**Height_____________________
Weight_____________________
Allergies____________________**

If appropriate for patient condition, please consider the following order sets:

Patient Controlled Analgesia (PCA) Physician Order #564

### General - Prior to Discharge

#### Vital Signs

<table>
<thead>
<tr>
<th>[] Vital signs</th>
<th>Routine, Per unit routine, Starting today, Post-op</th>
</tr>
</thead>
<tbody>
<tr>
<td>[] Frequent vital signs</td>
<td>Indication: Q15 minutes x (# of occurrences): Q30 minutes x (# of occurrences): Q1 hour x (# of occurrences): 4 Q2 hours x (# of occurrences): Q4 hours x (# of occurrences): Then: Per unit routine Post-op, Until discontinued, Starting today</td>
</tr>
</tbody>
</table>

| [] Continuous Pulse Oximetry | Routine, Until discontinued, Starting today Keep O2 saturation greater than or equal to: Post-op |
| [] Hemodynamic monitoring | Routine, Until discontinued, Starting today, Per protocol., Post-op |
| [] Nursing communication | Routine, Until discontinued, Starting today, May be transported without RN or monitor if ALL the following are true: Not on temporary pacemaker, No new neuro symptoms, Stable rhythm X 12 hours, O2Sat greater than/equal 92% on 4 liters O2 or less, Systolic blood pressure greater than 90., Post-op |

| [] Other |

#### Cardiac Monitoring

| [] Cardiac monitoring | Routine, Until discontinued, Starting today, PACU (only) |
| [] Other |

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**Otolaryngology (ENT) / Oral Surgery Postoperative Discharge [30401648]**

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**Franciscan Health System**
St. Joseph Medical Center
St. Francis Hospital - St. Clare Hospital
St. Elizabeth Hospital - St. Anthony Hospital
Highline Medical Center
Harrison Medical Center
Franciscan Medical Group
Franciscan HealthPartners
Regional Hospital

**PHYSICIAN ORDERS**

**DATE/TIME ______________ PROVIDER INITIALS _____________________**
Diet Surgical

- **Diet NPO until alert**
  - Diet effective now, Starting today
  - NPO Except:
    - Post-op

- **Diet Liquid**
  - Diet effective now, Starting today
  - Diet:
    - Post-op
  - Additional Modifiers:
    - Viscosity/Liquids:

- **Advance diet as tolerated**
  - Once, Starting today
  - Target Diet:
    - Post-op

- **Other**

Nursing Intervention - prior to discharge

- **Wire cutters with patient at all times**
  - Routine, Until discontinued, Starting today, Post-op

- **Rinse mouth with saline**
  - Routine, Now then every 8 hours, Starting today
  - With the following limitations:
    - Post-op

- **Remove intra-oral packs when bleeding stops**
  - Routine, As needed, Starting today, Post-op

- **Change drip pad**
  - Routine, Until discontinued, Starting today, Post-op

- **Head of bed 45 degrees or less**
  - Routine, Until discontinued, Starting today
  - Elevate HOB:
    - Post-op

- **30% cool mist**
  - Routine, Until discontinued, Starting today, Post-op

- **Intake and Output**
  - Routine, Every shift, Starting today, per unit protocol, Post-op

- **Ice pack to neck or surgical site**
  - Routine, As needed, Starting today
  - Type:
    - Post-op

- **Provide smoking cessation information and document on education record**
  - Routine, Prior to discharge, Starting today, Post-op

- **Other**

Patient Education

- **Patient education (specify)**
  - Routine, Once, Starting today, Post-op

- **Provide patient education materials**
  - Routine, Once, Starting today, Post-op

- **Tobacco cessation education**
  - Routine, Prior to discharge, Starting today, Provide smoking cessation information and document on education record., Post-op

- **Other**

Discharge Instructions - Prior to Discharge

- **Other**

**DATE/TIME** ______________ PROVIDER INITIALS ______________

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**Otolaryngology ENT/Oral Surgery Post-Operative Discharge [30401648]**

**Franciscan Health System**
St. Joseph Medical Center  
St. Francis Hospital-St. Clare Hospital  
St. Elizabeth Hospital-St. Anthony Hospital  
Highline Medical Center  
Harrison Medical Center  
Franciscan Medical Group  
Frazier HealthPartners  
Regional Hospital

**PHYSICIAN ORDERS**
Discharge instructions:
Routine, Prior to discharge, Starting today, Patient may be discharged if all discharge criteria are met. If unstable call provider for additional orders., Post-op

Please call provider with time of discharge
Routine, Prior to discharge, Starting today, Post-op

Discharge instructions
Routine, Once, Starting today

Other

General - AMB Orders - Post Discharge

Discharge Instructions - Post Discharge

[] Follow-up Appointment
Routine, Clinic Performed, Post Discharge

[] Remove dressing
Routine, Clinic Performed, Post Discharge

[] Wound care
Routine, Clinic Performed, Post Discharge

[X] Encourage fluids, Advance diet as tolerated
Routine, Hospital Performed, Post Discharge

[X] No straining, heavy lifting or sports for two weeks postoperatively
Routine, Clinic Performed, Post Discharge

[] Activity as tolerated
Routine, Clinic Performed, Post Discharge

[] Discharge activity
Routine, Clinic Performed, Post Discharge

[] Discharge instructions
Routine, Clinic Performed, Post Discharge

[] Other

IV Fluids - Prior to Discharge

Post-op IV fluids

[] lactated ringers infusion
125 mL/hr, IntraVEnous, Continuous, Post-op, Routine

[] dextrose 5 % in lactated ringers infusion
100 mL/hr, IntraVEnous, Continuous, Post-op, Routine

[] Discontinue IV Fluids when tolerating oral intake
Routine, Until discontinued, Starting today, Post-op

[] Other

Medications - Prior to Discharge

Over the Counter Products

[] Nurse may initiate OTC Pt Care Products
Routine, As needed, Starting today, Nurse may initiate OTC Pt Care Products Physician Order #767., Post-op

[] Other

Harrison Pharmacy Consult - SCIP antibiotics

[] Pharmacy Consult: Antibiotics
Routine, Once, Starting today For 1 Occurrences

[] Other

Post-op Antibiotics

[] ceFAZolin (ANCEF) IV
1 g, IntraVEnous, Every 8 hours, For 1 Doses, PACU & Post-op Give first dose in PACU.
Routine
Post-op IV/IM Analgesia

See patient controlled Analgesia (PCA) Physician Order #564. No additional IV/IM analgesia while on PCA. Discontinue PCA when tolerating PO pain meds.

Note: Number only those medications desired. The nurse will select #1 as the first medication to be given. If ineffective, #2 will be used next, and then #3, #4 etc. If orders are not numbered the nurse will contact the prescriber for clarification.

<table>
<thead>
<tr>
<th>Medication</th>
<th>Route</th>
<th>Frequency</th>
<th>PRN</th>
<th>Pain Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morphine injection</td>
<td>IntraVenous</td>
<td>Every 1 hour</td>
<td>PRN</td>
<td>Pain: 1 - First option for pain relief</td>
</tr>
<tr>
<td>Hydrocodone (Dilaudid) injection 1 mg/mL</td>
<td>IntraVenous</td>
<td>Every 1 hour</td>
<td>PRN, severe pain</td>
<td>Pain: 1 - First option for pain relief</td>
</tr>
<tr>
<td>Hydrocodone (Dilaudid) injection 1 mg/mL</td>
<td>IntraMuscular</td>
<td>Every 3 hours</td>
<td>PRN, severe pain</td>
<td>Pain: 2 - Second option for pain relief</td>
</tr>
<tr>
<td>Morphine injection</td>
<td>IntraVenous</td>
<td>Every 1 hour</td>
<td>PRN</td>
<td>Pain: 1 - First option for pain relief</td>
</tr>
</tbody>
</table>

Post-op Oral Analgesia

Note: Number only those medications desired. The nurse will select #1 as the first medication to be given. If ineffective, #2 will be used next, and then #3, #4 etc. If orders are not numbered the nurse will contact the prescriber for clarification.

When pain is under control and patient tolerating oral intake trial oral pain medications:

<table>
<thead>
<tr>
<th>Medication</th>
<th>Route</th>
<th>Frequency</th>
<th>PRN</th>
<th>Pain Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>OxyCodone-acetaminophen (Roxicet) solution 5-325 mg/5mL</td>
<td>Oral</td>
<td>Every 4 hours</td>
<td>PRN, pain</td>
<td>Pain: 1 - First option for pain relief</td>
</tr>
<tr>
<td>Hydrocodone-acetaminophen (Vicodin) tablet 5-325 mg</td>
<td>Oral</td>
<td>Every 4 hours</td>
<td>PRN, pain</td>
<td>Pain: 1 - First option for pain relief</td>
</tr>
<tr>
<td>Medication</td>
<td>Dosage</td>
<td>Route</td>
<td>Schedule</td>
<td>Notes</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>---------------------------------------------</td>
<td>--------------</td>
<td>---------------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>OxyCODONE-acetaminophen (PERCOCET) tablet 5-325 mg</td>
<td>1-2 tablet, Oral, Every 4 hours PRN, pain, Post-op</td>
<td></td>
<td></td>
<td>Pain Option: (Please select from list:40800000) Routine</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Breakthrough Pain Med**

<table>
<thead>
<tr>
<th>Medication</th>
<th>Dosage</th>
<th>Route</th>
<th>Schedule</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>OxyCODONE (ROXICODONE) immediate release tablet</td>
<td>5-10 mg, Oral, Every 3 hours PRN, breakthrough pain, Post-op</td>
<td></td>
<td></td>
<td>Use if other oral medications are ineffective after 1 hour minimum. Routine</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Post-op Other Meds**

<table>
<thead>
<tr>
<th>Medication</th>
<th>Dosage</th>
<th>Route</th>
<th>Schedule</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dexamethasone (DECADRON) injection 4 mg/mL</td>
<td>4 mg, IntraVENous, Every 6 hours, Post-op, Routine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Labetalol (TRANDATE) injection</td>
<td>IntraVENous, As needed, high blood pressure, systolic BP greater than 160 mmHg or diastolic BP greater than 90 mmHg, Post-op May repeat every 15 minutes times 3 every 4 hours. If pulse less than 50 use captopril. Routine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Captopril (CAPOTEN) tablet</td>
<td>Oral, Every 4 hours PRN, systolic BP greater than 160 mmHg or diastolic BP greater than 90 mmHg, Post-op Use if pulse is less than 50 instead of Labetalol. Routine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diazepam (VALIUM) tablet</td>
<td>5 mg, Oral, Every 12 hours PRN, anxiety, When taking oral fluids, Post-op, Routine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sodium chloride (OCEAN) nasal spray 0.65%</td>
<td>1 spray, Each Nostril, Every 1 hour while awake, Post-op Have patient sniff backwards. Begin in PACU Routine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Medications - AMB Orders - Post Discharge**

**Oral Analgesia - Discharge**

<table>
<thead>
<tr>
<th>Medication</th>
<th>Dosage</th>
<th>Route</th>
<th>Schedule</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>OXYCODONE-ACETAMINOPHEN 5 MG-325 MG/5 ML ORAL SOLN</td>
<td>Print</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HydroCODONE-ACETAMINOPHEN 5 MG-325 MG TABLET</td>
<td>Print</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OXYCODONE-ACETAMINOPHEN 5 MG-325 MG TABLET</td>
<td>Print</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Antiemetic - Discharge**

<table>
<thead>
<tr>
<th>Medication</th>
<th>Dosage</th>
<th>Route</th>
<th>Schedule</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prochlorperazine 25 MG RECTAL SUPPOSITORY</td>
<td>Normal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Other Meds - Discharge**

<table>
<thead>
<tr>
<th>Medication</th>
<th>Dosage</th>
<th>Route</th>
<th>Schedule</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Captopril 6.25 MG TABLET</td>
<td>Normal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
AMB - Post Discharge - Nicotine Replacement Therapy
Nicotine Replacement therapy will be avoided if possible in patient with unstable acute coronary syndrome for 72 hours. After 72 hours if chest pain, arrhythmias, and/or blood pressure have stabilized, Nicotine replacement may be considered at ONE STEP below the calculated replacement dose. NOTE: 1/2 pack = 10 cigarettes

The nicotine products listed below may be used as monotherapy or in combination therapy. Combination therapy should include a nicotine patch plus either nicotine gum or nicotine lozenges.

<table>
<thead>
<tr>
<th>Smoking History</th>
<th>Recommended Starting Dose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step down therapy after initial nicotine Replacement for 6-7 weeks</td>
<td>Nicotine patch, 7mg</td>
</tr>
<tr>
<td>10 Cigarettes per Day or less, past history Of cardiovascular disease, or weight under 45 kg</td>
<td>Nicotine patch, 14 mg</td>
</tr>
<tr>
<td>Heavy smokers (More than 10 cigarettes/day)</td>
<td>Nicotine patch, 21 mg</td>
</tr>
<tr>
<td>Smokeless tobacco users, pipe</td>
<td>Nicotine Gum, 2mg</td>
</tr>
<tr>
<td>Smokers or at patient request</td>
<td></td>
</tr>
</tbody>
</table>

Note to provider: Insulin requirements may change - monitor blood sugars. Topical Steroids and oral antihistamines may be recommended to treat less severe skin irritations.

<table>
<thead>
<tr>
<th>No Smoking while on nicotine replacement therapy</th>
<th>Routine, Clinic Performed, Post Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>NICOTINE 7 MG/24 HR DAILY PATCH</td>
<td>Normal</td>
</tr>
<tr>
<td>NICOTINE 14 MG/24 HR DAILY PATCH</td>
<td>Normal</td>
</tr>
<tr>
<td>NICOTINE 21 MG/24 HR DAILY PATCH</td>
<td>Normal</td>
</tr>
<tr>
<td>NICOTINE (POLACRILEX) 2 MG GUM</td>
<td>Normal</td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>