



## Physician Orders ADULT: Thoracentesis Plan

### Initiate Orders Phase

#### Care Sets/Protocols/PowerPlans

- ☒ Initiate Powerplan Phase  
*Phase: Thoracentesis Phase, When to Initiate: \_\_\_\_\_*

### Thoracentesis Phase

#### Admission/Transfer/Discharge

- ☐ Return Patient to Room  
☐ Transfer Pt within current facility

#### Patient Care

- ☐ Consent Signed For  
*Procedure: Thoracentesis, Obtain permit for Thoracentesis from patient or surrogate, place on chart prior to procedure*
- ☐ O2 Sat Monitoring NSG  
*Stat, if distress occurs after tap*
- ☐ Have at Bedside  
*sterile gloves, Size: \_\_\_\_\_*
- ☐ Have at Bedside  
*Thoracentesis tray*

#### Nursing Communication

- ☐ Nursing Communication  
*Observe closely for 1hr after tap, if distress occurs, get VS and SpO2 and call to physician who performed tap*
- ☐ Nursing Communication  
*Document nature and amount of fluid obtained if done at bedside*

#### Laboratory

- ☐ Cytology Non-Gyn Order  
*Routine, T;N, Specimen Type: PLEURAL (L) FLD, keep fluid for 7 days*
- ☐ Cytology Non-Gyn Order  
*Routine, T;N, Specimen Type: PLEURAL (R) FLD, keep fluid for 7 days*
- ☐ Cytology Non-Gyn Order  
*Routine, T;N, Specimen Type: PLEURAL FLUID, keep fluid for 7 days*
- ☒ Protein Fluid  
*Routine, T;N, once, Type: Pleural Fluid, Nurse Collect*
- ☐ Glucose Fluid  
*Routine, T;N, once, Type: Pleural Fluid, Nurse Collect*
- ☒ Body Fluid Profile  
*Routine, T;N, once, Type: Pleural Fluid, Nurse Collect*
- ☐ Cell Count & Diff Fluid  
*Routine, T;N, Type: Pleural Fluid, Nurse Collect*
- ☐ Gram Stain  
*Routine, T;N, Specimen Source: Pleural Fluid Chest, Nurse Collect*
- ☐ Body Fluid Culture and Gram Stain  
*Routine, T;N, Specimen Source: Fluid Pleura, Nurse Collect*
- ☒ LD Fluid





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- Routine, T;N, once, Type: Pleural Fluid, Nurse Collect*
- ☐ AFB Culture and Smear  
*Routine, T;N, Specimen Source: Pleural Fluid Chest, Nurse Collect*
- ☐ Culture, Fungus  
*Routine, T;N, Specimen Source: Fluid Pleura, Nurse Collect*
- ☐ pH Fluid  
*Routine, T;N, once, Type: Pleural Fluid, Nurse Collect*
- ☐ Albumin Level  
*Routine, T;N, once, Type: Blood*
- ☐ Protein Total  
*Routine, T;N, once, Type: Blood*
- ☐ LDH  
*Routine, T;N, once, Type: Blood*
- ☐ Cholesterol, Peritoneal Fluid  
*Routine, T;N, once, Type: Peritoneal Fluid, Nurse Collect*
- ☐ Cholesterol, Pleural Fluid  
*Routine, T;N, once, Type: Pleural Fluid, Nurse Collect*
- ☐ Rheumatoid Factor  
*Routine, T;N, once, Type: Blood*
- ☐ Hematocrit Fluid  
*Routine, T;N, once, Type: Pleural Fluid, Nurse Collect*
- ☐ Amylase Fluid  
*Routine, T;N, once, Type: Pleural Fluid, Nurse Collect*
- ☐ Triglycerides, Peritoneal Fluid  
*Routine, T;N, once, Type: Peritoneal Fluid, Nurse Collect*
- ☐ Triglycerides, Pleural Fluid  
*Routine, T;N, once, Type: Pleural Fluid, Nurse Collect*

#### Diagnostic Tests

- ☐ Chest 1 View  
*T;N, Reason for Exam: Other, Enter in Comments, Routine, Portable*  
*Comments: Post Thoracentesis*
- ☒ US Guide For Ndl Place Bx/Asp/Inj/Loc  
*T;N, Reason for Exam: Other, Enter in Comments, Routine*  
*Comments: Consult radiologist to perform thoracentesis*

#### Consults/Notifications/Referrals

Please select order below for MLH South facility ONLY:(NOTE)\*

- ☐ Consult IR (Interventional Radiologist)  
*T;N, Reason for Exam: Other, Enter in Comments, Routine*  
*Comments: Consult radiologist to perform thoracentesis*

**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





**Physician Orders ADULT: Thoracentesis Plan**

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

