SUMMIT MEDICAL CENTER PREADMISSION/DAY OF SURGERY ORDERS

Pt Name	Pt DOB	Date/Time Surgery
Signature of Surgeon:	Date/Time	

PREADMISSION TESTING ORDERS

☐ **PATIN PERSON** ☐ **PAT BY PHONE**

MEDICAL HISTORY

- ☐ CAD
- ☐ PROBLEM WITH ANESTHESIA
- ☐ OSA
- ☐ DIABETES – POORLY CONTROLLED
- ☐ HTN, > 2 MEDS
- ☐ COPD – ON O^2
- ☐ ESRD
- ☐ MORBID OBESITY
- ☐ Hx OF MRSA
- ☐ REQUESTS TO MEET IN PERSON WITH ANESTHESIOLOGIST

LAB

- ☐ CBC, NOW
- ☐ CBCD, NOW
- ☐ BMP, NOW
- ☐ CMP, NOW
- ☐ PT/PTT, NOW
- ☐ LIPID PANEL, NOW
- ☐ CROSSMATCH, NOW
- ☐ TYPE AND SCREEN, NOW
- ☐ ANTIBODY SCREEN, NOW
- ☐ SERUM HCG, NOW
- ☐ URINE PREGNANCY, NOW
- ☐ HGBAIC, NOW
- ☐ MRSA SWAB (HISTORY OF MRSA)
- ☐ MRSA SWAB FOR IMPLANTS PER PROTOCOL
- ☐ UA, CULTURE IF INDICATED, NOW

OTHER LABS

- ☐ _____

RADIOLOGY EXAMS

- ☐ XR CHEST 1 VIEW, REASON FOR EXAM = _____
- ☐ XR CHEST 2 VIEWS, REASON FOR EXAM = _____

TYPE OF CONTRAST FOR CT (IF NEEDED)

- ☐ IV
- ☐ PO

TYPE OF CT EXAM

- ☐ CT CHEST WITH CONTRAST, REASON FOR EXAM _____
- ☐ CT ABDOMEN/PELVIS WITH CONTRAST, REASON FOR EXAM _____
- ☐ CT ABDOMEN W/WO CONTRAST, REASON FOR EXAM _____
- ☐ CT ABDOMEN WITHOUT CONTRAST REASON FOR EXAM _____

☐ **ULTRASOUND**

- ☐ US ABDOMEN LIMITED, REASON FOR EXAM = _____
- ☐ US PELVIS NON – OB, LIMITED, REASON FOR EXAM _____

MRI

- ☐ _____

OTHER

- ☐ **EKG, ONCE, Reason for exam** _____
- ☐ _____

DAY OF SURGERY ORDERS

- ☐ **OUTPATIENT STATUS (SOP)**
- ☐ **INPATIENT STATUS**
  - ☐ ANTICIPATED LOS = LESS THAN TWO MIDNIGHTS
  - ☐ ANTICIPATED LOS = MORE THAN TWO MIDNIGHTS
- ☐ CODE STATUS, FULL CODE

PATIENT CARE ORDERS

- ☐ VITAL SIGNS UPON ADMISSION
- ☐ ACTIVITY AS TOLERATED
- ☐ INSERT LARGE BORE IV
- ☐ OBTAIN CONSENT FOR SURGERY, IF NOT ALREADY COMPLETED
- ☐ NPO _____
- ☐ CLEAR LIQUID DIET _____

ANTIBIOTICS AND IV FLUIDS

- ☐ **HOLD ABX UNTIL AFTER CULTURES**
- ☐ ANCEF 1GM IVPB, NOW PREOP
- ☐ ANCEF 2GM IVPB, NOW PREOP
- ☐ CLINDAMYCIN 600MG IVPB, NOW PREOP
- ☐ CLINDAMYCIN 900MG IVPB, NOW PREOP
- ☐ VANCOMYCIN 1GM IVPB, NOW PREOP **(IF ALLERGIC TO PENICILLIN)**

START NS AT: ☐ 125ML/HOUR ☐ 75ML/HOUR

- ☐ START LR AT 125ML/HOUR
- ☐ START D5LR AT 125ML/HOUR

LABS

- ☐ CBC, NOW
- ☐ BMP, NOW
- ☐ PT/PTT NOW
- ☐ SERUM HCG NOW
- ☐ URINE PREGNANCY, NOW

OTHER LABS

- ☐ _____

RADIOLOGY EXAMS

- ☐ XR CHEST 1 VIEW NOW, REASON FOR EXAM = _____
- ☐ XR CHEST 2 VIEWS NOW, REASON FOR EXAM = _____

OTHER DIAGNOSTICS

- ☐ _____

OTHER

- ☐ _____

SUMMIT MEDICAL CENTER
Elevating the Standards of HealthCare

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PATIENT STICKER