



Physician Orders ADULT: Ophthalmology Malignant Melanoma Pre-Op Plan

Initiate Orders Phase

Care Sets/Protocols/PowerPlans

- Initiate Powerplan Phase  
Phase: *Ophthalmology Malignant Melanoma Pre-Op Phase, When to Initiate:* \_\_\_\_\_

Ophthalmology Malignant Melanoma Pre Op

Admission/Transfer/Discharge

- Patient Status Initial Inpatient  
T;N Admitting Physician: \_\_\_\_\_  
Reason for Visit: \_\_\_\_\_  
Bed Type: \_\_\_\_\_ Specific Unit: \_\_\_\_\_  
Care Team: \_\_\_\_\_ Anticipated LOS: 2 midnights or more
- Patient Status Initial Outpatient  
T;N Attending Physician: \_\_\_\_\_  
Reason for Visit: \_\_\_\_\_  
Bed Type: \_\_\_\_\_ Specific Unit: \_\_\_\_\_  
Outpatient Status/Service: *Outpatient Status/Service OP-Ambulatory Surgery*
- Notify Physician-Once  
Notify For: *of room number on arrival to unit*

Vital Signs

- Vital Signs  
*Monitor and Record T,P,R,BP, on admission*

Food/Nutrition

- NPO  
*Start at: T;N*

Patient Care

- Consent Signed For  
*Procedure: Placement of I-125 radiation implant in right eye*
- Consent Signed For  
*Procedure: Placement of I-125 radiation implant in left eye*
- Consent Signed For  
*Procedure: Removal of I-125 radiation implant in right eye*
- Consent Signed For  
*Procedure: Removal of I-125 radiation implant in left eye*
- Consent Signed For  
T;N

Medications

- proparacaine 0.5% ophthalmic solution  
 1 drop, *Ophthalmic Soln, Right Eye, OnCall, Routine (DEF)\**  
*Comments: OnCall to OR*





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- 1 drop, Ophthalmic Soln, Left Eye, OnCall, Routine  
Comments: OnCall to OR
- phenylephrine 2.5% ophthalmic solution
  - 1 drop, Ophthalmic Soln, Right Eye, q5min, Routine, (for 3 dose ) (DEF)\*  
Comments: OnCall to OR
  - 1 drop, Ophthalmic Soln, Left Eye, q5min, Routine, (for 3 dose )  
Comments: OnCall to OR
- hydroxyamphetamine-tropicamide 1%-0.25% ophthalmic solution
  - 1 drop, Ophthalmic Soln, Right Eye, q5min, Routine, (for 3 dose ) (DEF)\*  
Comments: OnCall to OR
  - 1 drop, Ophthalmic Soln, Left Eye, q5min, Routine, (for 3 dose )  
Comments: OnCall to OR
- acetaminophen  
650 mg, Tab, PO, OnCall, Routine  
Comments: OnCall to OR

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Date	Time	Physician's Signature	MD Number
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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

