



**Physician Orders ADULT: Ortho Total Joint Plan**

**Initiate Orders Phase**

**Non Categorized**

R Powerplan Open

**Care Sets/Protocols/PowerPlans**

- Initiate Powerplan Phase  
*Phase: Ortho Total Joint Preop Phase, When to Initiate: Other-See Special Instructions, initiate when patient arrives on day of surgery*
- Initiate Powerplan Phase  
*Phase: Ortho Total Joint PACU Phase, When to Initiate: When patient arrives in PACU*
- Initiate Powerplan Phase  
*Phase: Ortho Total Joint Post Op Phase, When to Initiate: When patient returns to room post op, from PACU*
- Initiate Powerplan Phase  
*Phase: Ortho Total Joint Pain Floor Phase, When to Initiate: Other-See Special Instructions, when pain catheter has been removed*

**Ortho Total Joint Preop Phase**

**Non Categorized**

- Add To Problem List  
*Problem: S/P total hip*
- Add To Problem List  
*Problem: S/P total knee*
- Add To Problem List
- Pre Op Diagnosis/Reason

**Admission/Transfer/Discharge**

- Patient Status Initial Inpatient  
*T;N, Reason for Visit: Total Joint Surgery, Bed Type: Other - see Special Instructions, Unit Location: Total Joint Center*
- Outpatient Patient Status Initial  
*T;N Attending Physician: \_\_\_\_\_  
Reason for Visit: \_\_\_\_\_  
Bed Type: \_\_\_\_\_ Specific Unit: \_\_\_\_\_  
Outpatient Status/Service: OP-Ambulatory Surgery*

**Vital Signs**

- Vital Signs
  - Monitor and Record T,P,R,BP, q4h(std) (DEF)\*
  - Monitor and Record T,P,R,BP, q2h(std), if in critical care

**Food/Nutrition**

- NPO  
*Instructions: NPO except for medications Instructions: NPO except for sips of water*

**Patient Care**

- Nursing Communication  
*verify current H&P on chart*
- Instruct/Educate
  - Instruct: Patient and Family, Method: Provide Pamphlet, Topic: Total Hip Replacement (DEF)\*
  - Instruct: Patient and Family, Method: Provide Pamphlet, Topic: Total Knee Replacement
  - Instruct: Patient and Family, Method: Provide Pamphlet, Topic: Shoulder Replacement
- Preop Clip Hair at Operative Site  
*location: \_\_\_\_\_*
- Consent Signed For





### Physician Orders ADULT: Ortho Total Joint Plan

- T;N, Procedure: Right total hip arthroplasty (DEF)\*
- T;N, Procedure: Left total hip arthroplasty
- T;N, Procedure: Right partial hip
- T;N, Procedure: Left partial hip
- T;N, Procedure: Right total knee arthroplasty
- T;N, Procedure: Left total knee arthroplasty
- T;N, Procedure: Right shoulder arthroplasty
- T;N, Procedure: Left shoulder arthroplasty
- Indwelling Urinary Catheter Insert-Follow Removal Protocol  
Foley to gravity, To be placed while in pre procedure area.

#### Nursing Communication

- Nursing Communication  
prior to sedation, physician/designee to verify operative extremity by marking the operative extremity with physician's/designee's initials
- Nursing Communication  
Perform In and Out Cath for Urinalysis if previously collected voided or clean catch midstream specimen was not negative for Protein, RBC, WBC, Bacteria, Leukocyte Esterase and/or Nitrites. Must be In & Out Cath only!

#### Medications

- +1 Hours** acetaminophen  
975 mg, PO, OnCall  
Comments: On Call to O.R
- ceFAZolin  
2 g, IV Piggyback, IV Piggyback, N/A  
Comments: start no earlier than one hour prior to incision time. To be given by Same Day Surgery/OR Circulator. Give initial dose in pre-op holding.
- +1 Hours** vancomycin  
15 mg/kg, IV Piggyback, IV Piggyback, N/A, ( infuse over 1 hr )  
Comments: start no earlier than 2 hours prior to incision time. To be given by Same Day Surgery/OR Circulator. Give initial dose in pre-op holding. Max Dose= 2Gm  
If greater than 120 kg, choose both orders below:(NOTE)\*
- +1 Hours** ceFAZolin  
3 g, IV Piggyback, IV Piggyback, N/A, Routine, (for 1 dose ), start no earlier than 1 hr prior to incision  
Comments: start no earlier than one hour prior to incision time. To be given by Same Day Surgery/OR Circulator. Give initial dose in pre-op holding.
- +1 Hours** vancomycin  
15 mg/kg, IV Piggyback, IV Piggyback, N/A, Routine, (for 1 dose ), start no earlier than 2 hrs prior to incision  
Comments: start no earlier than 2 hours prior to incision time. To be given by Same Day Surgery/OR Circulator. Give initial dose in pre-op holding. Max Dose= 2Gm  
If documented beta-lactam allergy, choose antibiotic below:(NOTE)\*
- +1 Hours** vancomycin  
15 mg/kg, IV Piggyback, IV Piggyback, N/A, Routine, (for 1 dose ), start no earlier than 2 hrs prior to incision,  
Comments: start no earlier than 2 hours prior to incision time. To be given by Same Day Surgery/OR Circulator. Give initial dose in pre-op holding. Max Dose= 2Gm

#### Laboratory

- Do not order if tests have already been completed as prior to date of admission(NOTE)\*
- CBC  
Routine, T;N, once, Type: Blood





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- BMP  
*Routine, T;N, once, Type: Blood*
- Urinalysis w/Reflex Microscopic Exam  
*Routine, T;N, once, Type: Urine, Nurse Collect*
- Type and Crossmatch PRBC
  - Routine, T;N, 1 units, Type: Blood (DEF)\**  
*Comments: give autologous or directed donor if available*
  - Routine, T;N, 2 units, Type: Blood*  
*Comments: give autologous or directed donor if available*
  - Routine, T;N, 4 units, Type: Blood*  
*Comments: give autologous or directed donor if available*
- Transfuse PRBC's - Not Actively Bleeding  
*Routine, T;N*
- Transfuse PRBC's - Actively Bleeding  
*Routine, T;N*
- Hold PRBC  
*Routine, T;N, Reason: On Hold for OR*

#### Diagnostic Tests

Do not order if patient has already been cleared as outpatient(NOTE)\*

- EKG  
*Start at: T;N, Priority: Routine, Reason: Other, specify, preop total joint surgery*  
*Comments: Reason for exam: Pre-Operative Cardiovascular Exam*
- Chest 2 Views  
*T;N, Routine, Stretcher*

#### Consults/Notifications/Referrals

- Physician Group Consult  
*Group: Medical Anesthesia Group, Reason for Consult: for preoperative pain block*

#### Ortho Total Joint PACU Phase

##### Admission/Transfer/Discharge

- Return Patient to Room  
*T;N*  
*Comments: References and PACU discharge criteria are located on MOLLI.*
- Transfer Pt within current facility  
*Level of Care: Med-Surg, To Orthopedic floor, once stable per PACU criteria*  
*Comments: References and PACU discharge criteria are located on MOLLI.*

#### Vital Signs

- Neurovascular Checks  
*q15 minutes during Phase I and q30 minutes during Phase II, (PACU order)*

#### Nursing Communication

- Nursing Communication  
*Foley to gravity (PACU order)*

#### Laboratory

- Hct  
*STAT, T;N, once, Type: Blood*

#### Diagnostic Tests

- Knee 1/2 VW LT  
*T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable*  
*Comments: immediate postop knee*
- Knee 1/2 VW RT  
*T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable*  
*Comments: immediate postop knee*





**Physician Orders ADULT: Ortho Total Joint Plan**

- Hip Uni 1 VW LT  
*T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable  
Comments: immediate postop hip*
- Hip Uni 1 VW RT  
*T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable  
Comments: immediate postop hip*
- Shoulder Comp 2+VW LT  
*T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable  
Comments: immediate post op shoulder*
- Shoulder Comp 2+VW RT  
*T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable  
Comments: immediate post op shoulder*

**Ortho Total Joint Postop Phase**

**Admission/Transfer/Discharge**

- Return Patient to Room  
*T;N*
- Transfer Pt within current facility

**Vital Signs**

- Vital Signs
  - Monitor and Record Resp Rate Monitor and Record Blood Pressure Monitor and Record Pulse, q30mins x2; P,R, BP q1h x2; P,R, BP q4h x 6; Temperature on admission to unit and q4h x 6 (DEF)\**
  - Monitor and Record T,P,R,BP, q2h x 8 hours, then q-shift*
- Neurovascular Checks  
*q30 min x 2, then q1h x 2, then q4h x6*

**Activity**

- Turn  
*q2hr without fail*
- Out Of Bed
  - Up To Bedside Commode (DEF)\**
  - Up To Chair*
  - Up To Stroke Chair*
  - Up Ad Lib, including weekends*
- Bedrest  
*for \_\_\_ hours (DEF)\*  
until assessed by physical therapy*
- Dangle At Bedside  
*Night of surgery*

**Food/Nutrition**

- Clear Liquid Diet  
*Start at: T;N*
- Full Liquid Diet  
*Start at: T;N*
- Regular Adult Diet
- Consistent Carbohydrate Diet
  - Caloric Level: 1800 Calorie (DEF)\**
  - Caloric Level: 2000 Calorie*
  - Caloric Level: 2200 Calorie*

**Patient Care**





**Physician Orders ADULT: Ortho Total Joint Plan**

- INT Insert/Site Care  
*q4day, start INT*
- Advance Diet As Tolerated
- CPM Machine Apply  
*Apply To Affected Extremity, \_\_\_\_\_degrees, while in bed.*
- Arthroplasty Precautions  
*Routine, no flexion greater than or equal to 90 degrees, no hip adduction, and no internal rotation*
- Immobilizer Apply
  - Right Knee, in bed (DEF)\**
  - Left Knee, in bed*
  - Right Knee, with ambulation*
  - Left Knee, with ambulation*
- Abduction Pillow Apply  
*Routine, when in bed; keep wedge between legs*
- Weight Bearing Status
  - Status: To Tolerance (DEF)\**
  - Status: Touch Down*
  - Status: No Weight Bearing*
- Trapeze Bar Apply  
*Routine, without fail*
- Incentive Spirometry NSG  
*q1h-Awake*
- Drain Care  
*Empty hemovac/JP and record output q8h*
- ATS Knee System  
*T;N, for 48 hours*
- Instruct/Educate  
*Provide teaching materials and document., Total Joint Hip*
- In and Out Cath  
*q6h PRN if unable to void, after Foley has been discontinued*
- Continue Foley Per Protocol
- Foley Care  
*q-shift, PRN*
- Foley Remove  
*Remove post day # \_\_\_\_\_, may reinsert if unable to void after \_\_\_\_\_ I/O*
- Ankle Pumps  
*have patient repeat 10 times per hour while awake*
- Cold Apply  
*Apply to: affected extremity, Apply Method: Cold Therapy Knee/Shoulder System*

**Nursing Communication**

- Nursing Communication  
*do not turn to the operative side*
- Nursing Communication  
*If patient has tunneled nerve catheter, Anesthesia will manage the pain orders until nerve catheter is discontinued*
- Nursing Communication  
*If blood products are given, place order for STAT Hct after transfusion is given.*

**Respiratory Care**





## Physician Orders ADULT: Ortho Total Joint Plan

- O2-BNC  
2 L/min, Special Instructions: titrate to keep O2 => 92%

## Continuous Infusion

- +1 Hours** Dextrose 5% in Lactated Ringers Injection  
1,000 mL, IV, Routine, 50 mL/hr
- +1 Hours** Dextrose 5% with 0.45% NaCl  
1,000 mL, IV, Routine, 50 mL/hr
- +1 Hours** Lactated Ringers Injection  
1,000 mL, IV, Routine, 50 mL/hr
- +1 Hours** Normal Saline  
1,000 mL, IV, Routine, 50 mL/hr
- +1 Hours** Sodium Chloride 0.45%  
1,000 mL, IV, Routine, 50 mL/hr

## Medications

- VTE ORTHO SURGICAL Prophylaxis Plan(SUB)\*
- Insulin SENSITIVE Sliding Scale Plan(SUB)\*
- Insulin STANDARD Sliding Scale Plan(SUB)\*
- Insulin RESISTANT Sliding Scale Plan(SUB)\*  
If patient has tunneled nerve catheter, Anesthesia will manage the pain orders until nerve catheter is discontinued(NOTE)\*
- +1 Hours** acetaminophen  
650 mg, Tab, PO, q6h, PRN Headache or Fever, Routine  
If no history of peptic ulcer disease, GI bleed or renal insufficiency, complete Ketorolac order below:(NOTE)\*  
If age greater than or equal to 65 or weight less than 50Kg, place Ketorolac 15mg order dose below, otherwise use Ketorolac 30mg dose.(NOTE)\*
- +1 Hours** ketorolac
- 30 mg, Injection, IV Push, q6h, Routine, ( 48 hr ) (DEF)\*
- 15 mg, Injection, IV Push, q6h, Routine, ( 48 hr )
- +1 Hours** vancomycin  
15 mg/kg, IV Piggyback, IV Piggyback, once, Routine  
Comments: time post op dose 12 hours after preop dose
- AND(NOTE)\*
- +8 Hours** ceFAZolin  
2 g, IV Piggyback, IV Piggyback, once, Routine  
Comments: time first of post op doses 8 hours after preop dose
- Select below to document contraindication(NOTE)\*
- Indications-Continuing Antibiotics beyond 24 hours  
T;N
- Note: If greater than 120 kg, choose both orders below:(NOTE)\*
- +8 Hours** ceFAZolin  
3 g, IV Piggyback, IV Piggyback, once, Routine  
Comments: time first of post op doses 8 hours after preop dose
- AND(NOTE)\*
- +1 Hours** vancomycin  
15 mg/kg, IV Piggyback, IV Piggyback, once, Routine  
Comments: time post op dose 12 hours after preop dose
- NOTE: If documented Beta Lactam Allergy, choose antibiotic below:(NOTE)\*
- +1 Hours** vancomycin  
15 mg/kg, IV Piggyback, IV Piggyback, once, Routine, (for 1 dose )  
Comments: time post op dose 12 hours after preop dose





**Physician Orders ADULT: Ortho Total Joint Plan**

- Indications-Continuing Antibiotics beyond 24 hours  
*T;N*
- Laxative of Choice Orders Plan(SUB)\*
- +1 Hours** Al hydroxide/Mg hydroxide/simethicone  
*15 mL, Oral Susp, PO, q6h, PRN Gas, Routine*
- +1 Hours** multivitamin  
*1 tab, Tab, PO, QDay, Routine*
- +1 Hours** aspirin  
*325 mg, DR Tablet, PO, QDay, Routine*  
*Comments: Aspirin for VTE Prophylaxis*
- +1 Hours** docusate  
*100 mg, Cap, PO, QDay, Routine*  
celecoxib (CeleBREX) contraindicated if patient on ketorolac or other NSAIDS(NOTE)\*
- +1 Hours** CeleBREX  
*100 mg, Cap, PO, bid, ( 48 hr )*

**Laboratory**

- Hct  
*Routine, T;N, qam x 3 day, Type: Blood*
- Nursing Communication  
*If hematocrit less than 24%, auto transfuse 1 unit and repeat hematocrit*  
If Ketorolac is ordered above, must order both creatinine level orders below:(NOTE)\*
- Creatinine  
*STAT, T;N, once, Type: Blood*
- Creatinine  
*Time Study, T;N, qam x 2 occurrence, Type: Blood*
- CBC  
*Time Study, T;N, qam x 3 day, Type: Blood*
- CMP  
*Routine, T;N, once, Type: Blood*
- BMP  
*Routine, T+1;0400, qam x 3 day, Type: Blood*
- Magnesium Level  
*Routine, T;N, once, Type: Blood*
- Phosphorus Level  
*Routine, T;N, once, Type: Blood*  
If patient on warfarin,order PT order below:(NOTE)\*
- PT/INR  
*Time Study, T;N, qam, Type: Blood*
- Nursing Communication  
*If blood products are given, place order for STAT Hct after transfusion is given.*
- Type and Crossmatch PRBC  
*Routine, T;N, Type: Blood*
- Crossmatch Additional Units  
*Routine, T;N*
- Transfuse PRBC's - Not Actively Bleeding  
*Routine, T;N*
- Transfuse PRBC's - Actively Bleeding  
*Routine, T;N*
- Hold PRBC  
*Routine, T;N, Reason: On Hold for OR*





Physician Orders ADULT: Ortho Total Joint Plan

Consults/Notifications/Referrals

- PT Initial Evaluation and Treatment
OT Initial Evaluation and Treatment
Physician Consult
Physician Group Consult
Consult Case Management
Consult Medical Social Work

Ortho Total Joint Pain Floor Phase

Nursing Communication

- Nursing Communication
If patient has tunneled nerve catheter, Anesthesia will manage the pain orders until nerve catheter is discontinued

Medications

- PCA - MorPHINE Protocol Plan (Adult)(SUB)\*
PCA - HYDROmorphine Protocol Plan (Adult)(SUB)\*
+1 Hours morphine
+1 Hours HYDROmorphine
+1 Hours acetaminophen-oxyCODONE 325 mg-5 mg oral tablet
+1 Hours acetaminophen-HYDROcodone 325 mg-5 mg oral tablet
+1 Hours hydroOXYzine hydrochloride
+1 Hours ondansetron
+1 Hours prochlorperazine
+1 Hours zolpidem

Consults/Notifications/Referrals

- Physician Group Consult
Group: Medical Anesthesia Group, Reason for Consult: Regional Block

Date Time Physician's Signature MD Number





**Physician Orders ADULT: Ortho Total Joint Plan**

**\*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

