**Physician Orders - ADULT**

**Order Set: VTE Prophylaxis (SURGICAL) Orders**

[K] = will be ordered  
T = Today; N = Now (date and time ordered)  

**Height:** ______________ cm  
**Weight:** ___________ kg

<table>
<thead>
<tr>
<th>Allergies:</th>
<th>[ ] No known allergies</th>
</tr>
</thead>
</table>

**Medication allergy(s):** [ ]

<table>
<thead>
<tr>
<th>Latex allergy</th>
<th>[ ] Other:</th>
</tr>
</thead>
</table>

### Intracranial or Intraocular Procedures

**NOTE:** If bleeding risk exists, and no contraindication to SCD, place order below:

- Sequential Compression Device
  - [ ] Apply (SCD Apply)  
  - T;N, Apply To Lower Extremities

**NOTE:** If no bleeding risks exist place order below:

- [ ] heparin  
  - 5,000 units, injection, subcutaneous, q12h, Routine

### Total Joint Repl (Hip/Knee or Hip Fracture Surgery)

**NOTE:** If bleeding risk exists, and no contraindication to SCD, place order below:

- Sequential Compression Device
  - [ ] Apply (SCD Apply)  
  - T;N, Apply To Lower Extremities

**NOTE:** If no bleeding risk exists, place either Enoxaparin and both CBC wo Diff orders below OR place the Fondaparinux and both CBC wo Diff orders below:

- [ ] enoxaparin  
  - T;N + 720, 30 mg, Injection, Subcutaneous, BID, Routine, Comment: first dose should be timed to be given at least 12 hours post op, If CrCl less than 30mL/min, pharmacy to adjust dose to 30mg SQ QDay. Pharmacist may adjust administration times after first dose. Start on morning of Post-Op Day 1

OR

- [ ] fondaparinux  
  - T;N + 720, 2.5 mg, Injection, Subcutaneous, QDay, Routine, Start on morning of post-op Day 1, Pharmacist may adjust administration times after first dose.

OR

- [ ] Pharmacy Consult-Warfarin Dosing T;N, Routine

### AND BOTH CBCs

- [ ] CBC w/o Diff  
  - Routine, T;N, once, Type: Blood

- [ ] CBC w/o Diff  
  - Time Study, T+2:0400, Every Other Day, Type: Blood

**NOTE:** Apply immediately post op if no contraindication:

- Sequential Compression Device
  - [ ] Apply (SCD Apply)  
  - T;N, Apply To Lower Extremities, postop

OR, ONLY IF SCD IS CONTRAINDICATED

- [ ] A-V Impulse Device Apply  
  - T;N, Apply To Lower Extremities, postop

- [ ] Contraindication-VTE Prophylaxis  
  - T;N, Reason: patient has bleeding risk for anticoagulants

- [ ] Ankle Pumps  
  - T;N, Routine, q1h-Awake, Instruct patient on and then have them repeat 10 times per hour while awake.

### General/Thoracic/GYN/OB/URO/Elective Spinal Surgical Procedures

**NOTE:** If bleeding risk exists, and no contraindication to SCD, place order below:

- Sequential Compression Device
  - [ ] T;N, Apply To Lower Extremities

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22226-CC VTE PROPHYLAXIS  
SURGICAL-QM-1008 ver7 100809
### General/Thoracic/GYN/OB/URO/Elective Spinal Surgical Procedures continued

**NOTE:** If no bleeding risk exists, place either Enoxaparin and both CBC w/o Diff orders below OR place the heparin and both CBC w/o Diff orders below:

<table>
<thead>
<tr>
<th>Drug</th>
<th>Frequency</th>
<th>Route</th>
<th>Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enoxaparin</td>
<td>T;N + 720, 40 mg, Injection, Subcutaneous, QDay, Routine, Start on morning of post-op day 1. If CrCl less than 30mL/min, pharmacy to adjust dose to 30mg SQ QDay. Pharmacist may adjust administration times after first dose. Start on morning of Post-Op Day 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heparin</td>
<td>5,000 units, Injection, Subcutaneous, q8h, Routine, Start on morning of post-op day 1. Pharmacist may adjust administration times after first dose. Start on morning of Post-Op Day 1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**AND BOTH CBCs**
- **CBC w/o Diff** | Routine, T;N, once, Type: Blood
- **CBC w/o Diff** | Time Study, T+2;0400, Every Other Day, Type: Blood

### CABG and Valve Surgical Procedures

**NOTE:**
- If patient is immediate postop and no SCD contraindications exist, order SCD for both extremities.
- If SCD is contraindicated, order graduated compression stockings (GCS) on both extremities and SCD only for otherwise intact extremity.

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sequential Compression Device Apply</td>
<td>T;N</td>
</tr>
<tr>
<td>NOTE: only if SCD is contraindicated, place GCS order below:</td>
<td></td>
</tr>
<tr>
<td>TED Hose Apply (GCS Apply)</td>
<td>T;N, Routine, apply to bilateral lower extremities</td>
</tr>
<tr>
<td>Nursing Communication</td>
<td>T;N, After chest tubes are discontinued and if no additional bleeding risk is present, place order for &quot;Heparin 5000 units, inj, subcutaneous, q12h, routine, T;N&quot;</td>
</tr>
<tr>
<td>CBC w/o Diff</td>
<td>Routine, T;N, once, Type: Blood</td>
</tr>
<tr>
<td>CBC w/o Diff</td>
<td>Time Study, T+2;0400, Every Other Day, Type: Blood</td>
</tr>
</tbody>
</table>

**Do Not Administer VTE Prophylaxis**

**NOTE:** Consider ambulation as early as possible.

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contraindication-VTE Prophylaxis</td>
<td>T;N, Reason: patient has bleeding risk for anticoagulants, and SCDs are contraindicated.</td>
</tr>
<tr>
<td>Ambulate</td>
<td>T;N</td>
</tr>
</tbody>
</table>

### BLEEDING RISK FACTORS

**NOTE:** documented bleeding disorder

### SCD CONTRAINDICATIONS

**NOTE:** known or suspected deep vein thrombosis or PE