



Physician Orders PEDIATRIC: LEB NEURO SURG Surgical Spine Post Op Plan

Initiate Orders Phase

Care Sets/Protocols/PowerPlans

- Initiate Powerplan Phase
Phase: LEB Neuro Surg Spine Postop Phase, When to Initiate:_____

LEB Neuro Surgical Spine Post Op Phase

Admission/Transfer/Discharge

- Transfer Pt within current facility
- Return Patient to Room
T;N

Vital Signs

- Vital Signs w/Neuro Checks
 - routine post op, then q2h (DEF)**
Comments: and vascular checks
 - routine post op, then q4h*
Comments: and vascular checks

Activity

- Bedrest
- Out Of Bed
tid
- Up
With Assistance
- Activity As Tolerated
Up Ad Lib

Food/Nutrition

- NPO
Start at: T
- Breastfeed
- LEB Formula Orders Plan(SUB)*
- Regular Pediatric Diet
- Clear Liquid Diet
Start at: T;N

Patient Care

- Advance Diet As Tolerated
start clear liquids and advance to regular diet as tolerated.
- Nothing Per Rectum
T;N
- Isolation Precautions
- Elevate Head Of Bed





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30 degrees

- Logroll Turn
q2h(std)
- SCD Apply
Apply To Lower Extremities, Post Op
- Intake and Output
Routine, q2h(std)
- Indwelling Urinary Catheter Care
Routine, to gravity drainage
- Cardiopulmonary Monitor
Routine, Monitor Type: CP Monitor
- Discontinue 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.
- O2 Sat Monitoring NSG
- Incentive Spirometry NSG
q2h-Awake

Respiratory Care

- Oxygen Delivery
Special Instructions: Titrate to keep O2 sat => 92%. Wean to room air.

Continuous Infusion

- D5NS KCl 20 mEq
1,000 mL, IV, Routine, mL/hr
- D5 1/2NS
1,000 mL, IV, Routine, mL/hr
- D5 1/2 NS KCl 20 mEq/L
1,000 mL, IV, Routine, mL/hr

Medications

- +1 Hours** ceFAZolin
25 mg/kg, Ped Injectable, IV Piggyback, q8h, Routine, (for 3 dose), Max dose = 1 gram
Indications for vancomycin surgical prophylaxis include: allergy to cephalosporins and/or treatment for methicillin resistant staph aureus(NOTE)*
- +1 Hours** vancomycin
10 mg/kg, Ped Injectable, IV Piggyback, q6h, Routine, (for 3 dose), Max dose = 1 gram
- +1 Hours** acetaminophen-codeine 120 mg-12 mg/5 mL oral liquid
0.75 mg/kg, Liq, PO, q6h, PRN Pain, Routine, (for 5 day), (5mL = 12mg codeine), Max dose = 24mg
- +1 Hours** acetaminophen-codeine #3
1 tab, Tab, PO, q6h, PRN Pain, Routine, (for 5 day), (1 tab = 30mg codeine)
- +1 Hours** acetaminophen-HYDROcodone 325 mg-7.5 mg/15 mL oral solution





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0.15 mg/kg, Liq, PO, q6h, PRN Pain, Routine, (5 mL = 2.5 mg HYDROcodone), Max dose = 10mg

- +1 Hours** acetaminophen-HYDROcodone 325 mg-5 mg oral tablet
1 tab, Tab, PO, q4h, PRN Pain, Routine, (for 5 day), (1 tab = 5 mg HYDROcodone),Max dose = 10 mg
- +1 Hours** acetaminophen
 - 10 mg/kg, Liq, PO, q4h, PRN Pain or Fever, Routine, Max Dose = 75 mg/kg/day up to 4g/day (DEF)**
 - 80 mg, Chew tab, PO, q4h, PRN Pain or Fever, Routine, Max Dose = 75 mg/kg/day up to 4g/day*
 - 325 mg, Tab, PO, q4h, PRN Pain or Fever, Routine, Max Dose = 75 mg/kg/day up to 4g/day*
- +1 Hours** acetaminophen
10 mg/kg, Supp, PR, q4h, PRN Pain or Fever, Routine, Max Dose = 75 mg/kg/day up to 4g/day
- +1 Hours** ibuprofen
10 mg/kg, Oral Soln, PO, q6h, PRN Pain, Routine, Max dose = 600 mg
- +1 Hours** ibuprofen
200 mg, Tab, PO, q4h, PRN Pain, Routine
- +1 Hours** morphine
0.1 mg/kg, Ped Injectable, IV, q3h, PRN Pain, Severe (8-10), Routine, (for 3 day), Max dose = 6mg
- +1 Hours** morphine
0.1 mg/kg, Ped Injectable, IV, once, Routine, Max dose = 6mg
- +1 Hours** dexamethasone
0.1 mg/kg, Ped Injectable, IV Push, q6h, Routine, Max dose = 4mg
- +1 Hours** ondansetron
*0.1 mg/kg, Oral Susp, PO, q8h, PRN Nausea/Vomiting, Routine, Max dose = 4mg (DEF)**
4 mg, Orally Disintegrating Tab, PO, q8h, PRN Nausea/Vomiting, Routine
- +1 Hours** ondansetron
0.1 mg/kg, Ped Injectable, IV Push, q8h, PRN Nausea/Vomiting, Routine, Max dose = 8 mg
Comments: To be given at 12:30pm
- +1 Hours** ranitidine
2 mg/kg, Liq, PO, bid, Routine, Max dose = 300mg/day
- +1 Hours** famotidine
0.25 mg/kg, Injection, IV, q12h, Routine, Max Daily Dose = 40 mg/day
- +1 Hours** Unicomplex M
1 tab, Tab, PO, QDay, Routine
- Leb Neurosurgery Dexamethasone Taper Orders: Posterior Fossa Tumors(SUB)*
- Leb Neurosurgery Dexamethasone Taper Orders: Temporals and Parietals(SUB)*
- LEB Antiepileptic Medication Orders Plan(SUB)*
- +1 Hours** Dulcolax Laxative
10 mg, Supp, PR, QDay, PRN Constipation





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- +1 Hours** Colace
2.5 mg/kg, Liq, PO, bid
- +1 Hours** Colace
100 mg, Cap, PO, bid
- +1 Hours** Valium
0.1 mg/kg, Injection, IV Push, q6h, PRN Muscle Spasm

Laboratory

- CBC
STAT, T;N, once, Type: Blood
- BMP
STAT, T;N, once, Type: Blood
- CBC
Routine, T+1;0400, Type: Blood
- BMP
Routine, T+1;0400, Type: Blood

Diagnostic Tests

- Spine Thoracic 2VW
T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable
Comments: Post op
- Spine Lumbar 2/3VW
T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable (DEF)*
Comments: Post op
T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable
Comments: Post op
- Spine Cerv 2/3 Views
T;N, Reason for Exam: Other, Enter in Comments, Stat, Portable
Comments: Post Op

Consults/Notifications/Referrals

- Notify Resident-Continuing
Notify For: Notify Neurosurgery Resident of temperature >38.5 degrees, neuro changes or CSF leak
- Consult MD
Pediatrics
- Consult Nutritional Support Team
Routine, Reason: Parenteral Nutrition Support
- Consult Clinical Dietitian
Type of Consult: _____
- Consult Child Life
T;N





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- Consult School Teacher
Homebound School
- Consult Medical Social Work
 - Routine (DEF)**
 - Routine, Reason: Other, specify, Contact Snell's for Halo Brace*
 - Routine, Reason: Other, specify, Contact Snell's for TLSO Brace*
 - Routine, Reason: Other, specify, Contact Snell's for Cervical Collar*
- Physical Therapy Ped Eval & Tx
- Occupational Therapy Ped Eval & Tx
- Speech Therapy Ped Eval & Tx
Reason for Exam: _____

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

