Attach patient label here

Physician Orders ADULT: Neuro Pituitary Tumor Post Op Plan

Initiate Orders Phase
Care Sets/Protocols/PowerPlans

✓ Initiate Powerplan Phase
   Phase: Neuro Pituitary Tumor Post Op Phase, When to Initiate: ______________________________

Neuro Pituitary Tumor Post Op Phase
Vital Signs

✓ Vital Signs
   Monitor and Record Temp, q4h(std)
✓ Vital Signs w/Neuro Checks
   Monitor and Record Resp Rate Monitor and Record Blood Pressure Monitor and Record Pulse,
   q1h(std) (DEF)*
   Monitor and Record Resp Rate Monitor and Record Blood Pressure Monitor and Record Pulse,
   q2h(std)

Activity
☐ Bedrest
☐ Out Of Bed
   Up Ad Lib
☐ Out Of Bed
   In chair for meals
☐ Ambulate
   Up To Ambulate in Hall, Daily

Food/Nutrition
☐ NPO
   Instructions: NPO except for medications
☐ Clear Liquid Diet
☐ Full Liquid Diet
☐ Regular Adult Diet
☐ Mechanical Soft Diet
☐ Pureed Diet
☐ Consistent Carbohydrate Diet
   Caloric Level: 1800 Calorie, Insulin: [ ] No Insulin [ ] Short Acting
   [ ] Intermediate [ ] Long Acting [ ] Short and Intermediate [ ] Short and Long;
   Renal Patient:[ ] No [ ] Yes, on dialysis [ ] Yes, not on dialysis

☐ American Heart Association Diet
☐ Sodium Control Diet
   Sodium Restricted

Patient Care
✓ VTE Intracranial/Intraocular SURGICAL Prophylaxis Plan(SUB)*
☐ Code Status
☐ Weight
   QODay, Weigh patient every other day
✓ Elevate Head Of Bed
   30 degrees at all times
✓ Seizure Precautions
   Routine
☐ O2 Sat Monitoring NSG
   Routine (DEF)*
   Routine, q4h(std)
   Routine, q2h(std)
   Routine, q1h(std)
Increased ICP Precautions
- Routine

Intake and Output
- Routine, q1h(std)

Lumbar Drain Care
- zero at ear level (DEF)*
- 10cm above ear level
- zero at shoulder level
- 10cm above shoulder level

Restrict Fluids
- Restrict Amount to: __________

Advance Diet As Tolerated

INT Insert/Site Care

Indwelling Urinary Catheter Care
- q-shift, and PRN

Continue Foley Per Protocol
- Reason: Strict UOP (q30 min or q1 hr) in ICU

Nursing Communication
- If UOP greater than 200mL/hr for 2 consecutive hours, place order for serum sodium level, serum osmolarity level, and urine specific gravity level.

Instruct/Educate
- Instruct: Patient and Family, Method: Verbal, Topic: No sneezing, no nose blowing, no drinking from straws

Central Line

Respiratory Care
- Nasal Cannula
  - 2 L/min, Special Instructions: titrate to keep O2 saturation greater than or equal to 95% (DEF)*
  - 2 L/min, Special Instructions: titrate to keep O2 saturation greater than or equal to 92%

- Aerosol Facemask
  - 40%, Special Instructions: titrate to keep O2 saturation greater than or equal to 95% (DEF)*
  - 40%, Special Instructions: titrate to keep O2 saturation greater than or equal to 92%

Continuous Infusion
- +1 Hours Sodium Chloride 0.9%
  - 1,000 mL, IV, Routine, mL/hr

- +1 Hours lactated ringers
  - 1,000 mL, IV, Routine, mL/hr

Medications
- Neuro Antihypertensive Acute PRN Meds Plan(SUB)*
- Insulin SENSITIVE Sliding Scale Plan(SUB)*
- Insulin STANDARD Sliding Scale Plan(SUB)*
- Insulin RESISTANT Sliding Scale Plan(SUB)*
- +1 Hours pantoprazole
  - 40 mg, DR Tablet, PO, QDay, Routine
  - Comments: DO NOT CHEW, CUT, OR CRUSH

- +1 Hours pantoprazole
  - 40 mg, Injection, IV Push, QDay, Routine

- +1 Hours pantoprazole
  - 40 mg, Granule, NG, QDay, Routine
  - Comments: Must mix in apple juice or apple sauce. See reference text.

- +1 Hours ondansetron
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4 mg, Injection, IV Push, q6h, PRN Nausea/Vomiting, Routine

+1 Hours acetaminophen
   650 mg, Tab, PO, q6h, PRN Pain, Mild or Fever, Routine
   Comments: PRN headache or fever greater than 38 degrees C

+1 Hours acetaminophen
   650 mg, Supp, PR, q6h, PRN Pain, Mild or Fever, Routine
   Comments: if unable to tolerate PO, PRN headache or fever greater than 38 degrees C

Choose ONE pain medication below for moderate pain:(NOTE)*

+1 Hours tramADol
   50 mg, Tab, PO, q6h, PRN Pain, Moderate (4-7)
   Choose ONE pain medication below for severe pain:(NOTE)*

+1 Hours acetaminophen-oxyCODONE 325 mg-5 mg oral tablet
   1 tab, Tab, PO, q6h, PRN Pain, Severe (8-10)
   Comments: if unable to tolerate PO, PRN headache or fever greater than 38 degrees C

+1 Hours morphine
   2 mg, Injection, IV Push, q4h, PRN Pain, Severe (8-10), Routine
   dexamethasone
   10 mg, Injection, IV Push, once, STAT

+1 Hours dexamethasone
   4 mg, Injection, IV, q6h, Routine

+1 Hours desmopressin
   4 mcg, Subcutaneous, prn, PRN Other, specify in Comment
   Comments: for UOP greater than 200mL/hr for two consecutive hours OR for sodium level greater than 145mmol, Routine

Laboratory

CBC
   Routine, T+1;0200, q24h, Type: Blood

BMP
   Routine, T+1;0200, q24h, Type: Blood

Phosphorus Level
   Routine, T+1;0200, q24h, Type: Blood

Magnesium Level
   Routine, T+1;0200, q24h, Type: Blood

Diagnostic Tests

Chest 1 View
   T+1;0800, Reason for Exam: ET Tube Placement, Routine, Portable

CT Brain/Head WO Cont
   T+1;0800, Reason for Exam: Other, Enter in Comments, Routine, Stretcher
   Comments: f/u craniotomy for tumor

Consults/Notifications/Referrals

☑ Notify Physician-Once
   Notify For: Of room number on arrival to unit.

☑ Notify Physician For Vital Signs Of
   Celsius Temp > 38, Oxygen Sat < 92% after O2 therapy

☑ Notify Resident-Continuing
   Notify: Neurosurgery Resident, Notify For: UOP greater than 200mL/hr for 2 consecutive hours or any changes in neuro status or questions

Physician Group Consult
   Group: UTMG Endocrinology, Reason for Consult: Pituitary Tumor

Physician Consult
   Reason for Consult: Pituitary Tumor

Physician Group Consult
Physician Orders ADULT: Neuro Pituitary Tumor Post Op Plan

Group: UT Neuro ICU, Reason for Consult: for intensive care management and/or ventilator management

- [ ] Occupational Therapy Initial Eval and Tx
- [ ] Physical Therapy Initial Eval and Tx
- [ ] Speech Therapy Initial Eval and Tx
- [x] Case Management Consult
  
  **Reason: Discharge Planning**

- [x] Medical Social Work Consult
  
  **Reason: Assistance at Discharge**

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**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