

**General**

**Common Present on Admission Diagnosis**

<input type="checkbox"/> Present on Admission	Details
<input type="checkbox"/> Abdominal pain	Details
<input type="checkbox"/> Back pain	Details
<input type="checkbox"/> Chest pain	Details
<input type="checkbox"/> Cough	Details
<input type="checkbox"/> COVID - 19	Details
<input type="checkbox"/> Dizziness	Details
<input type="checkbox"/> Fall	Details
<input type="checkbox"/> Fever	Details
<input type="checkbox"/> Headache	Details
<input type="checkbox"/> Hypertension	Details
<input type="checkbox"/> Nausea	Details
<input type="checkbox"/> Shortness of breath	Details
<input type="checkbox"/> Vomiting	Details
<input type="checkbox"/> Weakness-generalized	Details

**Admission or Observation (Single Response) (Selection Required)**

<input type="radio"/> Admit to Inpatient	Admitting Physician: Level of Care: Patient Condition: Bed request comments: Certification: I certify that based on my best clinical judgment and the patient's condition as documented in the HP and progress notes, I expect that the patient will need hospital services for two or more midnights.
<input type="radio"/> Outpatient observation services under general supervision	Admitting Physician: Patient Condition: Bed request comments:
<input type="radio"/> Outpatient in a bed - extended recovery	Admitting Physician: Bed request comments:

**Admission or Observation (Single Response)**

Patient has active status order on file

<input type="radio"/> Admit to Inpatient	Admitting Physician: Level of Care: Patient Condition: Bed request comments: Certification: I certify that based on my best clinical judgment and the patient's condition as documented in the HP and progress notes, I expect that the patient will need hospital services for two or more midnights.
<input type="radio"/> Outpatient observation services under general supervision	Admitting Physician: Patient Condition: Bed request comments:
<input type="radio"/> Outpatient in a bed - extended recovery	Admitting Physician: Bed request comments:

**Admission (Single Response)**

Patient has active status order on file.

Admit to inpatient

Admitting Physician:  
 Level of Care:  
 Patient Condition:  
 Bed request comments:  
 Certification: I certify that based on my best clinical judgment and the patient's condition as documented in the HP and progress notes, I expect that the patient will need hospital services for two or more midnights.

**Code Status**

Full code

Code Status decision reached by:  
 Post-op

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DNR (Do Not Resuscitate) (Selection Required)

DNR (Do Not Resuscitate)

Did the patient/surrogate require the use of an interpreter?  
 Did the patient/surrogate require the use of an interpreter?  
 Does patient have decision-making capacity?  
 Post-op

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Consult to Palliative Care Service

Priority:  
 Reason for Consult?  
 Order?  
 Name of referring provider:  
 Enter call back number:

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Consult to Social Work

Reason for Consult:  
 Post-op

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Modified Code

Did the patient/surrogate require the use of an interpreter?  
 Did the patient/surrogate require the use of an interpreter?  
 Does patient have decision-making capacity?  
 Modified Code restrictions:  
 Post-op

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Treatment Restrictions

I understand that if the patient is NOT in a cardiopulmonary arrest, the selected treatments will NOT be provided. I understand that all other unselected medically indicated treatments will be provided.  
 Treatment Restriction decision reached by:  
 Specify Treatment Restrictions:  
 Post-op

**Isolation**

Airborne isolation status

Airborne isolation status

Details

Mycobacterium tuberculosis by PCR - If you suspect Tuberculosis, please order this test for rapid diagnostics.

Once, Sputum, Post-op

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Contact isolation status

Details

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Droplet isolation status

Details

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Enteric isolation status

Details

**Precautions**

Aspiration precautions

PACU & Post-op

Fall precautions

Increased observation level needed:  
 PACU & Post-op

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Latex precautions

PACU & Post-op

Seizure precautions

Increased observation level needed:  
 PACU & Post-op

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Spinal precautions

PACU & Post-op

**Nursing**

**Vital Signs (Single Response)**

Vital signs - T/P/R/BP

Routine, Per unit protocol, PACU & Post-op

**Activity**

<input type="checkbox"/> Strict bed rest	Routine, Until discontinued, Starting S, PACU & Post-op
<input type="checkbox"/> Up with assistance	Routine, Until discontinued, Starting S Specify: Up with assistance PACU & Post-op
<input type="checkbox"/> Activity as tolerated	Routine, Until discontinued, Starting S Specify: Activity as tolerated PACU & Post-op
<input type="checkbox"/> All meals out of bed	Routine, Until discontinued, Starting S All meals out of bed, PACU & Post-op
<input type="checkbox"/> Head of bed 30 degrees	Routine, Until discontinued, Starting S Head of bed: 30 degrees PACU & Post-op
<input type="checkbox"/> Head of bed flat	Routine, Until discontinued, Starting S Head of bed: flat PACU & Post-op

**Nursing**

<input checked="" type="checkbox"/> Assess operative site	Routine, Every 8 hours For bleeding, reinforce dressing, notify physician., PACU & Post-op
<input checked="" type="checkbox"/> Assess for pain	Routine, Every 4 hours Assess: for Pain PACU & Post-op
<input type="checkbox"/> Neurological assessment	Routine, Once Assessment to Perform: PACU & Post-op
<input type="checkbox"/> Straight cath	Routine, Every 6 hours If unable to void after second attempt, insert Foley and call physician., PACU & Post-op
<input type="checkbox"/> Insert/Maintain Foley and Notify	
<input type="checkbox"/> Insert Foley catheter	Routine, Once Type: Size: Urinometer needed: PACU & Post-op
<input type="checkbox"/> Foley catheter care	Routine, Until discontinued, Starting S Orders: Maintain PACU & Post-op
<input type="checkbox"/> Notify Physician if unable to void after second attempt at straight cath and Foley inserted	Routine, Until discontinued, Starting S, PACU & Post-op
<input type="checkbox"/> Surgical/incision site care	Routine, Once Location: Site: Apply: Dressing Type: Open to air? PACU & Post-op
<input type="checkbox"/> Reinforce dressing	Routine, As needed Reinforce with: If saturated., PACU & Post-op
<input type="checkbox"/> Cervical collar - soft	Routine, Once Type of Collar to Apply: Soft cervical collar Special Instructions: obtain from central supply PACU & Post-op
<input type="checkbox"/> Place antiembolic stockings	Routine, Once, PACU & Post-op
<input checked="" type="checkbox"/> No anticoagulants INcluding UNfractionated heparin	Routine, Until discontinued, Starting S Reason for "No" order: Neurosurgery Functional Procedure PACU & Post-op

<input checked="" type="checkbox"/> No anti-platelet agents Including aspirin  <b>Notify</b>	Routine, Until discontinued, Starting S Reason for "No" order: Post Neurosurgery Functional Procedure PACU & Post-op
<input checked="" type="checkbox"/> Notify Physician if acute change in neurological status	Routine, Until discontinued, Starting S, PACU & Post-op
<input checked="" type="checkbox"/> Notify Physician for itching	Routine, Until discontinued, Starting S, PACU & Post-op
<input checked="" type="checkbox"/> Notify Physician bleeding at site	Routine, Until discontinued, Starting S, PACU & Post-op
<input checked="" type="checkbox"/> Notify Physician of No Bowel Movement for more than 72 hours	Routine, Until discontinued, Starting S, PACU & Post-op
<b>Diet</b>	
<input checked="" type="checkbox"/> Diet - Clear liquids (advance as tolerated to Regular)	Diet effective now, Starting S Diet(s): Clear Liquids Advance Diet as Tolerated? Yes Target Diet: Regular Advance target diet criteria: Please assess bowel sounds between progressions. IDDSI Liquid Consistency: Fluid Restriction: Foods to Avoid: PACU & Post-op
<input type="checkbox"/> Diet - Full liquids	Diet effective now, Starting S Diet(s): Full Liquids Advance Diet as Tolerated? IDDSI Liquid Consistency: Fluid Restriction: Foods to Avoid: PACU & Post-op
<input type="checkbox"/> Diet - Regular	Diet effective now, Starting S Diet(s): Regular Advance Diet as Tolerated? IDDSI Liquid Consistency: Fluid Restriction: Foods to Avoid: PACU & Post-op
<input type="checkbox"/> Diet - Heart healthy	Diet effective now, Starting S Diet(s): Heart Healthy Advance Diet as Tolerated? IDDSI Liquid Consistency: Fluid Restriction: Foods to Avoid: PACU & Post-op
<input type="checkbox"/> Diet - 2000 Kcal/225 gm Carb	Diet effective now, Starting S Diet(s): 2000 Kcal/225 gm Carbohydrate Advance Diet as Tolerated? IDDSI Liquid Consistency: Fluid Restriction: Foods to Avoid: PACU & Post-op
<input type="checkbox"/> Diet	Diet effective now, Starting S Diet(s): Other Options: Advance Diet as Tolerated? IDDSI Liquid Consistency: Fluid Restriction: Foods to Avoid: Foods to Avoid: PACU & Post-op

## IV Fluids

## IV Fluids (Single Response)

<input type="checkbox"/> lactated Ringer's infusion	intravenous, continuous, Post-op
<input type="checkbox"/> sodium chloride 0.9 % infusion	intravenous, continuous, Post-op
<input type="checkbox"/> sodium chloride 0.9 % with potassium chloride 20 mEq/L infusion	intravenous, continuous, Post-op
<input type="checkbox"/> dextrose 5 % and sodium chloride 0.45 % with potassium chloride 20 mEq/L infusion - for NPO Patients	intravenous, continuous, Post-op

## Medications

### Muscle Relaxants (Single Response)

<input type="checkbox"/> methocarbamol (ROBAXIN) 500 mg in sodium chloride 0.9 % 100 mL IVPB	500 mg, intravenous, for 60 Minutes, every 8 hours PRN, muscle spasms, Post-op
<input type="checkbox"/> methocarbamol (ROBAXIN) tablet	500 mg, oral, every 8 hours PRN, muscle spasms, Post-op
<input type="checkbox"/> cyclobenzaprine (FLEXERIL) tablet	5 mg, oral, every 8 hours PRN, muscle spasms, Post-op

### Muscle Relaxants - Refractory Treatments (Single Response)

<input type="checkbox"/> diazepam (VALIUM) injection	2.5 mg, intravenous, every 8 hours PRN, muscle spasms, inadequate muscle spasm relief following administration of other agents, Post-op Indication(s): Other Specify: Muscle Relaxant
<input type="checkbox"/> diazepam (VALIUM) tablet	2.5 mg, oral, every 8 hours PRN, muscle spasms, inadequate muscle spasm relief following administration of other agents, Post-op Indication(s): Other Specify: Muscle Relaxant

### Antiemetics

<input checked="" type="checkbox"/> ondansetron (ZOFRAN) IV or Oral (Selection Required)	<b>"Or" Linked Panel</b>
<input checked="" type="checkbox"/> ondansetron ODT (ZOFRAN-ODT) disintegrating tablet	4 mg, oral, every 8 hours PRN, nausea, vomiting, Post-op Give if patient is able to tolerate oral medication.
<input checked="" type="checkbox"/> ondansetron (ZOFRAN) 4 mg/2 mL injection	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, Post-op Give if patient is UNable to tolerate oral medication OR if a faster onset of action is required.
<input type="checkbox"/> promethazine (PHENERGAN) IV or Oral or Rectal	<b>"Or" Linked Panel</b>
<input type="checkbox"/> promethazine (PHENERGAN) 12.5 mg IV	12.5 mg, intravenous, every 6 hours PRN, nausea, vomiting, Post-op Give if ondansetron (ZOFRAN) is ineffective and patient is UNable to tolerate oral or rectal medication OR if a faster onset of action is required.
<input type="checkbox"/> promethazine (PHENERGAN) tablet	12.5 mg, oral, every 6 hours PRN, nausea, vomiting, Post-op Give if ondansetron (ZOFRAN) is ineffective and patient is able to tolerate oral medication.
<input type="checkbox"/> promethazine (PHENERGAN) suppository	12.5 mg, rectal, every 6 hours PRN, nausea, vomiting, Post-op Give if ondansetron (ZOFRAN) is ineffective and patient is UNable to tolerate oral medication.
<input type="checkbox"/> scopolamine (TRANSDERM-SCOP) 1.5 mg (1 mg over 3 days) - For Patients LESS than 65 years old	1 patch, transdermal, for 72 Hours, every 72 hours, Post-op

### PRN Medications - Pain - Pain Score (1-3) (Single Response)

<input type="checkbox"/> traMADol (ULTRAM) tablet	25 mg, oral, every 4 hours PRN, mild pain (score 1-3), Post-op Maximum Daily Dose: 200 mg/day
<input type="checkbox"/> traMADol (ULTRAM) tablet	50 mg, oral, every 6 hours PRN, mild pain (score 1-3), Post-op Maximum Daily Dose: 200 mg/day

### PRN Medications - Pain - Pain Score (4-6) (Single Response)

<input type="checkbox"/> HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	1 tablet, oral, every 6 hours PRN, moderate pain (score 4-6), Post-op
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<input type="checkbox"/> acetaminophen-codeine (TYLENOL #3) 300-30 mg per tablet	1 tablet, oral, every 4 hours PRN, moderate pain (score 4-6), Post-op The use of codeine-containing products is contraindicated in patients LESS THAN 12 years of age. Is this patient OVER 12 years of age? Y/N:
<input type="checkbox"/> traMADol (ULTRAM) tablet	50 mg, oral, every 6 hours PRN, moderate pain (score 4-6), Post-op Maximum Daily Dose: 200 mg/day
<input type="checkbox"/> traMADoL (ULTRAM) tablet	100 mg, oral, every 6 hours PRN, moderate pain (score 4-6)

**PRN Medications - Pain - Pain Score (7-10) (Single Response)**

<input type="checkbox"/> acetaminophen-codeine (TYLENOL #3) 300-30 mg per tablet	2 tablet, oral, every 6 hours PRN, severe pain (score 7-10), Post-op The use of codeine-containing products is contraindicated in patients LESS THAN 12 years of age. Is this patient OVER 12 years of age? Y/N:
<input type="checkbox"/> HYDROcodone-acetaminophen (NORCO) 5-325 mg per tablet	2 tablet, oral, every 6 hours PRN, severe pain (score 7-10), Post-op
<input type="checkbox"/> traMADoL (ULTRAM) tablet	50 mg, oral, every 6 hours PRN, severe pain (score 7-10), Post-op Maximum Daily Dose: 200 mg/day

**Breakthrough Pain (Single Response)**

<input type="checkbox"/> fentaNYL (SUBLIMAZE) injection	25 mcg, intravenous, every 2 hour PRN, other, pain (score: 4-10) - inadequate pain relief following administration of oral agents, Post-op Administer after pain re-assessment for inadequate pain relief.
<input type="checkbox"/> morphine 2 mg/mL injection	2 mg, intravenous, every 3 hours PRN, other, pain (score: 4-10) - inadequate pain relief following administration of oral agents, Post-op Administer after pain re-assessment for inadequate pain relief.
<input type="checkbox"/> HYDROmorphone (DILAUDID) injection	0.5 mg, intravenous, every 3 hours PRN, other, pain (score: 4-10) - inadequate pain relief following administration of oral agents, Post-op Administer after pain re-assessment for inadequate pain relief.

**VTE**

**DVT Risk and Prophylaxis Tool (Single Response) (Selection Required)**

VTE/DVT Risk Definitions

URL:

"\\appt1\epicapprod\Restricted\OrderSets\VTE\DVTRISK DEFINITIONS.pdf"

[Anticoagulation Guide for COVID patients](#)

URL:

"https://formweb.com/files/houstonmethodist/documents/COVID-19 Anticoagulation Guideline - 8.20.2021v15.pdf"

<input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis with Risk Stratification (Single Response) (Selection Required)	
<input type="checkbox"/> Moderate Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)	
<input type="checkbox"/> Moderate risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: PACU & Post-op
<input type="checkbox"/> Place sequential compression device (Single Response)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op

<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> Moderate Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)	
<input type="checkbox"/> Moderate risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: PACU & Post-op
<input type="checkbox"/> Place sequential compression device (Single Response)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> High Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: PACU & Post-op
<input type="checkbox"/> Place sequential compression device (Single Response)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> High Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: PACU & Post-op
<input type="checkbox"/> Place sequential compression device (Single Response)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> LOW Risk of DVT (Selection Required)	
Low Risk Definition Age less than 60 years and NO other VTE risk factors	
<input type="checkbox"/> Low Risk (Single Response) (Selection Required)	
<input type="checkbox"/> Low risk of VTE	Routine, Once Low risk: Due to low risk, no VTE prophylaxis is needed. Will encourage early ambulation PACU & Post-op
<input type="checkbox"/> MODERATE Risk of DVT - Surgical (Selection Required)	

Moderate Risk Definition

Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated.

One or more of the following medical conditions:

CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome

Age 60 and above

Central line

History of DVT or family history of VTE

Anticipated length of stay GREATER than 48 hours

Less than fully and independently ambulatory

Estrogen therapy

Moderate or major surgery (not for cancer)

Major surgery within 3 months of admission

Moderate Risk (Selection Required)

Moderate risk of VTE Routine, Once, PACU & Post-op

Moderate Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis **"And" Linked Panel**  
BUT order Sequential compression device

Contraindications exist for pharmacologic prophylaxis Routine, Once  
No pharmacologic VTE prophylaxis due to the following contraindication(s):  
PACU & Post-op

Place/Maintain sequential compression device continuous Routine, Continuous, PACU & Post-op

Contraindications exist for pharmacologic prophylaxis **"And" Linked Panel**  
AND mechanical prophylaxis

Contraindications exist for pharmacologic prophylaxis Routine, Once  
No pharmacologic VTE prophylaxis due to the following contraindication(s):  
PACU & Post-op

Contraindications exist for mechanical prophylaxis Routine, Once  
No mechanical VTE prophylaxis due to the following contraindication(s):  
PACU & Post-op

enoxaparin (LOVENOX) injection (Single Response) (Selection Required)

enoxaparin (LOVENOX) syringe 40 mg, subcutaneous, daily at 0600, Starting S+1, PACU & Post-op  
Indication(s): VTE Prophylaxis

patients with CrCL LESS than 30 mL/min 30 mg, subcutaneous, daily at 0600, Starting S+1, PACU & Post-op  
For Patients with CrCL LESS than 30 mL/min  
Indication(s): VTE Prophylaxis

patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min 30 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1, PACU & Post-op  
For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min  
Indication(s): VTE Prophylaxis

patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min 40 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1, PACU & Post-op  
For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min  
Indication(s): VTE Prophylaxis

fondaparinux (ARIXTRA) injection 2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op  
If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min.  
This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):



<input type="checkbox"/>	heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op
<input type="checkbox"/>	heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/>	HEParin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op For patients with weight GREATER than 100 kg.
<input type="checkbox"/>	warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1, PACU & Post-op Indication:
<input type="checkbox"/>	Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)		
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> MODERATE Risk of DVT - Non-Surgical (Selection Required)		
Moderate Risk Definition		
Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated.		
One or more of the following medical conditions:		
CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome		
Age 60 and above		
Central line		
History of DVT or family history of VTE		
Anticipated length of stay GREATER than 48 hours		
Less than fully and independently ambulatory		
Estrogen therapy		
Moderate or major surgery (not for cancer)		
Major surgery within 3 months of admission		
<input type="checkbox"/> Moderate Risk (Selection Required)		
<input type="checkbox"/>	Moderate risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> Moderate Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)		
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis - Order Sequential compression device	<b>"And" Linked Panel</b>
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis	<b>"And" Linked Panel</b>
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)		

<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 1700, Starting S+1, PACU & Post-op Indication(s): VTE Prophylaxis
<input type="checkbox"/> patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 1700, Starting S+1, PACU & Post-op For Patients with CrCL LESS than 30 mL/min Indication(s): VTE Prophylaxis
<input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, every 12 hours at 0900, 2100, Starting S+1, PACU & Post-op For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min Indication(s): VTE Prophylaxis
<input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, every 12 hours at 0900, 2100, Starting S+1, PACU & Post-op For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min Indication(s): VTE Prophylaxis
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, PACU & Post-op If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT), do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, PACU & Post-op
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> HEParin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, PACU & Post-op For patients with weight GREATER than 100 kg.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, PACU & Post-op Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> HIGH Risk of DVT - Surgical (Selection Required)	
High Risk Definition Both pharmacologic AND mechanical prophylaxis must be addressed. One or more of the following medical conditions: Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders) Severe fracture of hip, pelvis or leg Acute spinal cord injury with paresis Multiple major traumas Abdominal or pelvic surgery for CANCER Acute ischemic stroke History of PE	
<input type="checkbox"/> High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Enoxaparin for VTE Prophylaxis (Single Response)	

<input type="checkbox"/> enoxaparin (LOVENOX) 30 mg Daily at 1700	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	30 mg, subcutaneous, daily at 1700 Indication(s):
<input type="checkbox"/> enoxaparin (LOVENOX) 30 mg Every 12 Hours	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	30 mg, subcutaneous, daily at 1700 Indication(s):
<input type="checkbox"/> enoxaparin (LOVENOX) 40 mg Daily at 1700	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	40 mg, subcutaneous, daily at 1700 Indication(s):
<input type="checkbox"/> enoxaparin (LOVENOX) 40 mg Every 12 Hours	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	40 mg, subcutaneous, every 12 hours Indication(s):
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> HEParin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, Starting S+1, PACU & Post-op For patients with weight GREATER than 100 kg.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1, PACU & Post-op Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> HIGH Risk of DVT - Non-Surgical (Selection Required)	
High Risk Definition	
Both pharmacologic AND mechanical prophylaxis must be addressed.	
One or more of the following medical conditions:	
Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)	
Severe fracture of hip, pelvis or leg	
Acute spinal cord injury with paresis	
Multiple major traumas	
Abdominal or pelvic surgery for CANCER	
Acute ischemic stroke	
History of PE	
<input type="checkbox"/> High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op

<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 1700, Starting S, PACU & Post-op Indication(s): VTE Prophylaxis
<input type="checkbox"/> patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 1700, Starting S, PACU & Post-op For Patients with CrCL LESS than 30 mL/min Indication(s): VTE Prophylaxis
<input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily, Starting S, PACU & Post-op For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min Indication(s): VTE Prophylaxis
<input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily, Starting S, PACU & Post-op For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min Indication(s): VTE Prophylaxis
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, PACU & Post-op If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, PACU & Post-op
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> HEParin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, PACU & Post-op For patients with weight GREATER than 100 kg.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, PACU & Post-op Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op

HIGH Risk of DVT - Surgical (Hip/Knee) (Selection Required)

High Risk Definition

Both pharmacologic AND mechanical prophylaxis must be addressed.

One or more of the following medical conditions:

Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)

Severe fracture of hip, pelvis or leg

Acute spinal cord injury with paresis

Multiple major traumas

Abdominal or pelvic surgery for CANCER

Acute ischemic stroke

History of PE

High Risk (Selection Required)

High risk of VTE Routine, Once, PACU & Post-op

High Risk Pharmacological Prophylaxis - Hip or Knee (Arthroplasty) Surgical Patient (Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis Routine, Once  
No pharmacologic VTE prophylaxis due to the following contraindication(s):  
PACU & Post-op

<input type="checkbox"/>	aspirin chewable tablet	162 mg, oral, daily, Starting S+1, PACU & Post-op
<input type="checkbox"/>	aspirin (ECOTRIN) enteric coated tablet	162 mg, oral, daily, Starting S+1, PACU & Post-op
<input type="checkbox"/>	Apixaban and Pharmacy Consult (Selection Required)	
<input type="checkbox"/>	apixaban (ELIQUIS) tablet	2.5 mg, oral, 2 times daily, Starting S+1, PACU & Post-op Indications: VTE prophylaxis
<input type="checkbox"/>	Pharmacy consult to monitor apixaban (ELIQUIS) therapy	STAT, Until discontinued, Starting S Indications: VTE prophylaxis
<input type="checkbox"/>	enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
<input type="checkbox"/>	enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600, Starting S+1, PACU & Post-op Indication(s): VTE Prophylaxis
<input type="checkbox"/>	enoxaparin (LOVENOX) syringe	30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1, PACU & Post-op Indication(s): VTE Prophylaxis
<input type="checkbox"/>	enoxaparin (LOVENOX) syringe - For Patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600, Starting S+1, PACU & Post-op For Patients with CrCL LESS than 30 mL/min. Indication(s): VTE Prophylaxis
<input type="checkbox"/>	enoxaparin (LOVENOX) syringe - For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1, PACU & Post-op For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min. Indication(s): VTE Prophylaxis
<input type="checkbox"/>	enoxaparin (LOVENOX) syringe - For Patients weight between 140 kg or GREATER and CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1, PACU & Post-op For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min Indication(s): VTE Prophylaxis
<input type="checkbox"/>	fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/>	heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op
<input type="checkbox"/>	heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/>	HEParin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op For patients with weight GREATER than 100 kg.
<input type="checkbox"/>	Rivaroxaban and Pharmacy Consult (Selection Required)	
<input type="checkbox"/>	rivaroxaban (XARELTO) tablet for hip or knee arthroplasty planned during this admission	10 mg, oral, daily at 0600 (TIME CRITICAL), PACU & Post-op Indications: VTE prophylaxis
<input type="checkbox"/>	Pharmacy consult to monitor rivaroxaban (XARELTO) therapy	STAT, Until discontinued, Starting S Indications: VTE prophylaxis
<input type="checkbox"/>	warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1, PACU & Post-op Indication:
<input type="checkbox"/>	Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/>	Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op

**DVT Risk and Prophylaxis Tool (Single Response)**

VTE/DVT Risk Definitions

URL:

"\\appt1\epicapprod\Restricted\OrderSets\VTE\DVTRISK DEFINITIONS.pdf"

URL:

"https://formweb.com/files/houstonmethodist/documents/COVID-19 Anticoagulation Guideline - 8.20.2021v15.pdf"

[Anticoagulation Guide for COVID patients](#)

( ) Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis with Risk Stratification (Single Response) (Selection Required)

( ) Moderate Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)

- |   |  |
|---|--|
| <input type="checkbox"/> Moderate risk of VTE   | Routine, Once, PACU & Post-op  |
| <input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis | Routine, Once<br>No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication.<br>Therapy for the following:<br>PACU & Post-op |
| <input type="checkbox"/> Place sequential compression device (Single Response)                                  |  |

( ) Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
--	--

( ) Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
---	-------------------------------------

( ) Moderate Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)

- |   |  |
|---|--|
| <input type="checkbox"/> Moderate risk of VTE   | Routine, Once, PACU & Post-op  |
| <input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis | Routine, Once<br>No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication.<br>Therapy for the following:<br>PACU & Post-op |
| <input type="checkbox"/> Place sequential compression device (Single Response)                                  |  |

( ) Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
--	--

( ) Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
---	-------------------------------------

( ) High Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)

- |   |  |
|---|--|
| <input type="checkbox"/> High risk of VTE   | Routine, Once, PACU & Post-op  |
| <input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis | Routine, Once<br>No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication.<br>Therapy for the following:<br>PACU & Post-op |
| <input type="checkbox"/> Place sequential compression device (Single Response)                                  |  |

( ) Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
--	--

( ) Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
---	-------------------------------------

( ) High Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)

- |   |                               |
|---|-------------------------------|
| <input type="checkbox"/> High risk of VTE | Routine, Once, PACU & Post-op |
|---|-------------------------------|

<input type="checkbox"/>	Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: PACU & Post-op
<input type="checkbox"/>	Place sequential compression device (Single Response)	
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/>	LOW Risk of DVT (Selection Required)	
	Low Risk Definition Age less than 60 years and NO other VTE risk factors	
<input type="checkbox"/>	Low Risk (Single Response) (Selection Required)	
<input type="checkbox"/>	Low risk of VTE	Routine, Once Low risk: Due to low risk, no VTE prophylaxis is needed. Will encourage early ambulation PACU & Post-op
<input type="checkbox"/>	MODERATE Risk of DVT - Surgical (Selection Required)	
	Moderate Risk Definition Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated. One or more of the following medical conditions: CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome Age 60 and above Central line History of DVT or family history of VTE Anticipated length of stay GREATER than 48 hours Less than fully and independently ambulatory Estrogen therapy Moderate or major surgery (not for cancer) Major surgery within 3 months of admission	
<input type="checkbox"/>	Moderate Risk (Selection Required)	
<input type="checkbox"/>	Moderate risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/>	Moderate Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis BUT order Sequential compression device	<b>"And" Linked Panel</b>
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis	<b>"And" Linked Panel</b>
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	

<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600, Starting S+1, PACU & Post-op Indication(s): VTE Prophylaxis
<input type="checkbox"/> patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600, Starting S+1, PACU & Post-op For Patients with CrCL LESS than 30 mL/min Indication(s): VTE Prophylaxis
<input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1, PACU & Post-op For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min Indication(s): VTE Prophylaxis
<input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1, PACU & Post-op For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min Indication(s): VTE Prophylaxis
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> HEParin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op For patients with weight GREATER than 100 kg.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1, PACU & Post-op Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> MODERATE Risk of DVT - Non-Surgical (Selection Required)	
Moderate Risk Definition Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated. One or more of the following medical conditions: CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome Age 60 and above Central line History of DVT or family history of VTE Anticipated length of stay GREATER than 48 hours Less than fully and independently ambulatory Estrogen therapy Moderate or major surgery (not for cancer) Major surgery within 3 months of admission	
<input type="checkbox"/> Moderate Risk (Selection Required)	
<input type="checkbox"/> Moderate risk of VTE	Routine, Once, PACU & Post-op



Moderate Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis - Order Sequential compression device **"And" Linked Panel**

Contraindications exist for pharmacologic prophylaxis  
 Routine, Once  
 No pharmacologic VTE prophylaxis due to the following contraindication(s):  
 PACU & Post-op

Place/Maintain sequential compression device continuous  
 Routine, Continuous, PACU & Post-op

Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis **"And" Linked Panel**

Contraindications exist for pharmacologic prophylaxis  
 Routine, Once  
 No pharmacologic VTE prophylaxis due to the following contraindication(s):  
 PACU & Post-op

Contraindications exist for mechanical prophylaxis  
 Routine, Once  
 No mechanical VTE prophylaxis due to the following contraindication(s):  
 PACU & Post-op

enoxaparin (LOVENOX) injection (Single Response) (Selection Required)

enoxaparin (LOVENOX) syringe  
 40 mg, subcutaneous, daily at 1700, Starting S+1, PACU & Post-op  
 Indication(s): VTE Prophylaxis

patients with CrCL LESS than 30 mL/min  
 30 mg, subcutaneous, daily at 1700, Starting S+1, PACU & Post-op  
 For Patients with CrCL LESS than 30 mL/min  
 Indication(s): VTE Prophylaxis

patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min  
 30 mg, subcutaneous, every 12 hours at 0900, 2100, Starting S+1, PACU & Post-op  
 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min  
 Indication(s): VTE Prophylaxis

patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min  
 40 mg, subcutaneous, 2 times daily, Starting S, PACU & Post-op  
 For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min  
 Indication(s): VTE Prophylaxis

fondaparinux (ARIXTRA) injection  
 2.5 mg, subcutaneous, daily, PACU & Post-op  
 If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT), do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min  
 This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):

heparin (porcine) injection  
 5,000 Units, subcutaneous, every 8 hours, PACU & Post-op

heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)  
 5,000 Units, subcutaneous, every 12 hours, PACU & Post-op  
 Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.

HEParin (porcine) injection - For Patients with weight GREATER than 100 kg  
 7,500 Units, subcutaneous, every 8 hours, PACU & Post-op  
 For patients with weight GREATER than 100 kg.

warfarin (COUMADIN) tablet  
 oral, daily at 1700, PACU & Post-op  
 Indication:

Pharmacy consult to manage warfarin (COUMADIN)  
 STAT, Until discontinued, Starting S  
 Indication:

Mechanical Prophylaxis (Single Response) (Selection Required)

Contraindications exist for mechanical prophylaxis  
 Routine, Once  
 No mechanical VTE prophylaxis due to the following contraindication(s):  
 PACU & Post-op

Place/Maintain sequential compression device continuous  
 Routine, Continuous, PACU & Post-op

HIGH Risk of DVT - Surgical (Selection Required)

High Risk Definition

Both pharmacologic AND mechanical prophylaxis must be addressed.

One or more of the following medical conditions:

Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)

Severe fracture of hip, pelvis or leg

Acute spinal cord injury with paresis

Multiple major traumas

Abdominal or pelvic surgery for CANCER

Acute ischemic stroke

History of PE

High Risk (Selection Required)

High risk of VTE Routine, Once, PACU & Post-op

High Risk Pharmacological Prophylaxis - Surgical Patient  
(Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis Routine, Once  
No pharmacologic VTE prophylaxis due to the following contraindication(s):  
PACU & Post-op

Enoxaparin for VTE Prophylaxis (Single Response)

enoxaparin (LOVENOX) 30 mg Daily at 1700

enoxaparin (LOVENOX) injection 30 mg, subcutaneous, daily at 1700  
Indication(s):

enoxaparin (LOVENOX) 30 mg Every 12 Hours

enoxaparin (LOVENOX) injection 30 mg, subcutaneous, daily at 1700  
Indication(s):

enoxaparin (LOVENOX) 40 mg Daily at 1700

enoxaparin (LOVENOX) injection 40 mg, subcutaneous, daily at 1700  
Indication(s):

enoxaparin (LOVENOX) 40 mg Every 12 Hours

enoxaparin (LOVENOX) injection 40 mg, subcutaneous, every 12 hours  
Indication(s):

fondaparinux (ARIXTRA) injection 2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op  
If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min.  
This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):

heparin (porcine) injection 5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op

heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs) 5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op  
Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.

HEParin (porcine) injection - For Patients with weight GREATER than 100 kg 7,500 Units, subcutaneous, every 8 hours, Starting S+1, PACU & Post-op  
For patients with weight GREATER than 100 kg.

warfarin (COUMADIN) tablet oral, daily at 1700, Starting S+1, PACU & Post-op  
Indication:

Pharmacy consult to manage warfarin (COUMADIN) STAT, Until discontinued, Starting S  
Indication:

Mechanical Prophylaxis (Single Response) (Selection Required)

Contraindications exist for mechanical prophylaxis Routine, Once  
No mechanical VTE prophylaxis due to the following contraindication(s):  
PACU & Post-op

Place/Maintain sequential compression device continuous Routine, Continuous, PACU & Post-op

HIGH Risk of DVT - Non-Surgical (Selection Required)

High Risk Definition

Both pharmacologic AND mechanical prophylaxis must be addressed.

One or more of the following medical conditions:

Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)

Severe fracture of hip, pelvis or leg

Acute spinal cord injury with paresis

Multiple major traumas

Abdominal or pelvic surgery for CANCER

Acute ischemic stroke

History of PE

High Risk (Selection Required)

High risk of VTE Routine, Once, PACU & Post-op

High Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis Routine, Once  
No pharmacologic VTE prophylaxis due to the following contraindication(s):  
PACU & Post-op

enoxaparin (LOVENOX) injection (Single Response) (Selection Required)

enoxaparin (LOVENOX) syringe 40 mg, subcutaneous, daily at 1700, Starting S, PACU & Post-op  
Indication(s): VTE Prophylaxis

patients with CrCL LESS than 30 mL/min 30 mg, subcutaneous, daily at 1700, Starting S, PACU & Post-op  
For Patients with CrCL LESS than 30 mL/min  
Indication(s): VTE Prophylaxis

patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min 30 mg, subcutaneous, 2 times daily, Starting S, PACU & Post-op  
For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min  
Indication(s): VTE Prophylaxis

patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min 40 mg, subcutaneous, 2 times daily, Starting S, PACU & Post-op  
For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min  
Indication(s): VTE Prophylaxis

fondaparinux (ARIXTRA) injection 2.5 mg, subcutaneous, daily, PACU & Post-op  
If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min.  
This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):

heparin (porcine) injection 5,000 Units, subcutaneous, every 8 hours, PACU & Post-op

heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs) 5,000 Units, subcutaneous, every 12 hours, PACU & Post-op  
Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.

HEParin (porcine) injection - For Patients with weight GREATER than 100 kg 7,500 Units, subcutaneous, every 8 hours, PACU & Post-op  
For patients with weight GREATER than 100 kg.

warfarin (COUMADIN) tablet oral, daily at 1700, PACU & Post-op  
Indication:

Pharmacy consult to manage warfarin (COUMADIN) STAT, Until discontinued, Starting S  
Indication:

Mechanical Prophylaxis (Single Response) (Selection Required)

Contraindications exist for mechanical prophylaxis Routine, Once  
No mechanical VTE prophylaxis due to the following contraindication(s):  
PACU & Post-op

Place/Maintain sequential compression device continuous Routine, Continuous, PACU & Post-op

HIGH Risk of DVT - Surgical (Hip/Knee) (Selection Required)

High Risk Definition

Both pharmacologic AND mechanical prophylaxis must be addressed.

One or more of the following medical conditions:

Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)

Severe fracture of hip, pelvis or leg

Acute spinal cord injury with paresis

Multiple major traumas

Abdominal or pelvic surgery for CANCER

Acute ischemic stroke

History of PE

<input type="checkbox"/> High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Hip or Knee (Arthroplasty) Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> aspirin chewable tablet	162 mg, oral, daily, Starting S+1, PACU & Post-op
<input type="checkbox"/> aspirin (ECOTRIN) enteric coated tablet	162 mg, oral, daily, Starting S+1, PACU & Post-op
<input type="checkbox"/> Apixaban and Pharmacy Consult (Selection Required)	
<input type="checkbox"/> apixaban (ELIQUIS) tablet	2.5 mg, oral, 2 times daily, Starting S+1, PACU & Post-op Indications: VTE prophylaxis
<input type="checkbox"/> Pharmacy consult to monitor apixaban (ELIQUIS) therapy	STAT, Until discontinued, Starting S Indications: VTE prophylaxis
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	40 mg, subcutaneous, daily at 0600, Starting S+1, PACU & Post-op Indication(s): VTE Prophylaxis
<input type="checkbox"/> enoxaparin (LOVENOX) syringe	30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1, PACU & Post-op Indication(s): VTE Prophylaxis
<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients with CrCL LESS than 30 mL/min	30 mg, subcutaneous, daily at 0600, Starting S+1, PACU & Post-op For Patients with CrCL LESS than 30 mL/min. Indication(s): VTE Prophylaxis
<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min	30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1, PACU & Post-op For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min. Indication(s): VTE Prophylaxis
<input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients weight between 140 kg or GREATER and CrCl GREATER than 30 mL/min	40 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1, PACU & Post-op For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min Indication(s): VTE Prophylaxis
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.

<input type="checkbox"/> HEParin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op For patients with weight GREATER than 100 kg.
<input type="checkbox"/> Rivaroxaban and Pharmacy Consult (Selection Required)	
<input type="checkbox"/> rivaroxaban (XARELTO) tablet for hip or knee arthroplasty planned during this admission	10 mg, oral, daily at 0600 (TIME CRITICAL), PACU & Post-op Indications: VTE prophylaxis
<input type="checkbox"/> Pharmacy consult to monitor rivaroxaban (XARELTO) therapy	STAT, Until discontinued, Starting S Indications: VTE prophylaxis
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1, PACU & Post-op Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op

## Labs

### Labs

<input checked="" type="checkbox"/> Hemoglobin and hematocrit	Once, PACU & Post-op
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### Labs - AM

<input type="checkbox"/> Basic metabolic panel	AM draw, Starting S+1 For 1 Occurrences, PACU & Post-op
<input type="checkbox"/> CBC with platelet and differential	AM draw, Starting S+1 For 1 Occurrences, PACU & Post-op
<input type="checkbox"/> Partial thromboplastin time	AM draw, Starting S+1 For 1 Occurrences, PACU & Post-op
<input type="checkbox"/> Prothrombin time with INR	AM draw, Starting S+1 For 1 Occurrences, PACU & Post-op

### Labs - AM Daily x 3

<input type="checkbox"/> Hemoglobin	AM draw repeats For 3 Occurrences, PACU & Post-op
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## Imaging

### CT

<input type="checkbox"/> CT Cervical Spine Wo Contrast	Routine, 1 time imaging, Starting S at 1:00 AM For 1 , PACU & Post-op
<input type="checkbox"/> CT Thoracic Spine Wo Contrast	Routine, 1 time imaging, Starting S at 1:00 AM For 1 , PACU & Post-op
<input type="checkbox"/> CT Lumbar Spine Wo Contrast	Routine, 1 time imaging, Starting S at 1:00 AM For 1 , PACU & Post-op

### X-ray

<input type="checkbox"/> Chest 1 Vw Portable	Routine, 1 time imaging, Starting S at 1:00 AM For 1 , PACU & Post-op
<input type="checkbox"/> Chest 1 Vw Portable in AM	Routine, 1 time imaging, Starting S+1 For 1 , PACU & Post-op
<input type="checkbox"/> XR Spine Scoliosos 2-3 Views	Routine, 1 time imaging, Starting S at 1:00 AM For 1 Please add 32 millimeter image calibration necklace to the field of view. AP and Lateral view that includes C2 and femoral heads in single shot with patient standing with hips and knees extended., PACU & Post-op
<input type="checkbox"/> Cervical Spine 1 Vw	Routine, 1 time imaging, Starting S at 1:00 AM For 1 , PACU & Post-op
<input type="checkbox"/> Cervical Spine 2 Or 3 Vw	Routine, 1 time imaging, Starting S at 1:00 AM For 1 , PACU & Post-op

<input type="checkbox"/> Thoracic Spine 1 Vw	Routine, 1 time imaging, Starting S at 1:00 AM For 1 , PACU & Post-op
<input type="checkbox"/> Lumbar Spine 1 Vw	Routine, 1 time imaging, Starting S at 1:00 AM For 1 , PACU & Post-op
<input type="checkbox"/> Thoracolumbar Spine 2 Vw	Routine, 1 time imaging, Starting S at 1:00 AM For 1 , PACU & Post-op

## Respiratory

### Respiratory

<input type="checkbox"/> Oxygen therapy - Simple face mask	Routine, Continuous Device: Simple Face Mask Rate in liters per minute: 6 lpm Rate in tenths of a liter per minute: O2 %: Titrate to keep O2 Sat Above: 92% Indications for O2 therapy: Wean prn., PACU & Post-op
<input type="checkbox"/> Incentive spirometry	Routine, Every hour For 999 Occurrences While awake., PACU & Post-op

## Consults

For Physician Consult orders use sidebar

### Ancillary Consults

<input type="checkbox"/> Consult to Case Management	Consult Reason: PACU & Post-op
<input type="checkbox"/> Consult to Social Work	Reason for Consult: PACU & Post-op
<input type="checkbox"/> Consult to PT eval and treat	Reasons for referral to Physical Therapy (mark all applicable): Post Neuromuscular or Musculoskeletal Surgery Care. Are there any restrictions for positioning or mobility? Please provide safe ranges for HR, BP, O2 saturation( if values are very abnormal): Weight Bearing Status: PACU & Post-op
<input type="checkbox"/> Consult PT wound care	Special Instructions: Location of Wound? PACU & Post-op
<input type="checkbox"/> Consult to OT eval and treat	Reason for referral to Occupational Therapy (mark all that apply): Decline in Activities of Daily Living performance from baseline (bathing, dressing, toileting, grooming) Are there any restrictions for positioning or mobility? Please provide safe ranges for HR, BP, O2 saturation( if values are very abnormal): Weight Bearing Status: PACU & Post-op
<input type="checkbox"/> Consult to Nutrition Services	Reason For Consult? Purpose/Topic: PACU & Post-op
<input type="checkbox"/> Consult to Spiritual Care	Reason for consult? PACU & Post-op
<input type="checkbox"/> Consult to Speech Language Pathology	Routine, Once Reason for consult: PACU & Post-op

<input type="checkbox"/> Consult to Wound Ostomy Care nurse	Reason for consult: Reason for consult: Reason for consult: Reason for consult: Consult for NPWT: Reason for consult: Reason for consult: PACU & Post-op
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<input type="checkbox"/> Consult to Respiratory Therapy	Reason for Consult? PACU & Post-op
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**Physician Consults**

<input checked="" type="checkbox"/> Consult Intensive Care	Reason for Consult? Decline in ADL performance from baseline Patient/Clinical information communicated? Telephone Patient/clinical information communicated? Telephone PACU & Post-op
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<input type="checkbox"/> Consult Physical Medicine Rehab	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated? PACU & Post-op
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