



**CULLMAN**  
REGIONAL

## PHYSICIAN'S ORDERS

NAME:  
ROOM NO:  
(ADDRESS)  
HOSP. NO.  
PHYSICIAN

Another brand of drug identical in form and content may be dispensed unless checked. ☐

### Dr. Seidel - Breast Reduction Post Op Order Set

☐ Place in Observation Services

1. Admit to Dr. Seidel / Plastic surgery
2. Status Post - Breast Reduction, Bilateral
3. Activity: bed rest, head of bed elevated 30 degrees, bathroom privileges
4. Condition good
5. Vital signs every 2 hours x 4, then every 4 hours
6. Allergies:
7. Record I&O
8. Diet: clear liquids; advance to regular as tolerated
9. If foley catheter in place, discontinue in recovery room
10. Begin Incentive Spirometry Protocol, notify Respiratory Therapy
11. Turn, cough, and deep breath q 2 hours x 48 hours while awake
12. Meds: ☐ D5 LR @ 100 cc/hr. Heplock once taking Po well.  
☐ Tylenol 325 mg 2 tab Po q 4 hr PRN mild pain (scale 1-3)  
☐ Norco 5 mg 1 tab Po q 4 hr PRN moderate pain (scale 4-7)  
☐ Percocet 5 mg 1 tab Po q 4 hr PRN moderate pain (scale 4-7) if not relieved by Norco  
☐ Demerol 50 mg IV q 4 hr PRN severe pain (scale 8-10)  
☐ Phenergan 25 mg Po every 6 hours PRN nausea  
☐ Zofran 4 mg IV every 6 hours PRN nausea not relieved by Phenergan  
☐ Kefzol 1 gm IV every 8 hours x 3 doses post-op then DC  
☐ Other medications: \_\_\_\_\_

13. To bedside: 4x4 gauze, extra bra
14. Schedule follow-up in my office in 7-10 days
15. Reinforce dressing as needed - externally only
16. SCD hose
17. Copy of Dr. Seidel's post op instructions to patient
18. Other orders:

**MD Signature:** \_\_\_\_\_ **Date & Time:** \_\_\_\_\_

Cullman Regional

Please use Ball Point Pen ONLY

Physician's Orders

**DO NOT USE: U IU QD QOD MS MSO4 MgSO4**