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LeBonheur Children's Medical Center

PHYSICIAN ORDERS

Care Set: Pediatric Cardiovascular Surgery Post-Op Orders

Date:_____ Time:_____ Height:_____cm Weight:_____kg BSA _____

Admission			
Admit as inpatient to Dr. _____			
Notify ICU Attending upon admission to ICU			
Primary Diagnosis: _____			
Secondary Diagnosis:_____			
Condition: _____			☐ Open Sternum
Procedure Performed: _____			
_____			
Allergies:	☐ No known allergies	☐ Latex allergy	☐ Other:_____
	☐ Medication allergy(s): _____		

Vital Signs			
[ ]	Continuous ECG monitor	☐ 3 lead	☐ 5 lead
[ ]	Continuous Pulse Oximetry, Chart Recorder, Temperature via rectal or foley probe		
[ ]	Vital signs with BP via arterial line q 15 min X 2 hours or until stable; q 1 hour and PRN; Correlate arterial BP with cuff BP q 4 hour and PRN		
[ ]	Parameters:	HR _____	to _____
[ ]		BP systolic _____	to _____
[ ]		Mean _____	to _____
[ ]		RA/CVP _____	to _____
[ ]		LA_____	to _____
[ ]		PA_____	to _____
[ ]		SpO2 _____	to _____
[ ]		SvO2 _____	to _____
[ ]		Temp _____	to _____
[ ]		rSO2 (cerebral) _____	to _____
[ ]		rSO2 (somatic)_____	to _____
[ ]	Zero and check levels of all pressure transducers q 12 hours and PRN		
[ ]	ETCO2 Monitor		
[ ]	SVO2 Monitor		
[ ]	Bair Hugger PRN for temperature control		

Activity		
[ ]	Bedrest	☐ Flat ☐ Elevated 45°
[ ]	Place patient in adult ICU bed for immediate post-operative period	

Food/Nutrition	
[ ]	NPO
[ ]	Advance as tolerated after extubation

Patient Care	
[ ]	Weigh patient daily once stable and chest is closed.
[ ]	Strict Intake and Output q 1 hour
[ ]	☐ NG/OG Tube ☐ Gravity Drain ☐ Low Intermittent Suction
[ ]	Chest Tube(s): -20 cm H20 Suction immediately on arrival
[ ]	Strip Chest tube(s) q 1 hour and PRN
[ ]	Measure output q 15 min for _____ hours, then q 1 hour
[ ]	Notify surgeon if chest tube output is 10 mL/kg/hour or greater or for other significant changes in chest tube output.
[ ]	Change chest tube dressings with dry, sterile gauze at 48 hours post-op and PRN
[ ]	Foley Catheter to gravity
[ ]	Notify surgeon if urine output is less than 1 mL/kg/hour
[ ]	Ventilator Management per ICU physicians
[ ]	May wean ventilator per "Respiratory Ventilator Weaning Protocol"
[ ]	Chest Physiotherapy q ____ hours and PRN
[ ]	Incentive spirometry q ____ hours and PRN; TCDB once extubated
[ ]	Inhaled Nitric Oxide at _____ ppm
[ ]	Other Specialty Gases: _____
[ ]	Oro/Nasopharyngeal suctioning q ____ hour once extubated
[ ]	Temporary Pacemaker Settings _____

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Medications (this section can be subdivided as necessary)
[ ] Cefazolin _____ mg (25 mg/kg, 1000 mg maximum), IV q 6 hours X 24 hours
[ ] If allergic to penicillin: Clindamycin _____ mg (10 mg/kg, 600 mg maximum), IV q 6 hours x 24 hours
[ ] Ranitidine _____ mg (1mg/kg, 50 mg max), IV q 8 hours; D/C when taking PO
[ ] Ondansetron _____ mg (0.15 mg/kg, 4 mg maximum), IV q 6 hours PRN Nausea or Vomiting
[ ] Notify on call Cardiothoracic Surgery MD if patient experiences nausea/vomiting
[ ] Acetaminophen _____ mg (15mg/kg, 650 mg maximum), PO/NG/PR q 4 hours PRN for temp or pain
[ ] Fentanyl _____ mcg (1mcg/kg) IV q 1 hour PRN severe pain while intubated
[ ] Morphine Sulfate _____ mg (0.05-0.1 mg/kg) IV q 1hour PRN pain once extubated
[ ] Ketorolac _____ mg (0.5mg/kg, 30 mg maximum), IV q 6 hours x 24 hours
[ ] Isotonic Sodium Bicarbonate for suctioning ETT/Tracheostomy PRN
[ ] KCL _____ mEq (1mEq/kg, 40 mEq maximum), IV over 2 hours via CVL PRN K less than 3.5 mmol/L
[ ] CaCl _____ mg (10mg/kg, 1000 mg maximum), IV over 1 hour PRN iCA less than 1.2 mmol/L
[ ] Magnesium Sulfate _____ mg (15 mg/kg, 1000 mg maximum), IV over 4 hours PRN for Mg less than 1.8 mg/dL
[ ] D5 _ NS IV infusion titrated to meet total hourly IV fluid rate _____ (60% maintenance)
[ ] D5W 1 mL/hr IV infusion for: ☐ CVP ☐ RA ☐ PA ☐ LA (LA only for monitoring only)
[ ] NS with 1 unit heparin per mL at 2 mL/hr via arterial line
[ ] Aminocaproic acid _____mg (100mg/kg), IV q 6 hours post-op
[ ] Protamine _____ mg (25 mg maximum), IV X 1 dose over 15 minutes on arrival to ICU
[ ] DOBUTamine _____ mcg/kg/min (2-20 mcg/kg/min), IV continuous infusion
[ ] DOPamine _____ mcg/kg/min (2-20 mcg/kg/min), IV continuous infusion
[ ] EPINEPHrine _____ mcg/kg/min (0.05-1 mcg/kg/min), IV continuous infusion
[ ] Norepinephrine _____ mcg/kg/min (0.025-0.25 mcg/kg/min), IV continuous infusion
[ ] Nitroprusside _____ mcg/kg/min (0.5-4 mcg/kg/min), IV continuous infusion
[ ] Milrinone _____ mcg/kg/min (0.25-1 mcg/kg/min), IV continuous infusion
[ ] Vasopressin _____ milliUnits/kg/min (start at 0.2-1 milliUnits/kg/min), IV continuous infusion
[ ] CaCl _____ mg/kg/hr (5mg/kg/hr), IV continuous infusion
[ ] Nitroglycerin _____ mcg/kg/min (1-8 mcg/kg/min), IV continuous infusion
[ ] Other: _____
[ ] Fentanyl _____ mcg/kg/hr (0.5-5 mcg/kg/hr), IV continuous infusion
[ ] Midazolam _____ mg/kg/hr (0.05-0.2 mg/kg/hr), IV continuous infusion
[ ] Morphine _____ mg/kg/hr (0.01-0.2 mg/kg/hr), IV continuous infusion
[ ] Other: _____
[ ] Flush and clamp all IVs PRN with NS

Diagnostic Tests	
[ ] Stat Portable Chest XRAY on arrival and q AM while in ICU "follow postoperative cardiac surgery"	
[ ] Stat 12 Lead ECG on arrival and in AM "follow postoperative cardiac surgery"	
[ ] ABG istat with electrolytes on arrival, AM, and PRN	☐ q ____ hours
[ ] Istat lactate on arrival, AM, and PRN	☐ q ____ hours
[ ] CBC with differential on arrival, AM	☐ q ____ hours
[ ] BMP, Mg on arrival, AM	☐ q ____ hours
[ ] PT/PTT, INR, Fibrinogen on arrival, AM	☐ q ____ hours
[ ] Activated Clotting Time on arrival	
[ ] MetHgb q 12 hours if patient on inhaled nitric oxide	
[ ] Other: _____	

Consults
[ ] Cardiology Consult. Please notify on-call Cardiologist upon admission to ICU
[ ] TPN Consult

Physician's Signature	Name Printed	Physician Number	Beeper Number

Nurse Practitioner's Signature	Name Printed	Nurse Practitioner Number	Beeper Number