

Height: _____ Weight: _____ Allergies: _____

Admission Orders:

Patient Name: _____ DOB: _____

Diagnosis: _____

Diagnosis Comment: _____

Consent to Read: _____

Place: In Patient Out-Patient Services

Location SDS GI Lab Cardiac Cath Lab

Patient Condition: Good Fair Serious Critical Stable Guarded

Condition / Code Status: Full Code Do not Resuscitate

Diet: Nothing by Mouth (NPO) except for medications

Other _____

Vital Signs:

Per Unit Routine Other _____

IV Fluids:

IV protocol: For all patients ages 8 years and over Saline lock with 20 g or 18 g IV catheter, Lactated Ringers (LR) at 25 mL/hr upon arrival. If patient has ESRD, Cirrhosis, DM, or Creatinine level > than 3 , start Normal Saline (NS) at 25 mL/hr

Other IV Fluids: _____ Rate: _____

Medications:

Prophylactic Antibiotics – No Beta-Lactam Allergy:

CeFAZolin sodium 2 grams intravenously single dose within 1 hour before surgical incision (Weight less than 120 kg)

CeFAZolin sodium 3 grams intravenously single dose within 1 hour before surgical incision (Weight greater than or equal to 120 kg)

CefTRIAxone 2 grams intravenously single dose within 1 hour before surgical incision

MetroNIDAZOLE HCL 500 mg intravenously single dose within 1 hour before surgical incision (Used along with CeFAZolin if anaerobic coverage necessary)

Other: _____

Prophylactic Antibiotics – Beta-Lactam Allergy:

Ciprofloxacin 400 mg intravenously single dose within 2 hours before surgical incision

Clindamycin phosphate 900 mg intravenously single dose within 1 hour before surgical incision

Gentamicin sulfate 120 mg intravenously single dose within 1 hour before surgical incision

Vancomycin HCL 1 gram intravenously single dose within 2 hours before surgical incision

MetroNIDAZOLE HCL 500 mg intravenously single dose within 1 hour of surgical incision (Used along with Ciprofloxacin or Gentamicin if anaerobic coverage necessary)



Laboratory STAT

- CBC with platelets and differential
- Hemoglobin/Hematocrit Prottime
- Basic Metabolic Panel Comprehensive Metabolic Panel
- Glucose, Random Potassium
- Renal Panel Beta-hCG, Quantitative
- PTT
- Liver Panel
- hCG, Urine

Respiratory:

- ABG

Blood Bank:

- Patient willing to receive Blood or Blood Products
- Blood Transfusion Comment: _____
- Type and Screen
 - Priority: Routine STAT Timed Today Date _____ Now
- Packed Red Blood Cells (Includes Type & Screen)
 - Quantity: _____ Expected Date: _____ Time: _____
 - Special Product Requirements:
 - CMV Negative Irradiated Sickle Cell Negative
 - Comments to Phlebotomist: _____
- Frozen Plasma (FP)
 - Quantity: _____ Expected Date: _____ Time: _____
- Platelet Pheresis
 - Quantity: _____ Expected Date: _____ Time: _____

Imaging:

X-Ray:

- Portable inspiration AP (upright) X-Ray of the chest today Pre-op Chest X-Ray
- Routine inspiration PA/Lateral X-Ray of the chest today Pre-op Chest X-Ray

Other Tests:

- STAT 12 Lead ECG
- Consults:

Physician Consulting _____

Consulting Physician's Phone number: _____

Reason for consult: _____

Case Management Consultation Today re: _____

Social Services Consultation Today re: _____

TELEPHONE ORDER DATE & TIME:	<input type="checkbox"/> READ BACK	ORDER TO PHARMACY DATE & TIME:
RN SIGNATURE:	PHYSICIAN _____ / _____ RN	DATE: _____ TIME: _____
	PHYSICIAN'S SIGNATURE: _____	DATE: _____ TIME: _____

PATIENT I.D.



VALLEY PRESBYTERIAN HOSPITAL

GENERAL SURGICAL PRE-OPERATIVE SAME DAY SURGERY (SDS) ORDERS