

	Orders Phase ets/Protocols/PowerPlans			
$\overline{\mathbf{C}}$	Initiate Powerplan Phase			
	Phase: Head and Neck Postoperative Phase, When to Initiate:			
	nd Neck Post Operative Phase			
Vital Si	gns			
$\overline{\mathbf{Z}}$	Vital Signs			
_	Monitor and Record T,P,R,BP, per postop routine special instructions: P, R, BP q 30 minutes x2, then q 1 hour x2, then q4hr x24 hours. Temp q4hr.			
	Vital Signs			
	☐ Monitor and Record T,P,R,BP, q2h(std) (DEF)*			
	☐ Monitor and Record T,P,R,BP, q4h(std)			
	☐ Monitor and Record T,P,R,BP, q8h(std)			
Activity				
	Bedrest			
	Routine			
	Activity As Tolerated			
	Up To Chair			
Food/N	lutrition			
	NPO			
	Clear Liquid Diet			
	Start at: T;N, Adult (>18 years)			
	Full Liquid Diet Start at: T;N, Adult (>18 years)			
	GI Soft Diet			
	Regular Diet			
	AHA Diet			
_	Adult (>18 years)			
	Renal Diet Not On Dialysis Adult (>18 years)			
Renal Diet On Dialysis				
	Consistent Carbohydrate Diet			
_	Caloric Level: 1800 Calorie			
	Tube Feeding Continuous/Int Plan(SUB)*			
	Tube Feeding Titrate Plan(SUB)*			
	Tube Feeding Bolus Plan(SUB)*			
Patient				
	Drain Care			
	Jackson-Pratt(s) to bulb suction			
	Drain Care			
	q-shift, charge, PJP Drains-empty and recharge and record output			
_	Elevate Head Of Bed 30 degrees			
	Foley Care			
\Box	Incentive Spirometry NSG q1h-Awake			
$\overline{\mathbf{Z}}$	O2 Sat Continuous Monitoring NSG			
	Trach Care Change inner cannula q 12 hrs/prn, if obstructed			
	Trach Care			



	Reep same size Trach and smaller size Trach at bedside			
	Trach Care			
	Do not change trach ties unless okay with MD Trach Care			
П	Place obturator at head of bed			
	Trach Care q8h(std)			
	Suction Patient q2h(std), Suction: Trach			
	Suction Patient			
	prn, PRN Nursing Communication			
	q12h, clean the stoma under trach flange with Q-tips/gauze soaked in NS			
	Mouth Care Routine, Clean oral cavity with antiseptic oral care kit			
	Accucheck Nsg			
	q6h(std)			
	Central Line			
Respira	atory Care			
	O2-BNC			
	2 L/min			
	O2-Trach Collar			
	uous Infusion			
	D5 1/2 NS KCI 20 mEq/L 1,000 mL, IV, 100 mL/hr			
	D5 1/2NS			
	1,000 mL, IV, 100 mL/hr			
	Sodium Chloride 0.9% 1,000 mL, IV, 100 mL/hr			
	Sodium Chloride 0.45%			
Medica	1,000 mL, IV, 100 mL/hr			
	VTE SURGICAL Prophylaxis Plan(SUB)*			
	PCA - MorPHINE Protocol Plan (Adult)(SUB)*			
	PCA - HYDROmorphone Protocol Plan (Adult)(SUB)*			
	Insulin SENSITIVE Sliding Scale Plan(SUB)*			
	Insulin STANDARD Sliding Scale Plan(SUB)*			
	Insulin RESISTANT Sliding Scale Plan(SUB)*			
	Please enter the Start Time on the antibiotic orders below based on time of preop dose(NOTE)*			
	If antibiotics are being continued for greater than 24 hrs, please document your reason(NOTE)*			
	+1 Hours ceFAZolin			
	2 g, Injection, IV Piggyback, once			
	Comments: Time dose 8 hours after pre op dose			
	If patient has penicillin or cephalosporin allergy place order below.(NOTE)*			
	+1 Hours clindamycin			
	600 mg, IV Piggyback, IV Piggyback, once			
딦	Comments: Time dose 8 hours after pre op dose			
☑	+1 Hours ondansetron 4 mg, Injection, IV Push, q6h, PRN Nausea/Vomiting			
$\overline{\mathbf{Z}}$				
	+1 Hours bacitracin 500 units/g topical ointment 1 application, Ointment, TOP, bid			



	+1 Hours acetaminophen 650 mg, Tab, PO, q6h, PRN Pain, Mild (1-3), Routine Comments: Maximum dose of 4g/day from all sources.				
	Choose one of the below pain medications for Morderate pain(NOTE)*				
	, , , , ,				
	+1 Hours acetaminophen-HYDROcodone 325 mg-5 mg oral tablet 1 tab, Tab, PO, q4h, PRN Pain, Moderate (4-7), Routine				
_	Choose one of the below pain medications for SEVERE pain(NOTE)*				
	+1 Hours morphine				
П	2 mg, Injection, IV Push, q4h, PRN Pain, Severe (8-10) Comments: hold if RR less than 12				
	+1 Hours HYDROmorphone 0.5 mg, Injection, IV Push, q4h, PRN Pain, Severe (8-10)				
Labora	Comments: hold if RR less than 12				
	CBC				
	Routine, T;N, once, Type: Blood				
	ВМР				
	Routine, T;N, once, Type: Blood				
	Magnesium Level				
	Routine, T;N, once, Type: Blood				
_	Phosphorus Level Routine, T;N, once, Type: Blood				
	Ionized Calcium				
_	Routine, T;N, once, Type: Blood				
	CBC				
	Routine, T+1;0400, once, Type: Blood BMP				
	Routine, T+1;0400, once, Type: Blood				
	Magnesium Level Routine, T+1;0400, once, Type: Blood				
	Phosphorus Level				
	Routine, T+1;0400, once, Type: Blood Ionized Calcium				
	Routine, T+1;0400, once, Type: Blood				
	PTH Profile				
	Routine, T;N+240, once, Type: Blood				
D:	Comments: 4 hours Post op				
Diagno	Object 1 View				
ш	Chest 1 View T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable				
	Comments: Reason: Post trach(PACU ORDER)				
	Chest 1 View				
	T+1;0800, Reason for Exam: Other, Enter in Comments, Routine				
	Comments: Reason: Status Post trach				
ш	KUB T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable				
	Comments: Reason: NG Tube placement(PACU Order)				
	lts/Notifications/Referrals				
	Notify Physician For Vital Signs Of				
	BP Systolic > 180, BP Diastolic > 100, BP Systolic < 100, Celsius Temp > 38.5, Oxygen Sat < 92				



	Urine Output < 30 Dietitian Consult/Nutrition Therapy Type of Consult: Enteral/Tube Speech Therapy Initial Eval and Tx	e Feeding	
	Routine		
Dat	e Time	Physician's Signature	MD Number

*Report Legend:

DEF - This order sentence is the default for the selected order

GOAL - This component is a goal

IND - This component is an indicator

INT - This component is an intervention

IVS - This component is an IV Set

NOTE - This component is a note

Rx - This component is a prescription

SUB - This component is a sub phase, see separate sheet

R-Required order