BAPTIST MEMORIAL HOSPITAL – GOLDEN TRIANGLE

PHYSICIAN'S ORDERS

ORD

ALLERGIES: See Master Allergy Sheet

ORDERED Date	ORDERED Time	POST OPERATIVE ORDERS FOR CAROTID ENDARTERECTOMY: Thomas Vinson, MD	TIME ORDER NOTED
		1. Have available immediately postoperatively:	
		a. Nitroprusside (Nipride) infusion: Nitroprusside 50 mg D5W 250 ml, shielded appropriately, on IV pump and ready to start.	
		b. Phenylephrine (Neo-Synephrine) infusion: Phenylephrine 50 mg in D5W 500 ml on IV pump and ready to start.	
		2. Maintain blood pressure:	
		Systolic _____ ± _____	
		Diastolic _____ ± _____	
		Mean _____ ± _____	
		Using Nipride and Neo-Synephrine infusions PRN to maintain parameters.	
		3. NPO until reactive, then ice chips only.	
		4. Continued observation of neck for bleeding or possible respiratory distress.	
		5. Routine arterial line maintenance with heparinized saline.	
		6. Morphine Sulfate _____ mg. IM every 4 hours PRN for pain.	
		7. Prochlorperazine (Compazine) 10 mg IM one time PRN for nausea.	
		8. IV fluids _____ infuse ____ ml / hour.	
		9. DVT Prophylaxis: SCDs post op	
		10. Routine ICU orders.	
		Physician Signature: Date: Time:	

▼ Addressograph / Patient Label ▼

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POST OPERATIVE ORDERS CAROTID ENDARTERECTOMY

Form # 18-214.76 (04/08)

Original – Chart / Canary – Pharmacy