



## Physician Orders PEDIATRIC: LEB GEN SURG Bariatric Surgery Post Op Plan

### Initiate Orders Phase

#### Care Sets/Protocols/PowerPlans

- Initiate Powerplan Phase

*Phase: LEB GEN SURG Bariatric Surgery Post Op Phase, When to Initiate: \_\_\_\_\_*

### LEB GEN SURG Bariatric Surgery Post Op Phase

#### Admission/Transfer/Discharge

If patient on home CPAP/BiPAP, admit to IMCU, otherwise admit to surgical floor. (NOTE)\*

- Return Patient to Room  
 Transfer Pt within current facility  
 Notify Physician-Once

*Notify For: of room number on arrival to unit.*

#### Vital Signs

- Vital Signs

*Monitor and Record T,P,R,BP, q2h x 8, then q4h.*

#### Activity

- Out Of Bed

*Up To Chair, With Assistance, First time out of bed with assistance at 1600, 2000*

#### Food/Nutrition

- Le Bonheur Bariatric Clear

*Bariatric clears, No red dyes, no straws*

#### Patient Care

- Intake and Output  
*q2h(std)*

- O2 Sat Continuous Monitoring NSG

- Foley Care  
*to gravity drainage.*

- Cardiopulmonary Monitor  
*Routine, Monitor Type: CP Monitor, Special Instructions: upon arrival to floor post op.*

- Turn Cough Deep Breathe  
*q2h-Awake*

- Incentive Spirometry NSG  
*q1h-Awake, 10 breaths.*

#### Nursing Communication

- Nursing Communication  
*All oral medications must either be liquid, powder, or crushable/chewable*

- Nursing Communication  
*Place bariatric sign above bed and on door to room*

- Nursing Communication  
*Patient may only have liquids from bariatric tray*

- Nursing Communication  
*Place sign above bed, "No NG Tube"*

#### Respiratory Care

- Mechanical Ventilation (Ped)  
*Vent Settings: NIV NAVA, Special Instructions: Home CPAP.*

- ISTAT POC (RT Collect)  
*Stat once, Test Select CBG*

- ISTAT POC (RT Collect)  
*Test Select CBG, T+1;0600*

- Oxygen Delivery





**Physician Orders PEDIATRIC: LEB GEN SURG Bariatric Surgery Post Op Plan**

*Special Instructions: Wean to keep O2 sat > greater than 92%*

**Continuous Infusion**

- D5 1/2 NS KCl 20 mEq/L  
20 mEq / 1,000 mL, IV, Routine, 150 mL/hr

**Medications**

- +1 Hours** Heparin 10 units/mL Flush (peds)  
1 mL, Injection, IV Push, prn, PRN Cath Clearance, Routine  
*Comments: peripheral or central line per nursing policy*
- +1 Hours** acetaminophen  
1,000 mg, Ped Injectable, IV, q6h, Routine, Max Dose=75 mg/kg/day up to 4 g/day.
- +1 Hours** enoxaparin  
40 mg, Injection, Subcutaneous, q12h
- +1 Hours** ondansetron  
8 mg, Injection, IV Push, q6h, Routine, Max dose = 8mg
- +1 Hours** promethazine  
25 mg, Tab, PO, q4h, PRN Nausea/Vomiting, Routine  
*Comments: Crush tablet in 5mL of Crystal lite or water for patient to drink*
- +1 Hours** pantoprazole  
20 mg, Injection, IV Push, q24h
- +1 Hours** oxyCODONE  
7.5 mg, Oral Soln, PO, q6h, PRN Pain, Moderate (4-7)
- +1 Hours** morphine  
4 mg, Injection, IV Push, q2h, PRN Pain, Severe (8-10)
- +1 Hours** ceFAZolin  
1 g, Injection, IV Piggyback, q8h, Routine, (for 2 dose ), Reason for ABX: Prophylaxis  
NOTE: If allergic to cephalosporins, order clindamycin.(NOTE)\*
- +1 Hours** clindamycin  
900 mg, Injection, IV Piggyback, q8h, Routine, (for 2 dose ), Reason for ABX: Prophylaxis

**Consults/Notifications/Referrals**

- Notify Physician-Continuing  
*Notify: Surgery Resident On Call., Notify For: of HCT less than 30mg/dL.*
- Notify Physician-Continuing  
*Notify: Surgery Resident On Call., Notify For: of temperature greater than 38.0 degrees; shortness of breath; increased drainage, erythema or edema at the surgical site; N/V not controlled with Zofran/Phenergan; increased abdominal pain.*
- PT Ped Eval & Tx  
*Routine*
- ET Consult  
*Special Instructions: Bariatric bed.*
- Child Life Consult  
*Other, Specify in Comments, Pet therapy, may have home pet.*

Date	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





**Physician Orders PEDIATRIC: LEB GEN SURG Bariatric Surgery Post Op Plan**

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

