



Physician Orders ADULT: ANES PACU Post Op Plan

ANES PACU Post Op Plan

Non Categorized

- ☐ Initiate Powerplan Phase
Phase: ANES PACU Post Op Phase, When to Initiate: When patient arrives in PACU

Admission/Transfer/Discharge

- ☐ Return Patient to Room
T;N

Patient Care

- ☒ Extubate-PACU
Routine, Extubate per PACU protocol. PACU order.
- ☒ Heat Apply
Apply To All Extremities, Forced Air Blanket, Apply to all extremities, for oral temp less than 34.5 DegC (PACU Order)
- ☐ Restraint Medical/Surgical(non-violent, non-self-destructive)
T;N
- ☐ Arterial Line Remove
Special Instructions: Remove prior to discharge from PACU and hold pressure until bleeding stops (PACU Order)

Nursing Communication

- ☒ Nursing Communication
When O2 discontinued and oxygen sat less than 92%, place order for O2 BNC at 2L/min x 24 hours.
- ☒ Nursing Communication
Discontinue ANES PACU Post Op Plan/phase orders when patient discharged from PACU. (PACU Order)
- ☒ Nursing Communication
Discuss all med orders not ordered by anesthesia with anesthesiologist prior to administration while patient in PACU. (PACU Order)
- ☒ Nursing Communication
If multiple IV fluids hanging, ask Anesthesia provider which fluid(s) to discontinue. Flush all other IVs with 10mL of normal saline.
- ☒ Nursing Communication
If receiving hyperalimentation (TPN) continue orders at pre-surgery rate.
- ☒ Nursing Communication
If SCDs ordered preoperatively, continue in PACU. (PACU Order)
- ☒ Nursing Communication
Upon discharge from PACU begin using Surgeon ordered medications and IV Fluid orders. (PACU Order)
- ☒ Nursing Communication
Continue any blood product transfusion started in surgery and document amount of intake in Iview
- ☐ Nursing Communication
*Initiate Insulin SENSITIVE Sliding Scale Phase when patient arrives in PACU. (DEF)**





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Initiate Insulin STANDARD Sliding Scale Phase when patient arrives in PACU.

Initiate Insulin RESISTANT Sliding Scale Phase when patient arrives in PACU.

Respiratory Care

- ☒ O2-Simple Facemask
*Routine, 5L/min L/min, Special Instructions: O2: 40% initially, wean to room air per PACU policy.
May use nasal cannula as bridge.*

- ☐ ABG- RT Collect
Stat once, Special Instructions: PACU Only

Continuous Infusion

- ☐ lactated ringers
1,000 mL, IV, 50 mL/hr
- ☐ lactated ringers
1,000 mL, IV, 125 mL/hr
- ☐ Sodium Chloride 0.9%
1,000 mL, IV, 50 mL/hr
- ☐ Sodium Chloride 0.9%
1,000 mL, IV, 125 mL/hr
Pressure Transducer Orders(NOTE)*
- ☐ Sodium Chloride 0.9%
500 mL, IV, 3 mL/hr
Comments: For pressure transducers.
- ☐ heparin 1,000 units/NS (IABP flush)
1,000 units / 500 mL, IV, Routine, 3 mL/hr, (IABP flush)

Medications

- ☐ Whole Blood Glucose Nsg
Routine, For 1 hr, after administration of insulin in PACU. Notify Anesthesiologist if bld glucose less than 75 mg/dl or greater than 200 mg/dl.
- ☐ Whole Blood Glucose Nsg
*Bedside glucose upon arrival to PACU. Notify Anesthesiologist if Blood glucose less than 75mg/dl.
Notify Anesthesia for blood glucose greater than 150mg/dl unless on sliding scale insulin.*
NOTE: Choose only one pain medication and one dosage of that medication for mild, moderate and severe pain.(NOTE)*
- ☐ **+15 Minutes** HYDROmorphine
0.25 mg, Injection, IV Push, q5min, PRN Pain, Mild (1-3), Routine, (for 6 hr)
Comments: PACU only; max dose 2mg/hr
- ☐ **+15 Minutes** HYDROmorphine
0.5 mg, Injection, IV Push, q5min, PRN Pain, Moderate (4-7), Routine, (for 6 hr)
Comments: PACU only; max dose 2mg/hr
- ☐ **+15 Minutes** HYDROmorphine
1 mg, Injection, IV Push, q5min, PRN Pain, Severe (8-10), Routine, (for 6 hr)
Comments: PACU only; max dose 2mg/hr





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OR(NOTE)*

- ☐ **+15 Minutes** morphine
1 mg, Injection, IV Push, q5min, PRN Pain, Mild (1-3), Routine, (for 6 hr)
Comments: PACU only; max dose 6mg/hr limit
- ☐ **+15 Minutes** morphine
2 mg, Injection, IV Push, q5min, PRN Pain, Moderate (4-7), Routine, (for 6 hr)
Comments: PACU only; max dose 6mg/hr limit
- ☐ **+15 Minutes** morphine
4 mg, Injection, IV Push, q5min, PRN Pain, Severe (8-10), Routine, (for 6 hr)
Comments: PACU only; max dose 6mg/hr limit
- OR: If patient allergic to or unable to tolerate hydromorphone or morphine(NOTE)*
- ☐ **+15 Minutes** meperidine
12.5 mg, Injection, IV Push, q5min, PRN Pain, Mild (1-3), Routine, (for 6 hr), (infuse over 6 hr)
Comments: PACU only; max dose 100mg/hr
- ☐ **+15 Minutes** meperidine
50 mg, Injection, IV Push, q5min, PRN Pain, Moderate (4-7), Routine, (for 6 hr)
Comments: PACU only; max dose 100mg/hr
- ☐ **+15 Minutes** meperidine
100 mg, Injection, IV Push, q5min, PRN Pain, Severe (8-10), Routine, (for 6 hr)
Comments: PACU only; max dose 100mg/hr
- If history of peptic ulcer disease or GI Bleed, creatinine greater than 1.5mg/dL, or significant CAD, do not order ketorolac.(NOTE)*
- If age greater than 65 or weight less than 50kg, place order below:(NOTE)*
- ☐ **+15 Minutes** ketorolac
15 mg, Injection, IV Push, once, PRN Pain, Mild (1-3), Routine, (for 6 hr)
Comments: PACU only
If age less than 65, place order below:(NOTE)*
- ☐ **+15 Minutes** ketorolac
30 mg, Injection, IV Push, once, PRN Pain, Mild (1-3), Routine, (for 6 hr)
Comments: PACU only
- ☐ **+15 Minutes** labetalol
 - ☐ 10 mg, Injection, IV Push, q5min, PRN Hypertension, Routine, (for 2 dose) (DEF)*
Comments: give for systolic BP greater than 180 or diastolic BP greater than 90, hold for heart rate less than 60bpm. PACU only. Give labetalol first if ordered with hydralazine.
 - ☐ 20 mg, Injection, IV Push, q5min, PRN Hypertension, Routine, (for 2 dose)
Comments: give for systolic BP greater than 180 or diastolic BP greater than 90, hold for heart rate less than 60bpm. PACU only. Give labetalol first if ordered with hydralazine.
- ☐ **+15 Minutes** hydrALAZINE
10 mg, Injection, IV Push, q20min, PRN Hypertension, Routine, (for 2 dose)
Comments: give for systolic BP greater than 180 or diastolic greater than 90. PACU only.
- ☐ **+15 Minutes** meperidine





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12.5 mg, Injection, IV Push, once, PRN Shivering, Routine, (for 6 hr)
Comments: PACU only

- ☐ **+15 Minutes** nalbuphine
5 mg, Injection, IV Push, q5min, PRN Other, specify in Comment, Routine, (for 2 dose)
Comments: PRN over sedation. PACU only.

First-line agents for nausea and vomiting.(NOTE)*

- ☐ **+15 Minutes** ondansetron
4 mg, Injection, IV Push, once, PRN Nausea, Routine, (for 6 hr)
Comments: PACU only. Use before haloperidol.

- ☐ **+15 Minutes** prochlorperazine
5 mg, Injection, IV Push, once, PRN Nausea/Vomiting, Routine, (for 6 hr)
Comments: PACU only. Use before haloperidol.

- ☐ **+15 Minutes** promethazine 25 mg/mL topical gel
25 mg, Gel, TOP, once, PRN Nausea/Vomiting, Routine, (for 6 hr)
Comments: PACU only. Use before haloperidol

For refractory nausea and vomiting.(NOTE)*

- ☐ **+15 Minutes** haloperidol
0.5 mg, Injection, IV, once, PRN Nausea/Vomiting
Comments: PACU only. For patients with refractory nausea and vomiting

- ☐ **+15 Minutes** diphenhydramine
12.5 mg, Injection, IV Push, once, PRN Itching, Routine, (for 6 hr)
Comments: PACU only

- ☐ **+15 Minutes** naloxone
0.4 mg, Injection, IV Push, q2min, PRN Oversedation, Routine, (for 2 dose)
Comments: PACU only. Administer if respiratory rate is less than 8 per minute, or patient is obtunded or unarousable and call anesthesiologist immediately. Repeat if patient does not respond.

Laboratory

- ☐ CBC
Routine, T;N, once, Type: Blood

- ☐ Hematocrit
Routine, T;N, once, Type: Blood

- ☐ Basic Metabolic Panel
Routine, T;N, once, Type: Blood

Before blood products can be transfused, order Type and Crossmatch below.(NOTE)*

- ☐ Type and Crossmatch PRBC
☐ STAT, T;N, 1 units, Type: Blood (DEF)*
☐ STAT, T;N, 2 units, Type: Blood

Place Transfuse (PRBC-Actively Bleeding or Not Actively Bleeding) order below.(NOTE)*

PRBC's: The minimal effective dose of all components should be used: SINGLE UNIT transfusions.(NOTE)*

- ☐ Transfuse PRBC's - Actively Bleeding





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STAT, Unit(s): 2 units

- ☐ Transfuse PRBC's - Not Actively Bleeding

Routine, T;N

Place H&H order below if patient is not actively bleeding and PRBC transfusion order was placed.(NOTE)*

- ☐ Hematocrit & Hemoglobin

Routine, T+1;0400, once, Type: Blood

Diagnostic Tests

- ☐ Electrocardiogram

Start at: T;N, Priority: Stat, Transport: Portable

Comments: STAT in PACU

- ☐ Chest 1VW Frontal

T;N, Reason for Exam: Respiratory Distress, Stat, Portable

Comments: Portable in PACU

- ☐ Chest 1VW Frontal

T;N, Reason for Exam: Line Placement, Stat, Portable

Comments: Portable in PACU

- ☐ Chest 1VW Frontal

T;N, Reason for Exam: Intubation, Stat, Portable

Comments: Portable in PACU

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

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

