ADULT OUTPATIENT OPHTHALMOLOGY PLAN - Phase: Diagnostic Pre-Op Orders

	PHYSICIA	N ORDERS	
Diagnosi	s		
Weight	Allergies		
	Place an "X" in the Orders column to designate orders of choice AN	ID an "x" in the specific orde	r detail box(es) where applicable.
ORDER	ORDER DETAILS		
	Admit/Discharge/Transfer		
	Request for Outpatient Services		
	Communication		
	Instruct Patient Instruct Patient On: Other Take the following medications the morning	g of surgery, with a sip of water	, Please take:
	Misc Patient Care Order		
	Laboratory		
	CBC		
	CBC with Differential		
	Basic Metabolic Panel Boutine Outpatient/PACU, T;N		
	Comprehensive Metabolic Panel		
	Prothrombin Time with INR Routine Outpatient/PACU, T;N		
	PTT Routine Outpatient/PACU, T;N		
	Urine Beta hCG Urine, Routine Outpatient/PACU, T;N		
	Diagnostic Tests		
	EKG-12 Lead Routine, Pre-Op [High Risk Operation] (V72.81) An EKG within the last 6 weeks is valid		
	DX Chest Single View		
	☐ Routine A chest X-ray within the last year is valid.		
	DX Chest PA & Lateral		
	Routine A chest X-ray within the last year is valid.		
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	n by Signature:	Date Date	Time Time
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	UMC Health System	Patient Label Here
	DULT OUTPATIENT OPHTHALMOLOGY PLAN Phase: OPS/OR Holding Pre-Op Orders	
		N ORDERS
	Place an "X" in the Orders column to designate orders of choice AN	D an "x" in the specific order detail box(es) where applicable.
ORDER		
	Patient Care Pre-Operative Warming Orders ***See Reference Text***	
	Vital Signs ☐ Per Unit Standards	
	Insert Peripheral Line	
	Patient Activity Up Ad Lib/Activity as Tolerated	Bedrest Bathroom Privileges
	POC Blood Sugar Check Upon arrival, if diabetic. Notify surgeon if accucheck is greater than 20	00 mg/dL.
	POC Chem 8	
	POC Hemoglobin and Hematocrit	
	Communication	
	***Code Status must be declared upon admission to Outpatient Surgery*	**
	Code Status Code Status: Full Code Code Status: Care Limitation	Code Status: DNR/AND (Allow Natural Death)
	Notify Nurse (DO NOT USE FOR MEDS)	
	Dietary	
	Outpatient Diet	
	IV Solutions	
	LR □ IV, 25 mL/hr □ IV, 100 mL/hr	□ IV, 75 mL/hr □ IV, 150 mL/hr
	NS □ IV, 25 mL/hr □ IV, 100 mL/hr	□ IV, 75 mL/hr □ IV, 150 mL/hr
	Medications	
	Medication sentences are per dose. You will need to calculate a tota	al daily dose if needed.
	.Medication Management NOW, Start date T;N Do Not Give sodium citrate-citric acid (Bicitra).	
	Ophthalmic Medication Administration Seq (Ophthalmic Medication A	Administration Sequence)
	LEFT EYE	
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Order Take	en by Signature:	Date Time
Physician	Signature:	Date Time



UMC Health System

ADULT OUTPATIENT OPHTHALMOLOGY PLAN - Phase: OPS/OR Holding Pre-Op Orders

	PHYSICIAN ORDE	RS			
	Place an "X" in the Orders column to designate orders of choice AND an "x	" in the specific orde	er detail box(es) where applicable.		
ORDER	R ORDER DETAILS				
	NON-RETINAL procedure medication set				
	proparacaine ophthalmic (proparacaine 0.5% ophthalmic solution)				
	2 drop, left eye, ophth soln, OCTOR, x 1 dose Administer proparacaine first. Wait at least three minutes before give	ng any other eye drop	DS.		
	phenylephrine ophthalmic (phenylephrine 2.5% ophthalmic solution) 1 drop, left eye, ophth soln, OCTOR, x 3 dose, q15min Three minutes after the proparacaine is instilled, administer remaining drops i tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxifloxacin 0.5%, flurt medication should be separated by 3 minutes.				
	tropicamide ophthalmic (tropicamide 1% ophthalmic solution) 1 drop, left eye, ophth soln, OCTOR, x 3 dose, q15min Three minutes after the proparacaine is instilled, administer remaining drops i tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxifloxacin 0.5%, flurt medication should be separated by 3 minutes.				
cyclopentolate ophthalmic (cyclopentolate 1% ophthalmic solution) 1 drop, left eye, ophth soln, OCTOR, x 3 dose, q15min Three minutes after the proparacaine is instilled, administer remaining drops in the following order: phenylephrine 2.5% tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxifloxacin 0.5%, flurbiprofen 0.03%. Administration of each differenciation should be separated by 3 minutes.					
prednisoLONE ophthalmic (prednisoLONE acetate 1% ophthalmic suspension) □ 1 drop, left eye, ophth susp, OCTOR, x 4 dose, q30min Three minutes after the proparacaine is instilled, administer remaining drops in the following order: phenylephr tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxifloxacin 0.5%, flurbiprofen 0.03%. Administration or medication should be separated by 3 minutes.					
	PrednisoLONE acetate should be administered every 30 minutes prior to the procedure. If more than 4 doses are needed because the patient will be in holding for more than 2 hours, please obtain a new order from the physician.				
	 moxifloxacin ophthalmic (moxifloxacin 0.5% ophthalmic solution) 1 drop, left eye, ophth soln, OCTOR, x 4 dose, q30min Three minutes after the proparacaine is instilled, administer remaining drops i tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxifloxacin 0.5%, flurt medication should be separated by 3 minutes. 				
	***Moxifloxacin should be administered every 30 minutes prior to the procedul patient will be in holding for more than 2 hours, please obtain a new order fror Continued on next page		es are needed because the		
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Order Take	aken by Signature: I	Date	Time		
Physician	an Signature: I	Date	Time		



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Intribution in the intermediation of the programmed in the following order: pherylephtrine 2.5%, topbatalia 1%, experimentaries is instilled, administer remaining drops in the following order: pherylephtrine 2.5%, topbatalia 1%, prediction 1%, setting administer remaining drops in the following order: pherylephtrine 2.5%, topbatalia 1%, prediction of water data and the administer devery 30 minutes prior to the procedure. If more than 4 doeses are needed because the patient will be in holding for more than 2 hours, please obtain a new order from the physician.*** "**RETINAL procedure medication set"** proparacaine ophthalmic (proparacaine 0.5% ophthalmic solution) 2 drop, left eye, ophth soh, OCTOR, x 1 does Administer proparacaine first. Wail at least three minutes before giving any other eye drops. moxifloxacin ophthalmic (moxifloxacin 0.5% ophthalmic solution) 1 drop, left eye, ophthalmic (moxifloxacin 0.5% ophthalmic solution) 1 drop, left eye, ophthalmic (moxifloxacin 0.5% ophthalmic solution) 1 drop, left eye, ophthalmic (moxifloxacin 0.5% ophthalmic solution) 1 drop, left eye, ophthalmic (moxifloxacin 0.5%, optiophentile 1%, predinsioner 1%. Administration of each different medication should be separated by 3 minutes. 1 drop, left eye, ophthalmic (topicamic 1% copient 1%, cyclopentolate 1%, predinsioner 1%. Administration of each different medication should be separated by 3 minutes. 1 drop, left eye, ophthalmic (topicamic 1% copient 1%, cyclopentolate 1%, predinsioner 1%. Administration of each different medication should be separated by 3 minutes. 1 drop, left eye, ophthal						
ORDER ORDER DETAILS Indebiation ophthalmic (flurbiprofen 0.03% ophthalmic solution) I drop, left eye, ophth soin, OCTOR, x 4 dose, q30min Three minules after the proparational is instilled, administer remaining drops in the following order: phenylophine 2.5%, tropicamice 1%, cyclopentolate 1%, predmissione 1%, moxifioxacin 0.5%, flurbiprofen 0.03%. Administration of each different medication should be separated by 3 minutes. ***"RETINAL procedure medication set"** proparaciane ophthalmic (proparaciane 0.5% ophthalmic solution) 2 drop, left eye, ophth soin, OCTOR, x 1 dose Administer proparaciane first. Wait at least three minutes before giving any other eye drops. mextificacin ophthalmic (moxifioxacin 0.5% ophthalmic solution) 2 drop, left eye, ophth soin, OCTOR, x 1 dose Administer proparaciane first. Wait at least three minutes before giving any other eye drops. mextificacin ophthalmic (moxifioxacin 0.5% ophthalmic solution) 1 drop, left eye, ophth soin, OCTOR, x 4 dose, q firstin Three minutes after the proparaciane is stilled. administer remaining drops in the following order: moxifioxacin 0.5 %, tropicamide 1%, phenylephnen 10%, atopine 1%, cyclopentolate 1%, predisolone 1%. Administration of each different medication should be separated by 3 minutes. Implemented by a spinutes. Implemented by 3 minutes. Implemented by a minutes. Implemented by 3 minutes. Implemented by a spinutes. Implemented by 3 minutes. Implemented by a minutes. Implemented by 3 minutes. Implemented by 3 minutes. Implemented by 3 minutes. Implemented by 3 minutes.		PHYSICIAN ORDERS				
Intribution in the intermediation of the programmed in the following order: pherylephrine 2.5%, topbaration 1%, experimentials after the programmed in the following order: pherylephrine 2.5%, topbaration 1%, experimentials after the programmed in the following order: pherylephrine 2.5%, topbaration 1%, experimentation 1%, experimenta		Place an "X" in the Orders column to designate orders of choice AND an "x" in the specific order detail box(es) where applicable.				
□ I drop, left eye, opthi soln, OCTOR, x 4 dose, q 30min ***Fluxbjorden shuld be separated by 3 minutes. ***Fluxbjorden shuld be administer eraning drops in the following order: phenylephtine 2.5%, tropicanide 1%, cyclopentolate 1%, predinsolone 1%, moxifloxacin 0.5%, flurbiprofen 0.03%. Administration of each different medication shuld be administered every 30 minutes prior to the procedure. If more than 4 doses are needed because the patient will be in holding for more than 2 hours, please obtain a new order from the physician.** ***RETINAL procedure medication set*** proparacaine ophthalmic (proparacaine 0.5% ophthalmic solution) 2 drop, left eye, ophth soln, OCTOR, x 1 dose Administer proparacaine first. Wait at least three minutes before giving any other eye drops. moxification of public (moxificacin 0.5% ophthalmic solution) 1 drop, left eye, ophth soln, OCTOR, x 4 dose, q 15min Three minutes after the proparacaine is instilled, administer remaining drops in the following order: moxificacin 0.5%, tropicamide 1%, prophenolise 1%, predinsione 1%. Administration of each different medication should be separated by 3 minutes. Contender 1%, henylephtine 10%, adpoints 1%, specification 1 drop, left eye, ophthalmic solution) 1 drop, left eye, ophthalmic solution) 1 drop, left eye, ophthalmic solution) 1 drop, left eye, ophthalmic solution 1 drop, left eye, ophthalmic solution 1 drop, left eye, ophthalmic solution	ORDER	ORDER DETAILS				
proparacalne ophthalmic (proparacalne 0.5% ophthalmic solution) Charles State <		 1 drop, left eye, ophth soln, OCTOR, x 4 dose, q30min Three minutes after the proparacaine is instilled, administer remaining tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxifloxacin 0.5 medication should be separated by 3 minutes. ***Flurbiprofen should be administered every 30 minutes prior to the prior 	w, flurbiprofen 0.03%. Admin rocedure. If more than 4 dose	nistration of each different		
I drop, left eye, ophth soln, OCTOR, x 4 dose, q15min Three minutes after the proparacaine is instilled, administer remaining drops in the following order: moxifloxacin 0.5 %, tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentolate 1%, prednisolone 1%. Administration of each different medication should be separated by 3 minutes. tropicamide ophthalmic (tropicamide 1% ophthalmic solution) 1 drop, left eye, ophth soln, OCTOR, x 4 dose, q15min Three minutes after the proparacaine is instilled, administer remaining drops in the following order: moxifloxacin 0.5 %, tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentolate 1%, prednisolone 1%. Administration of each different medication should be separated by 3 minutes. Denylephrine ophthalmic (phenylephrine 10% ophthalmic solution) Three minutes after the proparacaine is instilled, administer remaining drops in the following order: moxifloxacin 0.5 %, tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentolate 1%, prednisolone 1%. Administration of each different medication should be separated by 3 minutes. Denylephrine ophthalmic (phenylephrine 10% ophthalmic solution) Three minutes after the proparacaine is instilled, administer remaining drops in the following order: moxifloxacin 0.5 %, tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentolate 1%, prednisolone 1%. Administration of each different medication should be separated by 3 minutes. Continued on next page Scanned Powerchart Scanned PharmScan Order Taken by Signetter: Date Time <th></th> <th>proparacaine ophthalmic (proparacaine 0.5% ophthalmic solutio</th> <th></th> <th></th>		proparacaine ophthalmic (proparacaine 0.5% ophthalmic solutio				
I drop, left eye, ophth soln, OCTOR, x 4 dose, q15min There minutes after the proparacaine is instilled, administer remaining drops in the following order: moxifloxacin 0.5 %, tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentolate 1%, prednisolone 1%. Administration of each different medication should be separated by 3 minutes.		1 drop, left eye, ophth soln, OCTOR, x 4 dose, q15min Three minutes after the proparacaine is instilled, administer remaining tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentolate 1%,				
I drop, left eye, ophth soin, OCTOR, x 4 dose, q15min Three minutes after the proparacaine is instilled, administer remaining drops in the following order: moxifloxacin 0.5 %, tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentolate 1%, prednisolone 1%. Administration of each different medication should be separated by 3 minutes. Continued on next page To Read Back I Scanned Powerchart Scanned PharmScan Order Taken by Signature: Date Time		1 drop, left eye, ophth soln, OCTOR, x 4 dose, q15min Three minutes after the proparacaine is instilled, administer remaining tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentolate 1%,				
Order Taken by Signature: Date Time		1 drop, left eye, ophth soln, OCTOR, x 4 dose, q15min Three minutes after the proparacaine is instilled, administer remaining tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentolate 1%, should be separated by 3 minutes.				
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	Order Take	en by Signature:	Date	Time		
Physician Signature: Date Time	Physician S	Signature:	Date	Time		

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	Place an "X" in the Orders column to designate orders of choi	ce AN	D an "x" in the specific ord	der detail box(es) where	e applicable.
ORDER	ORDER DETAILS				
	atropine ophthalmic (atropine 1% ophthalmic solution) ☐ 1 drop, left eye, ophth soln, OCTOR, x 4 dose, q15min Three minutes after the proparacaine is instilled, administer ren tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentola should be separated by 3 minutes.				edication
	cyclopentolate ophthalmic (cyclopentolate 1% ophthalmic solu ☐ 1 drop, left eye, ophth soln, OCTOR, x 4 dose, q15min Three minutes after the proparacaine is instilled, administer ren tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentola should be separated by 3 minutes.	naining			edication
	prednisoLONE ophthalmic (prednisoLONE acetate 1% ophthal ☐ 1 drop, left eye, ophth susp, OCTOR, x 4 dose, q30min Three minutes after the proparacaine is instilled, administer ren tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentola should be separated by 3 minutes.	naining	drops in the following order		nedication
	RIGHT EYE ****NON-RETINAL procedure medication set*** proparacaine ophthalmic (proparacaine 0.5% ophthalmic s 2 drop, right eye, ophth soln, OCTOR, x 1 dose Administer proparacaine first. Wait at least three minut			ps.	
	 phenylephrine ophthalmic (phenylephrine 2.5% ophthalmic so 1 drop, right eye, ophth soln, OCTOR, x 3 dose, q15min Three minutes after the proparacaine is instilled, administer ren tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxiflox; medication should be separated by 3 minutes. 	naining	drops in the following order		ent
	tropicamide ophthalmic (tropicamide 1% ophthalmic solution) ☐ 1 drop, right eye, ophth soln, OCTOR, x 3 dose, q15min Three minutes after the proparacaine is instilled, administer ren tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxiflox medication should be separated by 3 minutes. Continued on next page				ent
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Order Take	en by Signature:		Date	Time	
Physician	Signature:		Date	Time	



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	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		
	 cyclopentolate ophthalmic (cyclopentolate 1% ophthalmic solution) 1 drop, right eye, ophth soln, OCTOR, x 3 dose, q15min Three minutes after the proparacaine is instilled, administer remaining drops in the following order: phenylephrine 2.5%, tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxifloxacin 0.5%, flurbiprofen 0.03%. Administration of each different medication should be separated by 3 minutes. 		
	prednisoLONE ophthalmic (prednisoLONE acetate 1% ophthalmic suspension) 1 drop, right eye, ophth susp, OCTOR, x 4 dose, q30min Three minutes after the proparacaine is instilled, administer remaining drops in the following order: phenylephrine 2.5%, tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxifloxacin 0.5%, flurbiprofen 0.03%. Administration of each different medication should be separated by 3 minutes. ***PrednisoLONE acetate should be administered every 30 minutes prior to the procedure. If more than 4 doses are needed because		
	the patient will be in holding for more than 2 hours, please obtain a new order from the physician.***		
	 moxifloxacin ophthalmic (moxifloxacin 0.5% ophthalmic solution) 1 drop, right eye, ophth soln, OCTOR, x 4 dose, q30min Three minutes after the proparacaine is instilled, administer remaining drops in the following order: phenylephrine 2.5%, tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxifloxacin 0.5%, flurbiprofen 0.03%. Administration of each different medication should be separated by 3 minutes. 		
	Moxifloxacin should be administered every 30 minutes prior to the procedure. If more than 4 doses are needed because the patient will be in holding for more than 2 hours, please obtain a new order from the physician.		
	 flurbiprofen ophthalmic (flurbiprofen 0.03% ophthalmic solution) 1 drop, right eye, ophth soln, OCTOR, x 4 dose, q30min Three minutes after the proparacaine is instilled, administer remaining drops in the following order: phenylephrine 2.5%, tropicamide 1%, cyclopentolate 1%, prednisolone 1%, moxifloxacin 0.5%, flurbiprofen 0.03%. Administration of each different medication should be separated by 3 minutes. 		
	Flurbiprofen should be administered every 30 minutes prior to the procedure. If more than 4 doses are needed because the patient will be in holding for more than 2 hours, please obtain a new order from the physician.		
	RETINAL procedure medication set proparacaine ophthalmic (proparacaine 0.5% ophthalmic solution)		
	 2 drop, right eye, ophth soln, OCTOR, x 1 dose Administer proparacaine first. Wait at least three minutes before giving any other eye drops. 		
	moxifloxacin ophthalmic (moxifloxacin 0.5% ophthalmic solution)		
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Order Take	en by Signature: Date Time		
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		PHYSICIAN ORDERS		
	Place an "X" in the Orders column to designate orders	s of choice AND an "x" in the specific	order detail box(es) where applicabl	
ER	ORDER DETAILS			
	1 drop, right eye, ophth soln, OCTOR, x 4 dose, q15min Three minutes after the proparacaine is instilled, administer remaining drops in the following order: moxifloxacin 0.5 %, tropicamide 1%, phenylephrine 10%, atropine 1%, cyclopentolate 1%, prednisolone 1%. Administration of each different medication should be separated by 3 minutes.			
	tropicamide ophthalmic (tropicamide 1% ophthalmic se ☐ 1 drop, right eye, ophth soln, OCTOR, x 4 dose, q15mi Three minutes after the proparacaine is instilled, admin tropicamide 1%, phenylephrine 10%, atropine 1%, cycl should be separated by 3 minutes.	n hister remaining drops in the following orc		
	 phenylephrine ophthalmic (phenylephrine 10% ophthal 1 drop, right eye, ophth soln, OCTOR, x 4 dose, q15mi Three minutes after the proparacaine is instilled, admin tropicamide 1%, phenylephrine 10%, atropine 1%, cycl should be separated by 3 minutes. 	n hister remaining drops in the following orc		
	atropine ophthalmic (atropine 1% ophthalmic solution) ☐ 1 drop, right eye, ophth soln, OCTOR, x 4 dose, q15mi Three minutes after the proparacaine is instilled, admin tropicamide 1%, phenylephrine 10%, atropine 1%, cycl should be separated by 3 minutes.	in hister remaining drops in the following orc		
	 cyclopentolate ophthalmic (cyclopentolate 1% ophthal ☐ 1 drop, right eye, ophth soln, OCTOR, x 4 dose, q15mi Three minutes after the proparacaine is instilled, admin tropicamide 1%, phenylephrine 10%, atropine 1%, cycl should be separated by 3 minutes. 	n hister remaining drops in the following orc		
	 prednisoLONE ophthalmic (prednisoLONE acetate 1% 1 drop, right eye, ophth susp, OCTOR, x 4 dose, q30m Three minutes after the proparacaine is instilled, admin tropicamide 1%, phenylephrine 10%, atropine 1%, cycl should be separated by 3 minutes. 	in hister remaining drops in the following ord		
	Consults/Referrals			
	Consult MD	antacted No.		
	Service: Anesthesiology, Reason: Pre-Op, Provider Co			
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r Takeı	en by Signature:	Date	Time	
	Signature:	Date	Time	



ADULT OUTPATIENT OPHTHALMOLOGY PLAN - Phase: PACU Orders

	PHYSICIAN ORDERS			
	Place an "X" in the Orders column to designate orders of choice AN	D an "x" in the specific orde	r detail box(es) where applicable.	
ORDER	ORDER DETAILS			
	Patient Care			
	Vital Signs Per Unit Standards			
	Patient Activity Dp Ad Lib/Activity as Tolerated Dp Ad Lib/Activity as Tolerated, Bed Position: HOB Greater Than or Equal to 30 degrees Dp Ad Lib/Activity as Tolerated, Bed Position: Keep HOB at 45-60 degrees Dp Ad Lib/Activity as Tolerated, Bed Position: Keep HOB at 45-60 degrees Assist as Needed, Maintain prone position, with face facing down. Bathroom Privileges.			
	Communication			
	Notify Provider of VS Parameters			
	Medications			
	Medication sentences are per dose. You will need to calculate a total daily dose if needed. acetaZOLAMIDE 500 mg, PO, cap sa, ONE TIME For administration in PACU. If not given in PACU, give Post-Op in OPS. ******If patient has sulfa allergy, clarify order with MD before administration.*****			
	.Medication Management ☐ NOW, Start date T;N NO MORPHINE after any eye muscle surgery			
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Order Take	n by Signature:	Date	Time	
Physician S	Signature:	Date	Time	



		Patient Label Here			
	ADULT OUTPATIENT OPHTHALMOLOGY PLAN - Phase: OPS Post-Op Orders				
	PHYSICIA	N ORDERS			
	Place an "X" in the Orders column to designate orders of choice AN	D an "x" in the specific order detail box(es) where applicable.			
ORDER	ORDER DETAILS				
	Patient Care				
	***SPECIAL CONSIDERATION: Phase II (OPS) - Continuous Pu mandatory for all patients with the following criteria: ASA Score o				
	greater, prone positioning, obese patients and patients with a postive High Risk				
	OSA Score***				
	Vital Signs				
	Per Unit Standards				
		e-operative room air saturation percentage is maintained, without			
	stimulation, for more than 15 min.	e-operative room all saturation percentage is maintained, without			
	Patient Activity				
	└└ Up Ad Lib/Activity as Tolerated └ Up Ad Lib/Activity as Tolerated, Bed Position: HOB Greater Than or E	gual to 30 degrees			
	Up Ad Lib/Activity as Tolerated, Bed Position: Keep HOB at 45-60 de	rees			
	Assist as Needed, Maintain prone position, with face facing down. Bathroom Privileges. Activity Precautions NO bending, straining, or lifting POC Blood Sugar Check Upon arrival, if diabetic. Notify surgeon if accucheck greater than 200 mg/dL. Discontinue Peripheral Line When vital signs stable, tolerating po fluids, and pain controlled.				
	Communication				
	Code Status must be declared post operatively as the patient has had a change in the level of care				
	Code Status				
	Code Status: Full Code Code Status: DNR/AND (Allow Natural Death)				
	Notify Provider of VS Parameters				
	Notify Provider (Misc)				
	Notify Nurse (DO NOT USE FOR MEDS)				
Leave dressing in place at all times. Notify Nurse (DO NOT USE FOR MEDS) No eye patch or shield needed. Notify Nurse (DO NOT USE FOR MEDS) Do Not Discharge patient until seen by physician.					
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	en by Signature:				
Physician	Signature:	Date Time			

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ADULT OUTPATIENT OPHTHALMOLOGY PLAN - Phase: OPS Post-Op Orders

	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				
	Notify Nurse (DO NOT USE FOR MEDS) Ensure the implant card is given to the patient				
	MUST document PCP's name and Fax number, in the order below				
	Send Pre-Op Workup Results				
	Dietary				
	Outpatient Diet Clear Liq. Advance to Pre-Hospital Diet Pre-Hospital Diet				
	Medications				
	Medication sentences are per dose. You will need to calculate a total daily dose if needed. acetaZOLAMIDE 500 mg, PO, cap sa, ONE TIME "IF NOT ADMINISTERED IN PACU, give Post-Op in OPS. ******If patient has sulfa allergy, clarify order with MD before administration.*****"				
	acetaminophen 650 mg, PO, tab, q4h, PRN pain-mild (scale 1-3) For administration Post-Op in OPS. Do not exceed 4000 mg of acetaminophen per 24 hours from all sources.				
	.Medication Management NOW, Start date T;N NO MORPHINE after any eye muscle surgery				
	Respiratory				
	Oxygen Therapy 2 L/min, Via: Nasal cannula, Keep sats greater than: 92& or equal to preop sat				
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Order Take	n by Signature: Date Time				
Physician S	Physician Signature: Time Time				



UMC Health System ADULT OUTPATIENT OPHTHALMOLOGY PLAN		Patient Label Here	
	Phase: Discharge Orders		
	PHYSICIA	N ORDERS	
	Place an "X" in the Orders column to designate orders of choice AN	ID an "x" in the specific orde	er detail box(es) where applicable.
ORDER	ORDER DETAILS		
	Admit/Discharge/Transfer		
	General		
	Discharge Patient (Outpatient)		
	Discharge Condition Discharge Condition: Stable Discharge Condition: Fair	Discharge Condition: Impr	roved
	Discharge Disposition Discharge To: Home Discharge To: Nursing Home - Intermediate Care Discharge To: TDC Lor any other isil	Discharge To: Home with Discharge To: Long term o	
	Discharge To: TDCJ or any other jail Discharge Instructions Discharge Instructions: Keep all follow-up appointments Take all medications as prescribed		
	Discharge Misc Education for Patient		
	Diet		
	Discharge Diet Diet: Resume pre-hospital diet Diet: ADA Diet: Low sodium (Less than 2 grams)	☐ Diet: Regular ☐ Diet: AHA ☐ Diet: Renal	
	Activity		
	Discharge Activity/Activity Precautions Activity: No straining or heavy lifting, Additional Instructions: No bending over at the waist Activity: As tolerated, Additional Instructions: Maintain facedown position Activity: Bed rest, Additional Instructions: Maintain facedown position Activity: No restrictions		
	Discharge Lifting Instructions Restricted Amount: 5 pounds, Restricted Until: 2 weeks Restricted Amount: 15 pounds, Restricted Until: 2 weeks	Restricted Amount: 10 pou	unds, Restricted Until: 2 weeks
	Discharge Bathing Instructions Bathing Instructions: Tub bath ONLY - NO showers, Additional Instructions: Do not get dressing wet. Bathing Instructions: DO NOT submerge surgical site NO scrubbing on incision Bathing Instructions: Bathe normally		
	Discharge Driving Instructions	Driving Instruction: No limitations	
	Line, Drain, and Wound Care		
	 Discharge Wound Care Instructions Wound Location: Left Eye, Care Instructions: Do Not remove dressing, Change Dressing: Do Not change dressing, Call MD For: Increased or discolored drainage Increased redness at wound site Increased swelling around wound site Wound site feels hot to Wound Location: Left Eye, Care Instructions: Leave open to air, Change Dressing: To be determined by healthcare provider, Call MD For: Increased or discolored drainage Increased redness at wound site Increased swelling around wound site Wound site f Wound Location: Right Eye, Care Instructions: Do Not remove dressing, Change Dressing: Do Not change dressing, Call MD For: Increased or discolored drainage Increased redness at wound site Increased swelling around wound site Wound site feels hot to Wound Location: Right Eye, Care Instructions: Leave open to air, Change Dressing: Do Not change dressing, Call MD For: Increased or discolored drainage Increased redness at wound site Increased swelling around wound site Wound site feels hot to Wound Location: Right Eye, Care Instructions: Leave open to air, Change Dressing: To be determined by healthcare provider, Call MD For: Increased or discolored drainage Increased redness at wound site Increased swelling around wound site Wound site Wound site 		
то		Scanned Powerchart	Scanned PharmScan
Order Tak	en by Signature:	Date	Time



UMC	Health	System

ADULT OUTPATIENT OPHTHALMOLOGY PLAN - Phase: Discharge Orders

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					
	Follow Up					
	Discharge Follow-up Appointment Follow Up With: Eye Clinic - Health Science Center, Follow Up In: 1 day Follow Up With: Eye Clinic - Health Science Center, Follow Up In: 1 week Follow Up With: Eye Clinic - Health Science Center, Follow Up In: 2 weeks Follow Up With: Texas Tech Eye Consultants, Follow Up In: 1 day Follow Up With: Texas Tech Eye Consultants, Follow Up In: 1 week Follow Up With: Texas Tech Eye Consultants, Follow Up In: 2 weeks Follow Up With: Texas Tech Eye Consultants, Follow Up In: 2 weeks					
	Discharge Call Clinic Call: Eye Clinic, Reason For Call: persistent pain not relieved by acetaminophen, nausea, vomiting, or other problems					
	Communication					
	Patient May Return to Work/School					
Пто	Read Back Scar	nned Powerchart	Scanned PharmScan			
	cen by Signature:	_ Date	Time			
Physician Signature:		Date	Time			

