Order Taken by Signature: Physician Signature:		Date Date					
Пто		Scanned Powerchart	Scanned PharmScan				
	□ Colonscopy, for Fecal Microbiota Transplant (FMT)	Scanned Powerchart	□ Scanned PharmScan				
ORDER	ORDER DETAILS Consults/Referrals Schedule Endoscopy Procedure						
	Place an "X" in the Orders column to designate orders of choice AND an "x" in the specific order detail box(es) where applicable.						
Weight	Allergies						
Diagnos	PHYSICIAN ORDERS Diagnosis						
OUTPATIENT FMT COLONOSCOPY PLAN - Phase: Clinic							
	UMC Health System	Pa	atient Label Here				



Physician Signature:		Date	Time		
Order Taken by Signature:			Time		
🗆 то	Read Back	Scanned Powerchart	Scanned PharmScan		
О ТО	Read Back	Scanned Powerchart	Scanned PharmScan		
	Patient Care Fecal Microbiota Transplant Algorithm Transplant Route: Colonoscopy Procedure Laboratory Fecal Specimen Processing				
ORDER	ORDER DETAILS				
	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.				
	DUVOIDA				
OUTPATIENT FMT COLONOSCOPY PLAN - Phase: Day PRIOR to Procedure					
UMC Health System		Pa	tient Label Here		



OUTPATIENT FMT COLONOSCOPY PLAN - Phase: Day of Procedure

	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				
	FMT Colonoscopy Intra-Procedure				
	Perform Fecal Microbiota Transplant (FMT (Perform Fecal Microbiota Transplant (FMT)) Transplan Route Colonoscopy				
	FMT Colonoscopy Post Procedure				
	Patient Position Uying on Right Side, Remain lying on right side for a minimum of 1 hour post procedure.				
	Patient Activity Bedrest, Bed Position: As Tolerated, Patient to be on bedrest 4 hours post fecal transplant.				
	Communication				
	Notify Nurse (DO NOT USE FOR MEDS) Patient to resume diet 8 hours post FMT.				
	Dietary				
	NPO Diet				
	Oral Diet				
	Medications Medication sentences are per dose. You will need to calculate a tot	al daily dose if needed.			
	Ioperamide ↓ 4 mg, PO, tab, q24h, x 1 dose, Administer second dose of loperamide 4 hours post FMT procedure. Administer second dose of loperamide 4 hours post FMT procedure.				
Пто	Read Back	Scanned Powerchart	Scanned PharmScan		
Order Taken by Signature:		Date	Time		
Physician Signature:		Date	Time		

