CARD OPEN HEART POD1 - POD3 PLAN - Phase: Card Open Heart Post-Op Day 1

Patient Label Here

PHYSICIAN ORDERS			
Diagnosi	sis		
Weight	Allergies		
	Place an "X" in the Orders column to designate orders of choice AND	an "x" in the specific order o	letail box(es) where applicable.
ORDER	ORDER DETAILS		
	Patient Care		
	Vital Signs ☐ Per Unit Standards		
	Daily Weight		
	Ambulate Patient Ambulate in Room, POD1 Short Distances as tolerated. POD2 Ambulate TID. POD3 Ambulate QID and PRN ft.		
	CV Epicardial Pacing Protocol ***See Reference Text***		
	Discontinue Gastric Tube DC Nasogastric - NG, DC when Pt. extubated.		
	Discontinue Arterial Line D/C on POD #1 at 0600 if CI greater than 2 and Urine Output greater than 0.5 mL/kg/hr. Apply pressure x 10 minutes. Leave pressure dressing for 8 hrs and then DC.		
	Discontinue PA Catheter (Discontinue Swan Ganz) D/C on POD #1 at 0600 if CI greater than 2 and Urine Output greater than 0.5 mL/kg/hr. Apply pressure x 10 minutes. Leave pressure dressing for 8 hrs and then DC.		
	Wound Care by Bedside Nursing T;N, Located: Chest Incision, Chlorhexadine Gluconate, Island Dressing, Change q12h, Sterile Dressing. Do NOT Rinse. May discontinue dressing upon discharge from hospital. If negative pressure wound therapy being utilized, discontinue the dressing at disc		
	Wound Care by Bedside Nursing T;N, Located: Leg Incision, Chlorhexadine Gluconate, 4x4 Gauze, Hypafix Tape, Change q12h, Do NOT Rinse. When pressure bandage is removed, keep open to air if wound does not have drainage. May discontinue dressing upon discharge from hospital.		
	Use the following orders for VAD Patients		
	VAD Dressing Change Type ☐ LVAD Dressing Kit ☐ Other	☐ Traditional	
	LVAD Setting ONLY To be Changed by MCS Provider and LVAD Coordinators.		
	Communication		
	Notify Provider of VS Parameters ☐ SpO2 Less Than 92%		
	Dietary		
□то	☐ Read Back ☐	Scanned Powerchart [☐ Scanned PharmScan
Order Taken by Signature:		Date	Time
Physician Signature:		Date	Time

CARD OPEN HEART POD1 - POD3 PLAN - Phase: Card Open Heart Post-Op Day 1

Patient Label Here

	PHYSICIAN ORDERS			
	Place an "X" in the Orders column to designate orders of choice A	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			
	Oral Diet Clear Liquid Diet, post NG removal Clear Liquid Diet, Advance as tolerated to Regular Heart Healthy Diet Carbohydrate Controlled (1200 calories) Heart Healthy Diet Carbohydrate Controlled (1600 calories) Heart Healthy Diet Carbohydrate Controlled (2000 calories) Heart Healthy Diet	☐ Clear Liquid Diet, Advance as tolerated to Full Liquid ☐ Advance as tolerated to Heart Healthy		
	Dietary Supplements ☐ Supplement: Ensure Enlive (Complete), With All Meals	☐ Supplement: Glucerna, With All Meals		
	Medications Medication sentences are per dose. You will need to calculate a total daily dose if needed.			
	amiodarone □ 200 mg, PO, tab, BID	nai daily dose il fleeded.		
	rosuvastatin 10 mg, PO, tab, Nightly			
	Other Medications			
	potassium chloride ☐ 20 mEq, PO, tab sa, TID, PRN other To keep potassium level greater than or equal to 4 Mmol/L			
	cloNIDine (cloNIDine 0.1 mg/24 hr transdermal film, extended release) 0.1 mg/day, transdermal, adh patch, ONE TIME			
	cloNIDine (cloNIDine 0.2 mg/24 hr transdermal film, extended release) 0.2 mg/day, transdermal, adh patch, ONE TIME			
	cloNIDine (cloNIDine 0.3 mg/24 hr transdermal film, extended release) 0.3 mg/day, transdermal, adh patch, ONE TIME			
	Laboratory			
	CBC Routine, T;N, Every AM for 3 days Routine, T;N	☐ Routine, T;N, Every AM for 1 days		
	CBC with Differential ☐ Routine, T;N, Every AM for 1 days	☐ Routine, T;N		
	Basic Metabolic Panel (BMP) Routine, T;N, Every AM for 3 days Routine, T;N	Routine, T;N, Every AM for 1 days		
	Prothrombin Time with INR			
	Magnesium Level			
	Respiratory			
	Oxygen (O2) Therapy Via: Nasal cannula, Keep sats greater than: 92%, POD3 If O2 Sat gr	reater than 92% may wean to room air.		
	Respiratory Care Plan Guidelines			
□ то	☐ Read Back	☐ Scanned Powerchart ☐ Scanned PharmScan		
Order Take	n by Signature:	Date Time		
Physician Signature:		Date Time		

Version: 10 Effective on: 02/07/24

2 of 5

CARD OPEN HEART POD1 - POD3 PLAN - Phase: Card Open Heart Post-Op Day 1

Patient Label Here

_	PHYSICIAN ORDERS			
	Place an "X" in the Orders column to designate orders of choice AND an	"x" in the specific order deta	ail box(es) where applicable.	
ORDER				
	IS Instruct Instruct patient use of IS 10-15 times every 1 hour while awake 6am until 1	1pm		
□ то	☐ Read Back ☐ Sca	anned Powerchart	Scanned PharmScan	
Order Taken by Signature: Date Time		Time		
Physician Signature:		Date	Time	

Patient Label Here

CARD OPEN HEART POD1 - POD3 PLAN - Phase: Card Open Heart Post-Op Day 2

	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			
	Patient Care			
	Discontinue Urinary Catheter (Discontinue Foley)			
	Document Reason to Maintain Foley Below			
	Discontinue Chest Tube ☐ Located: Pleural Chest Tubes, DC if no air leak and get chest x-ray 1 hour after removal			
	Discontinue Chest Tube ☐ Located: Mediastinal Chest Tubes			
	Medications			
	Medication sentences are per dose. You will need to calculate a tot	al daily dose if needed.		
	bumetanide ☐ 1 mg, IVPush, inj, ONE TIME Give after removal of Foley			
	warfarin 1 mg, PO, tab, QPM 2.5 mg, PO, tab, QPM	2 mg, PO, tab, QPM 3 mg, PO, tab, QPM		
	4 mg, PO, tab, QPM	5 mg, PO, tab, QPM		
	☐ 6 mg, PO, tab, QPM ☐ 10 mg, PO, tab, QPM	7.5 mg, PO, tab, QPM		
	furosemide			
	20 mg, PO, tab, Daily	40 mg, PO, tab, Daily		
	potassium chloride 10 mEq, PO, tab sa, Daily 40 mEq, PO, tab sa, Daily	20 mEq, PO, tab sa, Daily		
	Select metoprolol tartrate 12.5 mg PO BID for LVEF less than 36%. Select metoprolol tartrate 25 mg PO BID for LVEF greater than or equal to 36%.			
	metoprolol (metoprolol tartrate) 12.5 mg, PO, tab, BID For LVEF less than 36%. HOLD for SBP less than 100 or HR less than 50 bpm. 25 mg, PO, tab, BID For LVEF greater than or equal to 36%. Hold for SBP less than 100 or HR less than 50 bpm.			
	Laboratory			
	CBC with Differential			
	Prothrombin Time with INR			
	Basic Metabolic Panel			
	Magnesium Level			
	Consults/Referrals			
	Social Services for Assessment and Eval Discharge Planning			
□ то	☐ Read Back	Scanned Powerchart	Scanned PharmScan	
Order Take	n by Signature:	Date	Time	
Physician S	Signature:	Date	Time	

CARD OPEN HEART POD1 - POD3 PLAN - Phase: Card Open Heart Post-Op Day 3

Patient Label Here

	PHYSICIAN ORI		
	Place an "X" in the Orders column to designate orders of choice AND an "	x" in the specific order deta	ail box(es) where applicable.
ORDER			
	Patient Care		
	Discontinue Pacemaker Wires		
	Discontinue Central Line		
	Convert IV to INT		
	Laboratory		
	CBC with Differential		
	Prothrombin Time with INR		
	Basic Metabolic Panel		
	Magnesium Level		
□ то	Read Back Scal	nned Powerchart	Scanned PharmScan
Order Take	ken by Signature:	_ Date	Time
Physician Signature:		Date	Time
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