

ADULT ANESTHESIA POST-OP OUTPATIENT SURGERY PLAN

PHYSICIAN ORDERS

Diagnosis \_\_\_\_\_

Weight \_\_\_\_\_ Allergies \_\_\_\_\_

Place an "X" in the Orders column to designate orders of choice AND an "x" in the specific order detail box(es) where applicable.

ORDER ORDER DETAILS

Admit/Discharge/Transfer

Return Patient to PACU

Patient Care

\*\*\*Patients who are at high risk for obstructive sleep apnea (OSA) AND receive IV sedating medications intra-operative/ intra-procedure (EXCLUDING case start sedating medications), or during Phase II recovery, should be, at the discretion of the anesthesia provider, transferred to a higher level of monitoring to PACU\*\*\*

Convert IV to INT

When tolerating PO liquids

Deaccess Implanted Port

Rapid Response Team or UMC credentialed staff to deaccess implanted port prior to discharge.

heparin flush (heparin flush 100 units/mL injection)

3 mL, IVPush, inj, Prior to Discharge

For administration Post-Op in OPS. To be completed by Rapid Response Team or UMC credentialed staff to flush implanted port after deaccessing port.

Communication

\*\*\*SPECIAL CONSIDERATION: Phase II (OPS) - Continuous Pulse Oximetry is mandatory for all patients with the following criteria: ASA Score of III or greater, prone positioning, obese patients and patients with a positive High Risk OSA Score\*\*\*

Notify Nurse (DO NOT USE FOR MEDS)

Continuous Pulse Oximetry

Notify Provider of VS Parameters

SpO2 Less Than 92%, Notify anesthesia provider assigned to case

Notify Provider (Misc)

Notify Attending Anesthesiologist and Attending Surgeon, Reason: If unable to wean off O2 after two 15 min Room Air Trials

Notify Nurse (DO NOT USE FOR MEDS)

If regional block performed by anesthesia: lower extremity non weight bearing, up with crutches only; if upper extremity block must use sling 24 hours for single injection and if catheter left in place then must use sling until catheter is removed.

Notify Nurse (DO NOT USE FOR MEDS)

DISCHARGE: Patient may be discharged when Modified Post Anesthesia Recovery Score (MPAR) is 18 or above, per Department of Anesthesia Guidelines.

Notify Nurse (DO NOT USE FOR MEDS)

DISCHARGE: Requires Anesthesiology Attending evaluation prior to discharge.

Notify Nurse (DO NOT USE FOR MEDS)

DISCHARGE: Provide patient with discharge education for Regional Anesthesia (use the online education form under "depart, custom tab")

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	<input type="checkbox"/> 8 L/min, Via: Simple mask, Keep sats greater than: 92% Conduct a room air trial prior to discharge; if oxygen saturation is less than 92% resume oxygen therapy and re-trial prior to discharge.  <input type="checkbox"/> 10 L/min, Via: Face tent, Keep sats greater than: 92% Conduct a room air trial prior to discharge; if oxygen saturation is less than 92% resume oxygen therapy and re-trial prior to discharge.

...Additional Orders

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SLIDING SCALE INSULIN REGULAR PLAN

PHYSICIAN ORDERS

Place an "X" in the Orders column to designate orders of choice AND an "x" in the specific order detail box(es) where applicable.

ORDER	ORDER DETAILS										
<b>Patient Care</b>											
<p><b>POC Blood Sugar Check</b></p> <table border="0"> <tr> <td><input type="checkbox"/> Per Sliding Scale Insulin Frequency</td> <td><input type="checkbox"/> AC &amp; HS</td> </tr> <tr> <td><input type="checkbox"/> AC &amp; HS 3 days</td> <td><input type="checkbox"/> TID</td> </tr> <tr> <td><input type="checkbox"/> BID</td> <td><input type="checkbox"/> q12h</td> </tr> <tr> <td><input type="checkbox"/> q6h</td> <td><input type="checkbox"/> q6h 24 hr</td> </tr> <tr> <td><input type="checkbox"/> q4h</td> <td></td> </tr> </table>		<input type="checkbox"/> Per Sliding Scale Insulin Frequency	<input type="checkbox"/> AC & HS	<input type="checkbox"/> AC & HS 3 days	<input type="checkbox"/> TID	<input type="checkbox"/> BID	<input type="checkbox"/> q12h	<input type="checkbox"/> q6h	<input type="checkbox"/> q6h 24 hr	<input type="checkbox"/> q4h	
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<input type="checkbox"/> q4h											
<p><b>Sliding Scale Insulin Regular Guidelines</b></p> <input type="checkbox"/> Follow SSI Regular Reference Text											
<b>Medications</b>											
<p><b>Medication sentences are per dose. You will need to calculate a total daily dose if needed.</b></p>											
<p><b>insulin regular (Low Dose Insulin Regular Sliding Scale)</b></p> <p><input type="checkbox"/> 0-10 units, subcut, inj, AC &amp; nightly, PRN glucose levels - see parameters            Low Dose Insulin Regular Sliding Scale            If blood glucose is less than 70 mg/dL and patient is symptomatic, initiate hypoglycemia guidelines and notify provider.</p> <p>70-150 mg/dL - 0 units            151-200 mg/dL - 1 units subcut            201-250 mg/dL - 2 units subcut            251-300 mg/dL - 3 units subcut            301-350 mg/dL - 4 units subcut            351-400 mg/dL - 6 units subcut</p> <p>If blood glucose is greater than 400 mg/dL, administer 10 units subcut, notify provider, and repeat POC blood sugar check in 2 hours. Continue to repeat 10 units subcut and POC blood sugar checks every 2 hours until blood glucose is less than 300 mg/dL. Once the blood sugar is less than 300 mg/dL, repeat POC blood sugar in 4 hours and then resume normal POC blood sugar check and insulin regular sliding scale.</p> <p><input type="checkbox"/> 0-10 units, subcut, inj, BID, PRN glucose levels - see parameters            Low Dose Insulin Regular Sliding Scale            If blood glucose is less than 70 mg/dL and patient is symptomatic, initiate hypoglycemia guidelines and notify provider.</p> <p>70-150 mg/dL - 0 units            151-200 mg/dL - 1 units subcut            201-250 mg/dL - 2 units subcut            251-300 mg/dL - 3 units subcut            301-350 mg/dL - 4 units subcut            351-400 mg/dL - 6 units subcut</p> <p>If blood glucose is greater than 400 mg/dL, administer 10 units subcut, notify provider, and repeat POC blood sugar check in 2 hours. Continue to repeat 10 units subcut and POC blood sugar checks every 2 hours until blood glucose is less than 300 mg/dL. Once the blood sugar is less than 300 mg/dL, repeat POC blood sugar in 4 hours and then resume normal POC blood sugar check and insulin regular sliding scale.</p> <p>Continued on next page....</p>											

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PHYSICIAN ORDERS

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ORDER	ORDER DETAILS
	<p><b>insulin regular (Moderate Dose Insulin Regular Sliding Scale)</b></p> <p><input type="checkbox"/> 0-12 units, subcut, inj, AC &amp; nightly, PRN glucose levels - see parameters                      Moderate Dose Insulin Regular Sliding Scale                      If blood glucose is less than 70 mg/dL and patient is symptomatic, initiate hypoglycemia guidelines and notify provider.</p> <p>70-150 mg/dL - 0 units                      151-200 mg/dL - 2 units subcut                      201-250 mg/dL - 3 units subcut                      251-300 mg/dL - 5 units subcut                      301-350 mg/dL - 7 units subcut                      351-400 mg/dL - 10 units subcut</p> <p>If blood glucose is greater than 400 mg/dL, administer 12 units subcut, notify provider, and repeat POC blood sugar check in 2 hours. Continue to repeat 10 units subcut and POC blood sugar checks every 2 hours until blood glucose is less than 300 mg/dL. Once blood sugar is less than 300 mg/dl, repeat POC blood sugar in 4 hours and then resume normal POC blood sugar checks and insutlin regular scale.</p> <p><input type="checkbox"/> 0-12 units, subcut, inj, BID, PRN glucose levels - see parameters                      Moderate Dose Insulin Regular Sliding Scale                      If blood glucose is less than 70 mg/dL and patient is symptomatic, initiate hypoglycemia guidelines and notify provider.</p> <p>70-150 mg/dL - 0 units                      151-200 mg/dL - 2 units subcut                      201-250 mg/dL - 3 units subcut                      251-300 mg/dL - 5 units subcut                      301-350 mg/dL - 7 units subcut                      351-400 mg/dL - 10 units subcut</p> <p>If blood glucose is greater than 400 mg/dL, administer 12 units subcut, notify provider, and repeat POC blood sugar check in 2 hours. Continue to repeat 10 units subcut and POC blood sugar checks every 2 hours until blood glucose is less than 300 mg/dL. Once blood sugar is less than 300 mg/dl, repeat POC blood sugar in 4 hours and then resume normal POC blood sugar checks and insutlin regular scale.</p> <p><input type="checkbox"/> 0-12 units, subcut, inj, TID, PRN glucose levels - see parameters                      Moderate Dose Insulin Regular Sliding Scale                      If blood glucose is less than 70 mg/dL and patient is symptomatic, initiate hypoglycemia guidelines and notify provider.</p> <p>70-150 mg/dL - 0 units                      151-200 mg/dL - 2 units subcut                      201-250 mg/dL - 3 units subcut                      251-300 mg/dL - 5 units subcut                      301-350 mg/dL - 7 units subcut                      351-400 mg/dL - 10 units subcut</p> <p>If blood glucose is greater than 400 mg/dL, administer 12 units subcut, notify provider, and repeat POC blood sugar check in 2 hours. Continue to repeat 10 units subcut and POC blood sugar checks every 2 hours until blood glucose is less than 300 mg/dL. Once blood sugar is less than 300 mg/dl, repeat POC blood sugar in 4 hours and then resume normal POC blood sugar checks and insutlin regular scale.</p> <p>Continued on next page....</p>

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	<p><b>insulin regular (High Dose Insulin Regular Sliding Scale)</b></p> <p><input type="checkbox"/> 0-14 units, subcut, inj, AC &amp; nightly, PRN glucose levels - see parameters                      High Dose Insulin Regular Sliding Scale                      If blood glucose is less than 70 mg/dL and patient is symptomatic, initiate hypoglycemia guidelines and notify provider.</p> <p>70-150 mg/dL - 0 units                      151-200 mg/dL - 3 units subcut                      201-250 mg/dL - 5 units subcut                      251-300 mg/dL - 7 units subcut                      301-350 mg/dL - 10 units subcut                      351-400 mg/dL - 12 units subcut</p> <p>If blood glucose is greater than 400 mg/dL, administer 14 units subcut, notify provider, and repeat POC blood sugar check in 2 hours. Continue to repeat 10 units subcut and POC blood sugar checks every 2 hours until blood glucose is less than 300 mg/dL. Once blood sugar is less than 300 mg/dL, repeat POC blood sugar in 4 hours and then resume normal POC blood sugar check and insulin regular sliding scale.</p> <p>Continued on next page....</p>

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	<p><b>insulin regular (Blank Insulin Sliding Scale)</b></p> <p><input type="checkbox"/> See Comments, subcut, inj, PRN glucose levels - see parameters                      If blood glucose is less than ____mg/dL , initiate hypoglycemia guidelines and notify provider.</p> <p>70-150 mg/dL - ____ units                      151-200 mg/dL - ____ units subcut                      201-250 mg/dL - ____ units subcut                      251-300 mg/dL - ____ units subcut                      301-350 mg/dL - ____ units subcut                      351-400 mg/dL - ____ units subcut</p> <p>If blood glucose is greater than 400 mg/dL, administer ____ units subcut, notify provider, and repeat POC blood sugar check in 2 hours. Continue to repeat ____ units subcut and POC blood sugar checks every 2 hours until blood glucose is less than 300 mg/dL. Once blood sugar is less than 300 mg/dL, repeat POC blood sugar in 4 hours and then resume normal POC blood sugar check and insulin regular sliding scale.</p>
<b>HYPOglycemia Guidelines</b>	
	<p><b>HYPOglycemia Guidelines</b></p> <p><input type="checkbox"/> ***See Reference Text***</p>
	<p><b>glucose</b></p> <p><input type="checkbox"/> 15 g, PO, gel, as needed, PRN glucose levels - see parameters                      If 6 ounces of juice is not an option, may use glucose gel if blood glucose is less than 70 mg/dL and patient is symptomatic and able to swallow. See hypoglycemia Guidelines.                      Continued on next page....</p>

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<b>UMC Health System</b>  SLIDING SCALE INSULIN REGULAR PLAN	Patient Label Here
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**PHYSICIAN ORDERS**

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ORDER	ORDER DETAILS
	<b>glucose (D50)</b> <input type="checkbox"/> 25 g, IVPush, syringe, as needed, PRN glucose levels - see parameters Use if blood glucose is less than 70 mg/dL and patient is symptomatic and cannot swallow OR if patient has altered mental status AND has IV access. See hypoglycemia guidelines.
	<b>glucagon</b> <input type="checkbox"/> 1 mg, IM, inj, as needed, PRN glucose levels - see parameters Use if blood glucose is less than 70 mg/dL and patient is symptomatic and cannot swallow OR if patient has altered mental status AND has NO IV access. See hypoglycemia guidelines.

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