PHYSICIAN'S ORDERS

CULLMAN REGIONAL

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

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

Dr. Cottingham - Post Op Order Set

❑ Admit Inpatient ❑ Outpatient

Routine Recovery Room Care / CCU post op

❑ Vital signs and I&O every _____ hr(s) ❑ Routine Post-op Vital Signs

Daily weight

Diet:_____

IV fluids: ❑ D5½ NS ❑ ½ NS ❑ with 20 mEq KCL/L @ _____cc/hr

NG to low intermittent suction, flush both ports with air every 4 hours

Drains:_____ ❑ Drain to bulb suction

❑ Foley to gravity

❑ Bed Rest ❑ Up in Chair ❑ Ambulate when alert

Meds: ❑ See medication reconciliation report
❑ See home medication form

Mild Pain (scale 1-3)
❑ Toradol 30 mg IV every 6 hours PRN x 6 doses
❑ Tylenol 650 mg Po/PR every 4 hours PRN

Moderate Pain (scale 4-7)
❑ Norco ❑ 5 mg ❑ 7.5 mg ❑ 10 mg every 4 hours PRN
❑ Morphine ❑ 2 mg ❑ 4 mg IV every 2 hours PRN

Severe Pain (scale 8-10)
❑ Dilaudid ❑ 0.5 mg ❑ 1 mg IV every 3 hours PRN

Other Medications
❑ Zofran 4mg IV every 3 hours PRN nausea
❑ Phenergan 12.5 mg IV piggyback q 4 hours PRN nausea/vomiting not relieved by Zofran
❑ Lovenox 40 mg SubQ every 24 hours. Start at _____
❑ Nitrol ointment 1 inch to chest every _____hours x_____hours
❑ PCA Morphine / Demerol, Load_____mg, dose _____mg
Lockout _____min, _____mg Max 4 hours (when epidural removed)
❑ Protonix 40 mg IV daily
❑ Antibiotic: _____

Begin Incentive Spirometry Protocol, notify Respiratory Therapy.

Turn, cough, and deep breath q 2 hours x 48 hours while awake.

❑ SCD ❑ TED

❑ Labs now ❑ in am ❑ Hgb & Hct ❑ Platelets ❑ BMP
❑ CBC no Diff ❑ CBC with auto Diff ❑ CBC with manual Diff
❑ CMP ❑ Other _____

Cardiac Monitor

O2 Protocol

MD Signature:_____ Date &Time:_____