

#### MEDICAL CENTER

#### **Adult Open Heart Surgery Pathway** Pre-op/Admission orders

Last modified: 2011-12-12 11:15:23.0

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Admit
DIAGNOSIS:
CONDITION:
<ul><li>□ NO KNOWN ALLERGIES</li><li>□ ALLERGIES</li></ul>
Please Order Blood Glucose Testing If Indicated:
☐ Insulin Reg Human Sliding Scale Ordering Page (W/Glucose Monitoring)
Activity
☐ BEDREST WITH BRP ☐ ACTIVITY-AD LIB ☐ STRICT BEDREST
Diet
<ul> <li>☐ HEART HEALTHY DIET DAILY UNTIL D/C No concentrated sweets</li> <li>☐ RENAL DIET DAILY UNTIL D/C No concentrated sweets</li> <li>☐ NOTHING BY MOUTH DAILY UNTIL D/C</li> </ul>
Treatment
NURSING: cardiac surgery team pager numbers - floor: 835-7238 CVICU: 835-8205 and 831-6241
NURSING: On all CABG patients: Apply Baer Hugger to patient at least 1 hour before going to the
OR INITIATE COLLABORATIVE PATH Open Heart Surgery- print pathway from eDocs and place in chart
<ul> <li>☐ TELEMETRY, ADULT May be off telemetry to shower if no chest pain in previous 24 hours</li> <li>☐ NOTIFY HOUSE OFFICER: T&gt;: 101.4 SBP&gt;: 160 SBP&lt;: 90 DBP&gt;: 100 DBP&lt;: 50 HR&gt;: 120 HR&lt;: 60 RESP&gt;: 29 if chest pain</li> <li>☐ SALINE LOCK flush w/ns</li> </ul>
NURSING: Ht. and Wt. recorded on card on front of chart
<ul> <li>NURSING: Order EKG if Chest pain</li> <li>O2 PER NASAL CANNULA PRN (for chest pain &amp; titrate 02 to maintain SaO2greater than 92%)</li> <li>VITAL SIGNS PER UNIT standard</li> </ul>
VOLUREX INCENTIVE SPIROMETER Q2H W/A (nursing to instruct pt. on use; make sure spirometer goes to surgery with pt.; mark volurex with preop volume)
<ul> <li>acetaminophen: Tylenol (tablet and suppository) 650 mg po q4h prn (for headache)</li> <li>DOCUSATE SODIUM: COLACE 100 mg po bid</li> </ul>
MILK OF MAGNESIA: MOM 30 ml po qid prn (for constipation)
<ul> <li>MAG/AL-OH + SIMETHICONE SUSP 30 ml po q4h prn (for indigestion)</li> <li>FAMOTIDINE: PEPCID 20 mg po bid</li> </ul>
ASPIRIN ENTERIC COATED:ECOTRIN 81 mg po qam 10



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Labs/Tests
If the following test results are not available in StarPanel from the past 30 days order:
Admission Lytes, BUN, Creat, Gluc x1 (pre op)  SGOT BLD x1  SGPT BLD x1  BILIRUBIN TOTAL BLD x1  HGB A1C GLYCOSYLATE BLD x1  DRUG SCREEN URINE x1  CBC / PLT CT x1 (pre op)  URINALYSIS WITH MICROSCOPIC stat x1 (Must be clean catch)  EKG ELECTROCARDIOGRAM x1 ()  CHEST PA & LAT XR x1 ()  CHEST PORTABLE XR x1 stat (Pre-op study)
Coag studies ONLY if patient on Heparin drip, Warfarin, or h/o bleeding disorder
<ul><li>□ PROTHROMBIN TIME (PT) BLOOD x1 (pre op)</li><li>□ PART THROMBOPLASTIN (PTT) BLD x1 (pre op)</li></ul>
MEDICATION REMINDERS
If pt is transferred on IV heparin OR LM stenosis greater then 50%OR proximal LAD stenosis greater than 80%, order IV Heparin
☐ TREATMENT ADVISOR FOR ACUTE CORONARY SYNDROME
If patient not on IV Heparin:  ☐ HEPARIN SUBCUTANEOUS INJECTION 5000 un subcut q8h now (discontinue this order if heparin drip started)  If patient is transferred with IV NTG:  ☐ NITROGLYCERIN INFUSION: mcg/min iv stat ()
If EF less than 40%, and patient is NOT on another beta blocker, consider:  CARVEDILOL: COREG 6.25 mg po bid cc (hold for SBP less than 100 or heart rate less than 60 and notify house officer.)
If EF greater than 40%, and patient is NOT on another beta blocker, consider:  METOPROLOL: LOPRESSOR 25 mg po q12h (hold for SBP less than 100 or heart rate less than 60 and notify house officer.)
For patients with CAD, not on IV nitroglycerin, order:  ☐ NITROGLYCERIN 2% OINTMENT: 1 " topical q6h now ( for systolic bp less than 110 wipe off and hold nitropaste)



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Do NOT order sublingual nitroglycerin for patients with aortic stenosis  NITROGLYCERIN SUBLINGUAL: 0.4 mg subling prn (Give 1 tab q5min prn chest pain up to 3 tabs max. After 3 tabs notify md/house officer for persistant chest pain)		
Evaluate home meds/transfer meds & order as appropriate. Be sure to hold Metformin 48 hours before surgery.		
Night Before Surgery (ALL patients):  Cardiac Surgery Skin Prep orders  NPO AFTER MIDNIGHT EXCEPT MEDS TONIC  TYPE & SCREEN(ABO/RH/ATBY SCN) stat x1	GHT	
Night Before Surgery Meds:  Mupirocin 2% Nasal Ointment: Bactroban (1g surgery and on call morning of surgery 2 app both nares night before surgery and on morning	lication topical q12hx24 hours preop (apply to	
If PCN allergic choose Vanc + Levaquin  CEFAZOLIN INJ: ANCEF 2000 mg iv x1 preop ( VANCOMYCIN INJECTION: 1000 mg iv x1 preop ( LEVOFLOXACIN INJ: LEVAQUIN 500 mg iv x1	p (order for administration in the OR)	
If patient greater than 70 y/o OR , history of TIA /CVA or carotid bruits:		
☐ CAROTID DUPLEX VASC. INTERPRET; PROE HEART x1 (Pre-op Open Heart)	LEM BEING EVALUATED: PRE-OP OPEN	
For after hour, weekend and holiday test		
If the patient has a significant history of suspicion of emphysema or asthma, plea  BEDSIDE PULM FUNCT x1 (For patients who a BLOOD GASES ARTERIAL stat x1 (Room Air E	rse order: re NOT sedated and upright only)	
If the patient has previous DVT or question Mapping:  VENOUS UPLEX BILATERAL LOWER TO ASSECTED CARDIAC SURGERY x1 (to assess the condition VENOUS DUPLEX BILATERAL LOWER TO RESERVED.)	SESS THE CONDITION OF THE VEINS PRE- n of the veins pre-cardiac surgery)	