



## Plastic Surgery Breast Free Flap POD 0 Plan

[X or R] = will be ordered unless marked out.

attach patient label

Height: \_\_\_\_\_ cm Weight: \_\_\_\_\_ kg

**Allergies:** ☐ [ ] No known allergies

☐ [ ] Latex allergy ☐ [ ] Other: \_\_\_\_\_

### Admission/Transfer/Discharge

☐ [ ] Patient Status Change T;N

☐ [ ] Transfer Pt within current facility T;N

### Food/Nutrition

☐ [ ] Clear Liquid Diet T;N, Adult (>18 years), Order Comments: patient up in chair for all meals.

### Patient Care

☐ [ ] Position Patient T;N, Special Instructions: encourage sitting at edge of bed or chair

☒ [R] Weight Bearing Status T;N, Status: Full Weight Bearing

☐ [ ] Flap Checks T;N, Routine, q1h(std) For 48 hr, Special Instructions: Leave Cooks-Swartz probe signal monitor turned on continuously. Hand held doppler checks and color checks every hour for the first 48 hours.

☐ [ ] Flap Checks T+2;N, Routine, q4h(std) For 4 day, Special Instructions: Hand held doppler checks and color checks every 4 hours thru POD 5.

☐ [ ] Indwelling Urinary Catheter Insert-Follow Removal Protocol T;N, Routine, once, Reason: Intraoperative for prolonged surgery, Special Instructions: to closed gravity drainage. Place in OR after induction of anesthesia.

☐ [ ] Elevate Head Of Bed T;N, Special Instructions: Beach chair position, knees flexed. May use microturns to relieve pressure and prevent pressure ulcer formation

☐ [ ] Incentive Spirometry NSG T;N, Routine, q1h-Awake.

### Nursing Communication

☐ [ ] Nursing Communication T;N, Room temperature 72-75 degrees F

☐ [ ] Nursing Communication T;N, No tobacco or nicotine products.

☐ [ ] Nursing Communication T;N, Monitor for bupivacaine (Exparel) toxicity-signs include dizziness, lightheadedness, blurred vision, ringing/buzzing in ears, metal taste, numbness and/or tingling around the mouth, fingers or toes, drowsiness or confusion.

### Respiratory Care

☐ [ ] Oxygen Saturation-continuous Monitoring (RT) T;N, Special Instructions: Continuous Monitoring while on PCA

### Continuous Infusion

☐ [ ] D5 1/2 NS KCL 20 mEq/L 1000mL, IV, Routine, 125 mL/hr, (for 24 hr)

☐ [ ] Lactated Ringers 1000mL, IV, Routine, 125 mL/hr, (for 24 hr)

### Medications

☐ [ ] acetaminophen 975mg, Tab, PO, q6h, Pain, Mild (1-3), Routine, Order Comments: May give Per Rectum or Per Tube. PO route preferred.

☐ [ ] acetaminophen 975mg, LIQ, Tube, q6h, Pain, Mild (1-3), Routine, Order Comments: Give if unable to tolerate PO.

☐ [ ] acetaminophen 650mg, Supp, PR, q6h, Pain, Mild (1-3), Routine, Order Comments: Give if unable to tolerate PO or Tube.

☐ [ ] oxyCODONE 5mg, Tab, PO, q4h, PRN Pain, Moderate (4-7)





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Medications continued		
<b>Note: For SEVERE pain choose ONE medication below:</b>		
<input type="checkbox"/>	oxyCODONE	10mg, Tab, PO, q4h, PRN Pain, Severe (8-10)
<input type="checkbox"/>	HYDROmorphone	0.5mg, Injection, IV Push, Q4h, PRN Pain, if pain unrelieved by PO. Severe (8-10), Routine, (for 2 doses). DO NOT START PCA UNTIL AFTER TWO DOSES OF HYDROmorphone.
<input type="checkbox"/>	Nursing Communication	T;N, If PCA is ordered do not start until after two doses of HYDROmorphone IV Push have been administered.
<input type="checkbox"/>	<b>PCA - MorPHINE Protocol Plan (Adult)</b>	
<input type="checkbox"/>	<b>PCA - HYDROmorphone Protocol Plan (Adult)</b>	
<input type="checkbox"/>	docusate-senna 50mg-8.6 mg oral tablet	2 tab, Tab, PO, hs, Routine, Order Comments: Hold for diarrhea
<input type="checkbox"/>	bisacodyl	10mg, PR, Qday, PRN constipation, Routine
<input type="checkbox"/>	ceFAZolin	2g, IV Piggyback, IV Piggyback, q8h, Routine, (for 2 doses), Order Comments: Start within 8 hours of last dose, Use for patients less than 120kg.
<b>Note: If patient greater than 120kg, give dose below:</b>		
<input type="checkbox"/>	ceFAZolin	3g, IV Piggyback, IV Piggyback, q8h, Routine, (for 2 doses), Order Comments: Start within 8 hours of last dose, Use for patients 120 kg or greater.
<input type="checkbox"/>	<b>VTE Surgical Prophylaxis Plan</b>	
Consults/Notifications		
<input type="checkbox"/>	Notify Resident-Continuing	T;N, change in flap color or flap signal: the service/on call resident to be notified first with 911 at end of call back number. If they do not call back in 10 minutes, the microsurgery attending MUST be contacted.

Date

Time

Physician's Signature

MD Number