



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. ☐

Outpatient ERCP Order Set

Dr. Charles Bluhm Dr. David Landy

Pre-Procedure:

1. Admit to Medical Day
2. Diagnosis: _____
3. Permit signed for: Endoscopic-Retrograde Cholangio-Pancreatography (ERCP) and Possible Gall-Stone Extraction, Sphincterotomy, or Stent Placement.
4. Start IV D5 ½ NS at KVO.
5. Check Lab if needed: ☐ PT ☐ PTT ☐ Platelet Count ☐ CBC ☐ Comprehensive Metabolic Panel
☐ Other: _____
6. Consult Anesthesia / Have anesthesia consent signed.

Intra-Procedure:

1. Demerol 25-100 mg and Versed 1-10 mg to be given IV as conscious sedation during procedure – titrate to desired level of sedation.
2. Nubain 10-20 mg IV for sedation if allergic to Demerol.
3. Narcan 0.4 mg IV PRN for reversal of narcotics.
4. Romazicon 0.2 mg IV PRN for reversal of benzodiazepines.
5. O2 @ 2 L/min NC PRN for hypoxia.
6. Glucagon 1 mg IV PRN for colon spasms.
7. Zofran 4 mg IV PRN for nausea.

Post Op:

1. Vital signs q 15 minutes x 2
2. Elevate head of bed 30 degrees.
3. Give Indomethacin 100 mg per rectal suppository within 30 minutes post ERCP.

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