

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. Seidel - Tram Flap Breast Reconstruction Post Op Order Set (page 1 of 2)

1. Admit: Dr. Seidel Plastic Surgery Dr. _____, General Surgery <input type="checkbox"/> Inpatient Admit
2. SP: <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Bilateral Mastectomy and Tram Flap Breast Reconstruction
3. Activity - Bed rest with HOB elevated to 30 degrees and knees bent at all times
4. Condition good
5. Vital signs - every 2 hours x 12, then every 4 hours. Include flap checks for color, warmth and capillary refill. Notify Dr. Seidel of any changes.
6. Allergies:
7. Record I&O
8. Drains: JP to bulb suction, strip if clotted. Foley to dependent drainage.
9. NPO except ice chips to wet mouth (includes ALL tube feedings). No smoking and no caffeine during hospital stay.
10. Warm room to 72 degrees at all times
11. Meds: <input type="checkbox"/> O ₂ @ 2 L NC, wear continuously. (Check O ₂ Sat prior to beginning oxygen.) <input type="checkbox"/> IV D5 LR @ 125 cc/hr <input type="checkbox"/> PCA per Anesthesia <input type="checkbox"/> Phenergan 25 mg Po every 6 hours PRN nausea <input type="checkbox"/> Zofran 4 mg IV every 6 hours PRN nausea not relieved by Phenergan <input type="checkbox"/> Kefzol 1 gm IV every 8 hours - 3 doses then discontinue <input type="checkbox"/> Tylenol 325 mg 2 tab Po q 4 hr PRN mild pain (scale 1-3) <input type="checkbox"/> Norco 5 mg 1 tab Po q 4 hr PRN moderate pain (scale 4-7) <input type="checkbox"/> Percocet 5 mg 1 tab Po q 4 hr PRN moderate pain (scale 4-7) if not relieved by Norco <input type="checkbox"/> Demerol 50 mg IV q 4 hr PRN severe pain (scale 8-10) • Begin ASA 325 mg Po daily if not allergic – Start in Recovery Room <input type="checkbox"/> Others:
12. Labs: In recovery - CBC with auto Diff POD #1 – BMP & CBC with auto Diff; call Dr. Seidel if Hct < 20%.
13. Begin Incentive Spirometry Protocol, notify Respiratory Therapy.
14. Turn, cough, and deep breath q 2 hours x 48 hours while awake.
15. TED hose & SCD hose at all times please
16. Reinforce dressing as needed, externally only
17. Consult Reach for Recovery
18. Keep surgical bra in place. Unhook at bottom. Keep all pressure off base of flap.
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



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Dr. Seidel - Tram Flap Breast Reconstruction Post Op Order Set (page 2 of 2)

20. Check flaps frequently (at least every two hours). Call Dr. Seidel if not pink, warm, or blanching with pressure. (Usually visible at nipple/areolar complex – call Dr. if not sure).

21. If patient had axillary node dissection, post sign: "No IVs, BPs, or needle sticks in ☐ left ☐ right arm."

22. Consult: ☐ Dr. _____ ☐ Hospitalist for medical management

23. Other orders:

MD Signature: _____ **Date & Time:** _____

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