Physician Orders PEDIATRIC: LEB Anesthesia PACU Plan

Initiate Orders Phase

Care Sets/Protocols/PowerPlans
- Initiate Powerplan Phase
  
  Phase: LEB Anesthesia PACU Phase, When to Initiate: When patient arrives in PACU

LEB Anesthesia PACU Phase

Admission/Transfer/Discharge
- Return Patient to Room
  
  T;N, Discharge from PACU when criteria met and discontinue PACU orders
  
  Comments: References and PACU discharge criteria are located on MOLLI

- Transfer Pt within current facility
  
  T;N
  
  Comments: References and PACU discharge criteria are located on MOLLI

- Notify Physician-Once
  
  Notify For: of room number on arrival to unit

Vital Signs
- Vital Signs
  
  Monitor and Record T,P,R,BP, per PACU protocol

Activity
- Bedrest

Food/Nutrition
- NPO

Patient Care
- Advance Diet As Tolerated
  
  advance to clear liquids as tolerated

- O2 Sat Monitoring NSG
  
  continuous

- Cardiopulmonary Monitor
  
  T;N Routine, Monitor Type: CP Monitor

- DC CP Monitor
  
  When ALL Criteria met: No NG-Tube, No PCA, No Chest Tube, No Sepsis Alert notified, PEWS of 0 and 24 hour post op.

- IV Discontinue When Bag Complete

- IV Discontinue When Tolerating PO
  
  T;N

- Nursing Communication
  
  Continue IV Fluid

- Nursing Communication
  
  Assess patient's condition using Aldrete system

Nursing Communication
- Nursing Communication
  
  Hold physical therapy until bedrest complete.

Respiratory Care
- Oxygen Delivery
  
  Routine, 3 L/min, Special Instructions: titrate to keep O2 sat =/> 92%, wean to room air

- ISTAT POC (RT Collect)
  
  T;N Stat once, Test Select Arterial Blood Gas

Continuous Infusion
- Lactated Ringers Injection
  
  1,000 mL, IV, Routine, mL/hr, For PACU Only

- Sodium Chloride 0.9%
  
  1,000 mL, IV, Routine, mL/hr, For PACU Only

Medications
- +1 Hours morphine
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0.04 mg/kg, Ped Injectable, IV Push, q10min, PRN Pain, Breakthrough, Routine, (for 3 dose), For pain in PACU only, Max initial dose = 2 mg,

+1 Hours HYDROMorphone
0.005 mg/kg, Injection, IV Push, q10min, PRN Pain, Breakthrough, Routine, (for 3 dose), For Pain in PACU only, Max initial dose = 0.25mg

+1 Hours meperidine
0.4 mg/kg, Injection, IV, q10min, PRN Shivering, Routine, (for 3 dose), For PACU use
Comments: Max total dose = 50 mg,

+1 Hours ketorolac
0.5 mg/kg, Ped Injectable, IV Piggyback, N/A, Routine, Max dose = 30mg, For PACU Use

+1 Hours midazolam
0.1 mg/kg, Ped Injectable, IV, N/A, Routine, (for 1 dose), Max dose = 2mg

+1 Hours naloxone
0.02 mg/kg, Ped Injectable, IV Push, N/A, Routine, Max dose = 2 mg, Opioid Reversal

NOTE: Please order either acetaminophen or ibuprofen below for mild pain (NOTE)*

+1 Hours acetaminophen
10 mg/kg, Liq, PO, q4h, PRN Pain, Mild (1-3), Routine, Max Dose = 75 mg/kg/day up to 4g/day (DEF)*
80 mg, Chew tab, PO, q4h, PRN Pain, Mild (1-3), Routine, Max Dose = 75 mg/kg/day up to 4g/day
325 mg, Tab, PO, q4h, PRN Pain, Mild (1-3), Routine, Max Dose = 75 mg/kg/day up to 4g/day

+1 Hours acetaminophen
20 mg/kg, Supp, PR, once, Routine, Max Dose = 75 mg/kg/day up to 4g/day

+1 Hours ibuprofen
10 mg/kg, Oral Susp, PO, q6h, PRN Pain, Mild (1-3), Routine, Max dose = 800 mg (DEF)*
200 mg, Tab, PO, q6h, PRN Pain, Mild (1-3), Routine
400 mg, Tab, PO, q6h, PRN Pain, Mild (1-3), Routine
600 mg, Tab, PO, q6h, PRN Pain, Mild (1-3), Routine
800 mg, Tab, PO, q8h, PRN Pain, Mild (1-3), Routine

+1 Hours dexamethasone
0.6 mg/kg, Ped Injectable, IV, once, Routine
Comments: In PACU only

+1 Hours diphenhydRAMINE
0.5 mg/kg, Ped Injectable, IV Push, once, Routine, Max dose = 25 mg
Comments: In PACU only

+1 Hours albuterol
0.3 mg/kg, Inh Soln, NEB, q4h, PRN Wheezing, Routine, (3 mL = 2.5mg)

+1 Hours racepinephrine 2.25% inhalation solution
0.25 mL, Inh Soln, INH, q4h, PRN Stridor, Routine

+1 Hours ondansetron
0.1 mg/kg, Ped Injectable, IV Push, q8h, PRN Nausea/Vomiting, Routine, Max dose = 8 mg

+1 Hours promethazine
0.25 mg/kg, Ped Injectable, IM, q6h, PRN Other, specify in Comment, Routine
Comments: For persistent n/v nor responding to ondansetron

Laboratory

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

Hematocrit & Hemoglobin
Routine, T;N, once, Type: Blood

BMP
Routine, T;N, once, Type: Blood

Diagnostic Tests
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- Chest 1 View
  - T;N, Routine, Portable

Consults/Notifications/Referrals

- Notify Resident-Continuing
  - Notify For: ________________

- Notify Resident-Once
  - Notify For: ________________

- Consult MD Group
  - Reason for Consult: ________________ Group: _______________________

- Consult MD
  - Consult Who: ________________ Reason for Consult: ________________

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Physician’s Signature</th>
<th>MD Number</th>
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*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