

Enhanced Recovery After Surgery (ERAS) Orders

URL:
<https://www.clinicalkey.com/#!/content/playContent/1-s2.0-S0002937818307634?returnurl=https:%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS0002937818307634%3Fshowall%3Dtrue&referrer=>

URL:
<https://insights.ovid.com/crossref?an=00000542-20170300-00014>

Cesarean Section ERAS Diet and Nutrition PreOP

URL: "\appt1pathways enhanced recovery after surgery.pdf"

URL: "\appt1for Antenatal and Preoperative care in Cesarean Delivery.pdf"

URL: "\appt1Guidelines for Preoperative Fasting.pdf"

NPO except clear liquids, start 8 hours prior to surgery

Diet effective now, Starting S
 NPO:
 Pre-Operative fasting options:
 Pre-op

Clear liquids can be continued until 2 hours prior to surgery

Diet effective now, Starting S
 Diet(s): Clear Liquids
 Other Options:
 Advance Diet as Tolerated?
 Liquid Consistency:
 Fluid Restriction:
 Foods to Avoid:
 Pre-op

Provide 1 bottle Ensure Pre-Surgery Clear to all non-diabetics at PAT visit. Instruct Patient to complete by 2 hours prior to surgery.

Routine, Once For 1 Occurrences, Pre-op

acetaminophen (OFIRMEV) IV

acetaminophen (OFIRMEV) IV

1,000 mg, intravenous, for 15 Minutes, once, For 1 Doses, Pre-op
 to be given upon arrival to OR
 IV acetaminophen (Ofirmev) is restricted to use only in OR, PACU, or ICU areas, and for patients that cannot tolerate oral, per tube, or rectal routes of administration. Do you attest that this restriction has been met?

General

Pre Anesthesia Testing Orders

The ambulatory orders in this section are specifically for Pre Anesthesia Testing. For additional PAT orders, please use 'Future Status' and 'Pre-Admission Testing Phase of Care'

Other Diagnostic Studies

ECG Pre/Post Op Routine, Ancillary Performed, Status: Future, Expires: S+365, Pre-Admission Testing

Pv carotid duplex Status: Future, Expires: S+365, Routine, Clinic Performed

Us vein mapping lower extremity Status: Future, Expires: S+365, Routine, Clinic Performed

Respiratory

Spirometry pre & post w/ bronchodilator Routine, Status: Future, Expires: S+365, Pre-Admission Testing Encounter type?

Body Plethysmographic lung volumes Routine, Status: Future, Expires: S+365, Pre-Admission Testing Encounter type?

Diffusion capacity Routine, Status: Future, Expires: S+365, Pre-Admission Testing Encounter type?

<input type="checkbox"/> Spirometry	Routine, Status: Future, Expires: S+365, Pre-Admission Testing Encounter type?
<input type="checkbox"/> Laboratory: Preoperative Testing Labs - All Facilities	
<input type="checkbox"/> COVID-19 qualitative PCR - Nasal Swab	Routine, Status: Future, Expires: S+365, Clinic Collect Specimen Source: Nasal Swab Is this for pre-procedure or non-PUI assessment? Yes Pre-Admission Testing
<input type="checkbox"/> CBC with platelet and differential	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Comprehensive metabolic panel	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Basic metabolic panel	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Prothrombin time with INR	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Partial thromboplastin time	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Hepatic function panel	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Platelet function analysis	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Hemoglobin A1c	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Type and screen	
<input type="checkbox"/> Type and screen	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> ABO and Rh confirmation	Once, Blood Bank Confirmation
<input type="checkbox"/> hCG qualitative, serum screen	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> POC pregnancy, urine	Routine, Point Of Care, Pre-Admission Testing
<input type="checkbox"/> Urinalysis, automated with microscopy	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Laboratory: Additional Labs - HMWB, HMSJ, HMSTJ, HMTW	
<input type="checkbox"/> Urinalysis screen and microscopy, with reflex to culture	Routine, Status: Future, Expires: S+365, Clinic Collect Specimen Source: Urine Specimen Site: Pre-Admission Testing
<input type="checkbox"/> CBC hemogram	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> HIV 1, 2 antibody	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Syphilis total antibody	Routine, Status: Future, Expires: S+365, Clinic Collect
<input type="checkbox"/> Hepatitis acute panel	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Thromboelastograph	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Vitamin D 25 hydroxy level	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> MRSA screen culture	Routine, Status: Future, Expires: S+365, Clinic Collect, Nares Quest Specimen Source: Pre-Admission Testing
<input type="checkbox"/> T3	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> T4	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Thyroid stimulating hormone	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Prostate specific antigen	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Laboratory: Additional Labs - HMSL, HMW	

<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Routine, Status: Future, Expires: S+365, Clinic Collect Specimen Source: Urine Specimen Site: Pre-Admission Testing
<input type="checkbox"/>	CBC hemogram	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Rapid HIV 1 & 2	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Syphilis total antibody	Routine, Status: Future, Expires: S+365, Clinic Collect
<input type="checkbox"/>	Hepatitis acute panel	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Thromboelastograph	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Vitamin D 25 hydroxy level	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	MRSA screen culture	Routine, Status: Future, Expires: S+365, Clinic Collect, Nares Quest Specimen Source: Pre-Admission Testing
<input type="checkbox"/>	T3	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	T4	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Thyroid stimulating hormone	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Prostate specific antigen	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Laboratory: Additional Labs - HMM	
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Routine, Status: Future, Expires: S+365, Clinic Collect Specimen Source: Urine Specimen Site: Pre-Admission Testing
<input type="checkbox"/>	CBC hemogram	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	HIV Ag/Ab combination	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Syphilis total antibody	Routine, Status: Future, Expires: S+365, Clinic Collect
<input type="checkbox"/>	Hepatitis acute panel	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Thromboelastograph	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Vitamin D 25 hydroxy level	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	MRSA screen culture	Routine, Status: Future, Expires: S+365, Clinic Collect, Nares Quest Specimen Source: Pre-Admission Testing
<input type="checkbox"/>	T3	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	T4	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Thyroid stimulating hormone	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Prostate specific antigen	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Laboratory: Additional for Bariatric patients	
<input type="checkbox"/>	Lipid panel	Routine, Status: Future, Expires: S+365, Clinic Collect Has the patient been fasting for 8 hours or more? Pre-Admission Testing
<input type="checkbox"/>	hCG qualitative, serum screen	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Total iron binding capacity	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing

<input type="checkbox"/> T4, free	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Thyroid stimulating hormone	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Hemoglobin A1c	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Parathyroid hormone	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> CBC with platelet and differential	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Prothrombin time with INR	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Partial thromboplastin time, activated	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Vitamin A level, plasma or serum	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Vitamin B12 level	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Vitamin D 25 hydroxy level	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Copper level, serum	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Folate level	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Vitamin B1 level, whole blood	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/> Zinc level, serum	Routine, Status: Future, Expires: S+365, Clinic Collect, Pre-Admission Testing

Case Request (Single Response)

<input type="checkbox"/> DELIVERY, CESAREAN	Panel 1 DELIVERY, CESAREAN, Scheduling/ADT, Scheduling/ADT
<input type="checkbox"/> C-SECTION + BILATERAL TUBAL LIGATION	Panel 1 C-SECTION + BILATERAL TUBAL LIGATION, Scheduling/ADT, Scheduling/ADT
<input type="checkbox"/> Case request operating room	Scheduling/ADT, Scheduling/ADT

Inpatient only procedure (Single Response) (Selection Required)

<input type="checkbox"/> Admit to L&D	Admitting Physician: Bed request comments: Pre-op
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Precautions

<input type="checkbox"/> Aspiration precautions	Pre-op
<input type="checkbox"/> Fall precautions	Increased observation level needed: Pre-op
<input type="checkbox"/> Latex precautions	Pre-op
<input type="checkbox"/> Seizure precautions	Increased observation level needed: Pre-op

Nursing

Vital signs

<input checked="" type="checkbox"/> Vital signs - T/P/R/BP	Routine, Per unit protocol, Pre-op
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Activity

<input type="checkbox"/> Strict bed rest	Routine, Until discontinued, Starting S, Pre-op
<input checked="" type="checkbox"/> Bed rest with bathroom privileges	Routine, Until discontinued, Starting S Bathroom Privileges: Pre-op

<input type="checkbox"/> Ambulate with assistance	Routine, 3 times daily Specify: with assistance Pre-op
<input type="checkbox"/> Activity as tolerated	Routine, Until discontinued, Starting S Specify: Activity as tolerated Pre-op

Nursing care

<input checked="" type="checkbox"/> Monitor fetal heart tones	Routine, Once Type: Intermittent With non stress test. Obtain 30 min fetal heart tracing. If FHR non-reassuring, continue monitoring and notify physician., Pre-op
<input checked="" type="checkbox"/> Fetal nonstress test	Routine, Once, Pre-op
<input checked="" type="checkbox"/> Insert and maintain Foley	
<input checked="" type="checkbox"/> Insert Foley catheter	Routine, Once Type: Size: Urinometer needed: May insert in OR or after regional anesthesia effective, Pre-op
<input checked="" type="checkbox"/> Foley Catheter Care	Routine, Until discontinued, Starting S Orders: Maintain Pre-op
<input checked="" type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, Pre-op
<input checked="" type="checkbox"/> Place antiembolic stockings	Routine, Until discontinued, Starting S, Pre-op

Diet

<input checked="" type="checkbox"/> NPO	Diet effective now, Starting S NPO: Except Sips of clear liquids Pre-Operative fasting options: Clear Liquid intake is acceptable up to two hours before surgery, Pre-op
<input type="checkbox"/> Diet - Clear Liquids	Diet effective now, Starting S Diet(s): Clear Liquids Other Options: Advance Diet as Tolerated? Liquid Consistency: Fluid Restriction: Foods to Avoid: Clear Liquid intake is acceptable up to two hours before surgery, L&D Pre-Delivery

Consent

<input type="checkbox"/> Complete consent for Primary Cesarean Section	Routine, Once Procedure: Primary Cesarean Section Diagnosis/Condition: Physician: Risks, benefits, and alternatives (as outlined by the Texas Medical Disclosure Panel, as appears on Houston Methodist Medical/Surgical Consent forms) were discussed with patient/surrogate? Consent for Primary Cesarean Section, Pre-op
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<input type="checkbox"/> Complete consent for Primary Cesarean Section with Bilateral Tubal Ligation	Routine, Once Procedure(s): Diagnosis/Condition: Physician: Risks, benefits, and alternatives (as outlined by the Texas Medical Disclosure Panel, as appears on Houston Methodist Medical/Surgical Consent forms) were discussed with patient/surrogate? Consent for Primary Cesarean Section with Bilateral Tubal Ligation, Pre-op
<input type="checkbox"/> Complete consent for Repeat Cesarean Section	Routine, Once Procedure: Repeat Cesarean Section Diagnosis/Condition: Physician: Risks, benefits, and alternatives (as outlined by the Texas Medical Disclosure Panel, as appears on Houston Methodist Medical/Surgical Consent forms) were discussed with patient/surrogate? Consent for Repeat Cesarean Section, Pre-op
<input type="checkbox"/> Complete consent for Repeat Cesarean Section with Bilateral Tubal Ligation	Routine, Once Procedure: Repeat Cesarean Section with Bilateral Tubal Ligation Diagnosis/Condition: Risks, benefits, and alternatives (as outlined by the Texas Medical Disclosure Panel, as appears on Houston Methodist Medical/Surgical Consent forms) were discussed with patient/surrogate? Consent for Repeat Cesarean Section with Bilateral Tubal Ligation, Pre-op
<input type="checkbox"/> Complete consent for Repeat Cesarean Section with Bilateral Salpingectomy	Routine, Once Procedure: Repeat Cesarean Section with Bilateral Salpingectomy Diagnosis/Condition: Physician: Risks, benefits, and alternatives (as outlined by the Texas Medical Disclosure Panel, as appears on Houston Methodist Medical/Surgical Consent forms) were discussed with patient/surrogate? Consent for Repeat Cesarean Section with Bilateral Salpingectomy, Pre-op

IV Fluids

IV Fluids

[X] lactated ringer's bolus and infusion	"And" Linked Panel
<input checked="" type="checkbox"/> lactated Ringer's bolus	1,000 mL, intravenous, for 30 Minutes, once PRN, If patient requests epidural - for epidural prehydration, Pre-op Notify Anesthesiologist immediately if patient requests Epidural and begin pre-epidural hydration
<input checked="" type="checkbox"/> lactated Ringer's infusion	125 mL/hr, intravenous, continuous, Pre-op

Insert and Maintain IV

[X] Initiate and maintain IV	
<input checked="" type="checkbox"/> Insert peripheral IV	Routine, Once, Pre-op
<input checked="" type="checkbox"/> sodium chloride 0.9 % flush	10 mL, intravenous, every 12 hours scheduled, Pre-op
<input checked="" type="checkbox"/> sodium chloride 0.9 % flush	10 mL, intravenous, PRN, line care, Pre-op

Local Anesthetic with Venipuncture

<input type="checkbox"/> buffered lidocaine 1% injection	0.15 mL, intravenous, once, For 1 Doses, Pre-op
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Local Anesthetic with Venipuncture

<input type="checkbox"/> lidocaine PF 1% (XYLOCAINE) injection	0.15 mL, injection, once, For 1 Doses, Pre-op
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Medications

PreOp Antibiotics: For Patients LESS than or EQUAL to 120 kg **Give 60 minutes PRIOR to C-Section** (Single Response)

<input checked="" type="checkbox"/> (X) cefazolin (ANCEF) IV - Give within 60 minutes prior to C-Section	2 g, intravenous, once, For 1 Doses, Pre-op Give within 60 minutes prior to C-Section Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> () If Penicillin Allergic: clindamycin (CLEOCIN) IV and gentamicin (GARAMYCIN) IV	"And" Linked Panel
<input type="checkbox"/> [] clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, once, For 1 Doses, Pre-op Nurse to send medication(s) to operating room - To be administered by Anesthesiologist. To be given 1 hour prior to skin incision. Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> [] If Penicillin Allergic - gentamicin (GARAMYCIN) IVPB - Give within 60 minutes prior to C-Section	5 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses, Pre-op Nurse to send medication(s) to operating room - To be administered by Anesthesiologist. To be given 1 hour prior to skin incision. Reason for Therapy: Surgical Prophylaxis

PreOp Antibiotics: For Patients GREATER than 120 kg **Give 60 minutes PRIOR to C-Section** (Single Response)

<input checked="" type="checkbox"/> (X) cefazolin (ANCEF) IV - Give within 60 minutes prior to C-Section	3 g, intravenous, once, For 1 Doses, Pre-op Give within 60 minutes prior to C-Section Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> () If Penicillin Allergic: clindamycin (CLEOCIN) IV and gentamicin (GARAMYCIN) IV	"And" Linked Panel
<input type="checkbox"/> [] clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, once, For 1 Doses, Pre-op Nurse to send medication(s) to operating room - To be administered by Anesthesiologist. To be given 1 hour prior to skin incision. Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> [] If Penicillin Allergic - gentamicin (GARAMYCIN) IVPB - Give within 60 minutes prior to C-Section	5 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses, Pre-op Nurse to send medication(s) to operating room - To be administered by Anesthesiologist. To be given 1 hour prior to skin incision. Reason for Therapy: Surgical Prophylaxis

Antibiotics (Single Response)

Does your patient have a penicillin allergy?

() No (Single Response)

Please select the appropriate regimen

() Prophylaxis Regimen for GBS - penicillin G IVPB Loading and Maintenance Dose

"Followed by" Linked Panel

[] Loading Dose - penicillin G (POTASSIUM) IV
5 Million Units, intravenous, for 30 Minutes, once, For 1 Doses, L&D Pre-Delivery
If GBS positive
Reason for Therapy: Medical Prophylaxis

[] Maintenance Dose - penicillin G (POTASSIUM) IV
2.5 Million Units, intravenous, for 30 Minutes, every 4 hours, Starting H+4 Hours, L&D Pre-Delivery
If GBS positive
Reason for Therapy: Medical Prophylaxis

() Alternative Regimen for GBS - ampicillin IVPB Loading and Maintenance Dose

"Followed by" Linked Panel

[] Loading Dose - ampicillin IV
2 g, intravenous, for 30 Minutes, once, For 1 Doses, L&D Pre-Delivery
If GBS positive
Reason for Therapy: Medical Prophylaxis

[] Maintenance Dose - ampicillin IV
1 g, intravenous, for 30 Minutes, every 6 hours, Starting H+6 Hours, L&D Pre-Delivery
If GBS positive
Reason for Therapy: Medical Prophylaxis

() Yes (Single Response)

Is your patient LOW Risk or HIGH Risk for Anaphylaxis?

<input type="checkbox"/> LOW Risk	"Followed by" Linked Panel
Recommended for patients NOT high risk for anaphylaxis	
<input type="checkbox"/> Loading Dose - cefazolin (ANCEF) IV	2,000 mg, intravenous, once, For 1 Doses Type of Therapy: New Anti-Infective Order Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/> Maintenance Dose - cefazolin (ANCEF) IV	1,000 mg, intravenous, every 8 hours Through delivery then discontinue. Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/> HIGH Risk (Single Response)	
<input type="checkbox"/> clindamycin (CLEOCIN) IV Loading and Maintenance Doses	"Followed by" Linked Panel
Recommended ONLY for patients with high risk for penicillin anaphylaxis that are culture isolate sensitive to Clindamycin.	
<input type="checkbox"/> Loading Dose - clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, once, For 1 Doses Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/> Maintenance Dose - clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, every 8 hours Through delivery then discontinue. Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/> If clindamycin-resistant GBS - vancomycin (VANCOCIN) 20 mg/kg IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOCIN) IV	20 mg/kg, intravenous, every 8 hours, L&D Pre-Delivery Reason for Therapy: Reason for Therapy: Medical Prophylaxis
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:

Pre-Anesthesia Medications

<input type="checkbox"/> famotidine (PEPCID) injection	20 mg, intravenous, once PRN, Decrease gastric acidity, Pre-op
<input type="checkbox"/> sodium citrate-citric acid (BICITRA) solution	30 mL, oral, once PRN, Decrease gastric acidity, Pre-op
<input type="checkbox"/> metoclopramide (REGLAN) injection	10 mg, intravenous, once PRN, nausea, Decrease gastric acidity, Pre-op

Labs

COVID-19 Qualitative PCR

<input type="checkbox"/> COVID-19 qualitative PCR - Nasal Swab	STAT For 1 Occurrences Specimen Source: Nasal Swab Is this for pre-procedure or non-PUI assessment? Yes Pre-op
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Labs HMWB

<input type="checkbox"/> Bedside glucose	Routine, Once For 1 Occurrences, Pre-op
<input type="checkbox"/> OB Panel	
<input type="checkbox"/> CBC with differential	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/> Basic metabolic panel	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/> HIV 1, 2 antibody	Once For 1 Occurrences, Pre-op
<input type="checkbox"/> Hepatitis B surface antigen	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/> Syphilis treponema screen with RPR confirmation (reverse algorithm)	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/> Type and screen, obstetrical patient	
<input type="checkbox"/> Type and screen, obstetrical patient	Once, Pre-op
<input type="checkbox"/> ABO and Rh confirmation	Once, Blood Bank Confirmation
<input type="checkbox"/> Urine dipstick	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/> Urinalysis screen and microscopy, with reflex to culture	STAT For 1 Occurrences Specimen Source: Urine Specimen Site: Pre-op

No prenatal records

<input type="checkbox"/>	Rubella antibody, IgG	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/>	Urine drugs of abuse screen	Once, Pre-op
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, Pre-op
<input type="checkbox"/>	Comprehensive metabolic panel	Once, Pre-op
<input type="checkbox"/>	Prothrombin time with INR	Once, Pre-op
<input type="checkbox"/>	Partial thromboplastin time	Once, Pre-op
<input type="checkbox"/>	Fibrinogen	Once, Pre-op
<input type="checkbox"/>	Uric acid	Once, Pre-op
<input type="checkbox"/>	LDH	Once, Pre-op
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, Pre-op
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, Pre-op

Labs HMSL, HMW

<input type="checkbox"/>	Bedside glucose	Routine, Once, Pre-op
<input type="checkbox"/>	OB Panel	
<input type="checkbox"/>	CBC with differential	Once, Pre-op
<input type="checkbox"/>	Basic metabolic panel	Once, Pre-op
<input type="checkbox"/>	Hepatitis B surface antigen	Once, Pre-op
<input type="checkbox"/>	Rapid HIV 1 & 2	Once, Pre-op
<input type="checkbox"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once, Pre-op
<input type="checkbox"/>	Type and screen, obstetrical patient	
<input type="checkbox"/>	Type and screen, obstetrical patient	Once, Pre-op
<input type="checkbox"/>	ABO and Rh confirmation	Once, Blood Bank Confirmation
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: Pre-op

<input type="checkbox"/>	No prenatal records	
<input type="checkbox"/>	Rubella antibody, IgG	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/>	Urine drugs of abuse screen	Once, Pre-op
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, Pre-op
<input type="checkbox"/>	Comprehensive metabolic panel	Once, Pre-op
<input type="checkbox"/>	Prothrombin time with INR	Once, Pre-op
<input type="checkbox"/>	Partial thromboplastin time	Once, Pre-op
<input type="checkbox"/>	Fibrinogen	Once, Pre-op
<input type="checkbox"/>	Uric acid	Once, Pre-op
<input type="checkbox"/>	LDH	Once, Pre-op
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, Pre-op
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, Pre-op

Labs HMSJ

<input type="checkbox"/>	Bedside glucose	Routine, Once, Pre-op
<input type="checkbox"/>	OB Panel	
<input type="checkbox"/>	CBC with differential	Once, Pre-op
<input type="checkbox"/>	Basic metabolic panel	Once, Pre-op
<input type="checkbox"/>	Hepatitis B surface antigen	Once, Pre-op
<input type="checkbox"/>	HIV 1, 2 antibody	Once, Pre-op
<input type="checkbox"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once, L&D Labs
<input type="checkbox"/>	Type and screen, obstetrical patient	
<input type="checkbox"/>	Type and screen, obstetrical patient	Once, Pre-op
<input type="checkbox"/>	ABO and Rh confirmation	Once, Blood Bank Confirmation

<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: Pre-op
<input type="checkbox"/>	No prenatal records	
<input type="checkbox"/>	Rubella antibody, IgG	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/>	Urine drugs of abuse screen	Once, Pre-op
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, Pre-op
<input type="checkbox"/>	Comprehensive metabolic panel	Once, Pre-op
<input type="checkbox"/>	Prothrombin time with INR	Once, Pre-op
<input type="checkbox"/>	Partial thromboplastin time	Once, Pre-op
<input type="checkbox"/>	Fibrinogen	Once, Pre-op
<input type="checkbox"/>	Uric acid	Once, Pre-op
<input type="checkbox"/>	LDH	Once, Pre-op
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, Pre-op
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, Pre-op

Labs HMCL

<input type="checkbox"/>	Bedside glucose	Routine, Once, Pre-op
<input type="checkbox"/>	OB Panel	
<input type="checkbox"/>	CBC with differential	Once, Pre-op
<input type="checkbox"/>	Basic metabolic panel	Once, Pre-op
<input type="checkbox"/>	HIV 1, 2 antibody	Once, Pre-op
<input type="checkbox"/>	Hepatitis B surface antigen	Once, Pre-op
<input type="checkbox"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once, Pre-op
<input type="checkbox"/>	Type and screen, obstetrical patient	
<input type="checkbox"/>	Type and screen, obstetrical patient	Once, Pre-op
<input type="checkbox"/>	ABO and Rh confirmation	Once, Blood Bank Confirmation
<input type="checkbox"/>	Urine dipstick	Once, Pre-op
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: Pre-op
<input type="checkbox"/>	No prenatal records	
<input type="checkbox"/>	Rubella antibody, IgG	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/>	Urine drugs of abuse screen	Once, Pre-op
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, Pre-op
<input type="checkbox"/>	Comprehensive metabolic panel	Once, Pre-op
<input type="checkbox"/>	Prothrombin time with INR	Once, Pre-op
<input type="checkbox"/>	Partial thromboplastin time	Once, Pre-op
<input type="checkbox"/>	Fibrinogen	Once, Pre-op
<input type="checkbox"/>	Uric acid	Once, Pre-op
<input type="checkbox"/>	LDH	Once, Pre-op
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, Pre-op
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, Pre-op

Labs HMTW

<input type="checkbox"/>	Bedside glucose	Routine, Once, Pre-op
<input type="checkbox"/>	OB Panel	
<input type="checkbox"/>	CBC with differential	Once, Pre-op
<input type="checkbox"/>	Basic metabolic panel	Once, Pre-op
<input type="checkbox"/>	Hepatitis B surface antigen	Once, Pre-op
<input type="checkbox"/>	HIV 1, 2 antibody	Once, Pre-op

<input type="checkbox"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once, Pre-op
<input type="checkbox"/>	Type and screen, obstetrical patient	
<input type="checkbox"/>	Type and screen, obstetrical patient	Once, Pre-op
<input type="checkbox"/>	ABO and Rh confirmation	Once, Blood Bank Confirmation
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Once Specimen Source: Urine Specimen Site: Pre-op
<input type="checkbox"/>	No prenatal records	
<input type="checkbox"/>	Rubella antibody, IgG	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/>	Urine drugs of abuse screen	Once, Pre-op
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, Pre-op
<input type="checkbox"/>	Comprehensive metabolic panel	Once, Pre-op
<input type="checkbox"/>	Prothrombin time with INR	Once, Pre-op
<input type="checkbox"/>	Partial thromboplastin time	Once, Pre-op
<input type="checkbox"/>	Fibrinogen	Once, Pre-op
<input type="checkbox"/>	Uric acid	Once, Pre-op
<input type="checkbox"/>	LDH	Once, Pre-op
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, Pre-op
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, Pre-op

Labs HMM

<input type="checkbox"/>	Bedside glucose	Routine, Once For 1 Occurrences, Pre-op
<input type="checkbox"/>	OB Panel	
<input type="checkbox"/>	CBC with differential	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/>	Basic metabolic panel	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/>	Hepatitis B surface antigen	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/>	HIV Ag/Ab combination	Once For 1 Occurrences, Pre-op
<input type="checkbox"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Once
<input type="checkbox"/>	Type and screen, obstetrical patient	
<input type="checkbox"/>	Type and screen, obstetrical patient	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/>	ABO and Rh confirmation	Once, Blood Bank Confirmation
<input type="checkbox"/>	Urine dipstick	Once, Pre-op
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	STAT For 1 Occurrences Specimen Source: Urine Specimen Site: Pre-op
<input type="checkbox"/>	No prenatal records	
<input type="checkbox"/>	Rubella antibody, IgG	STAT For 1 Occurrences, Pre-op
<input type="checkbox"/>	Urine drugs of abuse screen	Once, Pre-op
<input type="checkbox"/>	Pre-Eclamptic Lab Panel	
<input type="checkbox"/>	CBC with differential	Once, Pre-op
<input type="checkbox"/>	Comprehensive metabolic panel	Once, Pre-op
<input type="checkbox"/>	Prothrombin time with INR	Once, Pre-op
<input type="checkbox"/>	Partial thromboplastin time	Once, Pre-op
<input type="checkbox"/>	Fibrinogen	Once, Pre-op
<input type="checkbox"/>	Uric acid	Once, Pre-op
<input type="checkbox"/>	LDH	Once, Pre-op
<input type="checkbox"/>	Urine Protein and Creatinine	
<input type="checkbox"/>	Creatinine level, urine, random	Once For 1 Occurrences, Pre-op
<input type="checkbox"/>	Protein, urine, random	Once For 1 Occurrences, Pre-op

24 Hour urine

<input type="checkbox"/>	24 Hour Urine	
<input type="checkbox"/>	Creatinine clearance, urine, 24 hour	Once, Pre-op

Protein, urine, 24 hour

Once, Pre-op

Consults

For Physician Consult orders use sidebar

Physician Consults

<input type="checkbox"/> Consult Anesthesiology	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated? L&D Pre-Delivery
<input type="checkbox"/> Consult Maternal and Fetal Medicine	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated? L&D Pre-Delivery
<input type="checkbox"/> Consult Neonatology	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated? L&D Pre-Delivery

Ancillary consults

<input type="checkbox"/> Consult to PT eval and treat	Reasons for referral to Physical Therapy (mark all applicable): Are there any restrictions for positioning or mobility? Please provide safe ranges for HR, BP, O2 saturation(if values are very abnormal): Weight Bearing Status: L&D Pre-Delivery
<input type="checkbox"/> Consult to Social Work	Reason for Consult: L&D Pre-Delivery
<input type="checkbox"/> Consult to Spiritual Care	Reason for consult? L&D Pre-Delivery