharge Activity

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[] Lifting restrictions	Routine, Normal, No lifting over 10 pounds.
[] Weight bearing restrictions (specify)	Routine, Normal Weight Bearing Status: Extremity: ***
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[] Complete pelvic rest (no tampons, douching, sex)	Routine, Normal
[] No driving for 2 weeks	Routine, Normal
[] Other restrictions (specify):	Routine, Normal, ***

Wound/Incision Care

[] Discharge wound care	Routine, Normal, ***
[] Discharge incision care	Routine, Normal, ***
[] Discharge dressing	Routine, Normal, ***

Discharge Diet (Single Response) (Selection Required)

() Discharge Diet	Routine, Normal Discharge Diet:
() Discharge Diet- Regular	Routine, Normal Discharge Diet: Regular

Discharge Diet (Single Response)

() Discharge Diet	Routine, Normal Discharge Diet:
() Discharge Diet- Regular	Routine, Normal Discharge Diet: Regular

Patient to notify physician

[X] Call physician for:	Routine, Normal, Temperature greater than 100.5
[] Call physician for: Persistent nausea or vomiting	Routine, Normal
[] Call physician for: severe uncontrolled pain	Routine, Normal
[] Call physician for: redness, tenderness, or signs of infection (pain, swelling, redness, odor or green/yellow discharge from affected area)	Routine, Normal
[] Call physician for difficulty breathing, chest pain, persistent dizziness or light-headedness	Routine, Normal
[] Call physician for:	Routine, Normal, ***

Additional Patient Discharge Education

[] Nurse to provide discharge education	Routine, Once Patient/Family: Both Education for: Other (specify) Specify: Nurse to provide patient education
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Discharge Instructions

[] Additional discharge instructions for Patient	Routine, Normal, ***
[] Discharge instructions for Nursing- Will not show on AVS	Routine, Once ***

Place Follow-Up Order (Selection Required)

[] Follow-up with me	Follow up with me: Clinic Contact: Follow up in: On date: Appointment Time:
[] Follow-up with primary care physician	Routine, Normal
[] Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
[] Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
[] Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
[] Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
[] Follow-up with department	Details

Place Follow-Up Order

[] Follow-up with me	Follow up with me: Clinic Contact: Follow up in: On date: Appointment Time:
[] Follow-up with primary care physician	Routine, Normal

[] Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
[] Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
[] Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
[] Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
[] Follow-up with department	Details

Medications

Pain Management

[] For Mild Pain - acetaminophen (TYLENOL) tablet	500 mg, oral, every 6 hours PRN, mild pain (score 1-3)
[] For Moderate Pain - acetaminophen (TYLENOL) tablet	1,000 mg, oral, every 8 hours PRN, moderate pain (score 4-6)
[] For Severe Pain - acetaminophen-codeine (TYLENOL WITH CODEINE #3) 300-30 mg per tablet	1 tablet, oral, every 6 hours PRN, severe pain (score 7-10)