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)
Physician Orders ADULT: ANES PACU Post Op Plan

*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
Physician Orders ADULT: ANES PACU Post Op Plan

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
Physician Orders ADULT: ANES PACU Post Op Plan

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
Physician Orders ADULT: ANES PACU Post Op Plan

- **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