**Physician Orders**

**LEB Cardiology EPS Post Procedure Plan**

- **Height:** ___________ cm  
  **Weight:** ___________ kg

**Allergies:**  
- [ ] No known allergies

**Admission/Transfer/Discharge**

- [ ] Return Patient to Room  
  T,N
- [ ] Transfer Patient  
  T,N
- [ ] **Bed Type:**  
  - [ ] Med/Surg  
  - [ ] Critical Care  
  - [ ] Stepdown  
  - [ ] Telemetry: Specific Unit Location:
- [ ] Notify Physician Once  
  T,N, of room number on arrival to unit

**Primary Diagnosis:**

**Secondary Diagnosis:**

**Vital Signs**

- [ ] Vital Signs  
  T,N, Monitor and Record T,P,R,BP, and affected extremity pulses q15min x 4 occurrences, then q30min x 4 occurrences, then q1h x 3h, then routine per unit.

**Activity**

- [ ] Bedrest  
  T,N, Strict, supine with straight legs  X 5 hours, then may get up with assistance.

**Food/Nutrition**

- [ ] NPO  
  Start at: T,N
- [ ] Clear Liquid Diet  
  Start at: T,N

**Patient Care**

- [ ] Advance Diet As Tolerated  
  T,N, Start clear liquids when awake, and advance to regular diet as tolerated.
- [ ] Elevate Head Of Bed  
  T,N, 30 degrees 2 hours after completion of procedure.
- [ ] Strict I/O  
  T,N, Routine, q2h(std)
- [ ] Cardiac Cath Site Check  
  T,N, Check cath site and distal extremity pulses, color and perfusion, q15min X 4 occurrences, then q30min X 4 occurrences, then q1h X3h, then routine per unit.

- [ ] Dressing Care  
  T,N, Action: Do Not Change, unless soiled with urine or feces.
- [ ] Remove Dressing  
  T,N, Remove in AM
- [ ] Remove Dressing  
  T,N, Immediately prior to discharge.
- [ ] Remove Dressing  
  T,N, Remove in 12 hours.
- [ ] Observe For  
  T,N, Observe for signs/symptoms of bleeding/hematoma from puncture site.
- [ ] O2 Sat Spot Check-NSG  
  T,N, with vital signs
- [ ] O2 Sat Monitoring NSG  
  T,N
- [ ] Telemetry  
  T,N, Routine
- [ ] Cardiopulmonary Monitor  
  T,N, Routine, Monitor Type: CP Monitor
- [ ] IV Discontinue When Tolerating PO  
  T,N, Heplock IV when patient tolerating PO liquids.

**Respiratory Care**

- [ ] Oxygen Delivery  
  T,N, _____ L/min, Titrate to keep O2 sat equal to or greater than 92%. Wean to room air.

**Continuous Infusions**

- [ ] Lactated Ringers  
  1,000mL,IV,Routine,T:N, at _____ mL/hr
- [ ] Sodium Chloride 0.9%  
  1,000mL,IV,Routine,T:N, at _____ mL/hr
- [ ] D5 1/2NS  
  1,000mL,IV,Routine,T:N, at _____ mL/hr
- [ ] D5 1/4NS  
  1,000mL,IV,Routine,T:N, at _____ mL/hr
- [ ] D5 1/2 NS KCl 20 mEq/L  
  1,000mL,IV,Routine,T:N, at _____ mL/hr
- [ ] D5 1/4 NS KCl 20 mEq/L  
  1,000mL,IV,Routine,T:N, at _____ mL/hr
<table>
<thead>
<tr>
<th>Medications</th>
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<tbody>
<tr>
<td><strong>heparin</strong> 10 unit/mL flush 5 mL, (10 units/mL), Ped Injectable, IVPush, PRN, PRN Cath Clearance, routine, T; N, peripheral or central line per nursing policy</td>
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<tr>
<td><strong>ceFAZolin</strong> mg(25 mg/kg), injection, IVPiggyback, q8h, Routine, (2 dose) T; N Max dose = 1 gram</td>
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<tr>
<td><strong>vancomycin</strong> mg(10 mg/kg), Ped Injectable, IVPiggyback, q6h, Routine, (3 dose) T; N, Max dose = 1 gram</td>
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<tr>
<td><strong>acetaminophen</strong> 325 mg, tab, PO, q4h, PRN Pain or Fever, T; N, Max Dose = 90 mg/kg/day up to 4 g/day</td>
</tr>
<tr>
<td><strong>acetaminophen</strong> 80 mg, chew tab, PO, q4h, PRN Pain or Fever, T; N, Max Dose = 90 mg/kg/day up to 4 g/day</td>
</tr>
<tr>
<td><strong>acetaminophen</strong> mg(10 mg/kg), Liq, PO, q4h, PRN Pain or Fever, T; N, Max Dose = 90 mg/kg/day up to 4 g/day</td>
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<tr>
<td><strong>acetaminophen</strong> mg(10 mg/kg), Supp, PR, q4h, PRN Pain or Fever, T; N, Max Dose = 90 mg/kg/day up to 4 g/day</td>
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<tr>
<td><strong>aspirin</strong> 81 mg, Chew tab, PO, QDay, Routine, T; N</td>
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<tr>
<td><strong>aspirin</strong> 325 mg, Tab, PO, QDay, Routine, T; N</td>
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<tr>
<td><strong>ondansetron</strong> mg(0.1 mg/kg), Oral Soln, PO, q8h, PRN nausea/vomiting, routine, T; N, Max dose = 4 mg</td>
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<tr>
<td><strong>ondansetron</strong> 4 mg, Orally Disintegrating Tablet, PO, q8h, PRN nausea/vomiting, routine, T; N</td>
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<tr>
<td><strong>ondansetron</strong> mg(0.1 mg/kg), injection, IV, q8h, PRN nausea/vomiting, routine, T; N, Max dose = 4 mg</td>
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<tr>
<th>Diagnostic Tests</th>
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<tr>
<td><strong>EKG</strong> T; N, Stat, Reason For Exam: Post cardiac cath, Transport: Bedside</td>
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<td><strong>EKG</strong> T+1; 0700, Routine, Reason For Exam: Post cardiac cath, Transport: Bedside</td>
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<tr>
<td><strong>Chest 1 VW</strong> T; N, Stat, Reason For Exam: Post cardiac cath, Transport: Portable</td>
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<tr>
<td><strong>Echocardiogram Pediatric (0-18yrs)</strong> T; N, Stat, Reason For Exam: Post cardiac cath, Transport: Portable</td>
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<th>Consults/Notifications</th>
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<tr>
<td><strong>Notify Physician For Vital Signs Of</strong> T; N, BP Systolic &gt; 140, BP Diastolic &gt; 80, BP Systolic &lt; 80, BP Diastolic &lt; 40, Celsius Temp &gt; 38.0, Heart Rate &gt; 130, Heart Rate &lt; 60, Who:________________________</td>
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<tr>
<th>Date</th>
<th>Time</th>
<th>Physician’s Signature</th>
<th>MD Number</th>
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