



PHYSICIAN'S ORDERS

ALLERGIES: See Master Allergy Sheet

ORDERED		PHYSICIAN AND SURGEONS CLINIC – ROUTINE C-SECTION ORDERS – Page 1 of 2	TIME ORDER NOTED
Date	Time		
		Delivery Date: _____ Time: _____	
		<input type="checkbox"/> To Recovery Room <input type="checkbox"/> May release from RR when discharge criteria met	
		<input type="checkbox"/> BP, pulse, respirations every 15 to 30 minutes until stable, then every 1-4 hours x 48 hrs, then TID	
		<input type="checkbox"/> 5 deep breaths and turn side to side every hour x 12 while awake	
		<input type="checkbox"/> Record intake and output every 8 hrs, discontinue I & O when soft or regular diet is ordered	
		<input type="checkbox"/> Full liquid diet when reactive	
		<input type="checkbox"/> Catheter to bedside drainage, remove at _____	
		<input type="checkbox"/> BRP with help when anesthesia is worn off	
		<input type="checkbox"/> Begin ambulation at _____, then every 4 hours x 3, then 8 times daily	
		<input type="checkbox"/> If unable to void and distended, cath x 1, notify physician if second cath required	
		<input type="checkbox"/> IVF: Alternate D5 _____ and _____ 1000 ml every _____ hours, Add _____ Pitocin (Oxytocin) to the first _____ bags	
		<input type="checkbox"/> Antibiotic: _____ x _____ doses, begin at _____	
		<input type="checkbox"/> Meperidine (Demerol) _____ mg IM every 3-4 hours PRN pain (order specific amount)	
		<input type="checkbox"/> PCA <input type="checkbox"/> Meperidine (Demerol) <input type="checkbox"/> Morphine <input type="checkbox"/> Hydromorphone (Dilaudid)	
		<input type="checkbox"/> Promethazine (Phenergan) 25 mg IM every 3-4 hours PRN nausea OR	
		<input type="checkbox"/> Promethazine (Phenergan) 25 mg IV every 6 hours PRN nausea	
		<input type="checkbox"/> Methylergonovine maleate (Methergine) tabs 0.2 mg PO TID x 3 doses, do not administer if diastolic BP is >90	
		<input type="checkbox"/> Senna (Senokot) 1 tsp in ½ glass of milk at hour of sleep x 1. If delivers prior to 7:00am, give on delivery date. If delivers after 7:00am, give on first postpartal day	
		<input type="checkbox"/> AFTER PCA medication is discontinued, give <input type="checkbox"/> Acetaminophen / Hydrocodone (Lortab) 5 mg one tab PO every 4 hours PRN lesser pain (1-4 on scale of 1-10)	
		<input type="checkbox"/> Acetaminophen / Hydrocodone (Lortab) 5 mg two tabs PO every 4 hours PRN severe pain (5-10 on scale of 1-10)	
		<input type="checkbox"/> Acetaminophen / Hydrocodone (Lortab) 7.5 mg one tab PO every 4 hours PRN lesser pain (1-4 on scale of 1-10)	
		<input type="checkbox"/> Acetaminophen / Hydrocodone (Lortab) 7.5 mg two tabs PO every 4 hours PRN severe pain (5-10 on scale of 1-10)	
		Physician Signature: _____ Date/Time: _____	

▼ Addressograph / Patient Label ▼



**PHYSICIAN AND SURGEONS CLINIC
ROUTINE C-SECTION ORDERS**



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ORDERED		PHYSICIAN AND SURGEONS CLINIC – ROUTINE C-SECTION ORDERS – Page 2 of 2	TIME ORDER NOTED
Date	Time		
		<input type="checkbox"/> Propoxyphene Napsylate 100 mg / Acetaminophen (Darvocet N100) one tab PO every 4 hours PRN lesser pain (1-4 on scale of 1-10)	
		<input type="checkbox"/> Propoxyphene Napsylate 100 mg / Acetaminophen (Darvocet N100) two tabs PO every 4 hours PRN severe pain (5-10 on scale of 1-10)	
		<input type="checkbox"/> Acetaminophen / Codeine (Tylenol #3) one tab PO every 4 hours PRN lesser pain (1-4 on scale of 1-10)	
		<input type="checkbox"/> Acetaminophen / Codeine (Tylenol #3) two tabs PO every 4 hours PRN severe pain (5-10 on scale of 1-10)	
		<input type="checkbox"/> Zolpidem (Ambien) 5 mg 1 tab PO every HS PRN sleep; if patient not asleep within 1 hour may repeat	
		<input type="checkbox"/> PRN medications Aluminum hydroxide / Magnesium hydroxide / Simethicone (Mylanta) 30 ml PO PRN indigestion or heartburn	
		Acetaminophen (Tylenol) 325 mg 1-2 tabs PO every 4 hours PRN headache	
		Witchhazel (Tucks) to symptomatic hemorrhoids PRN discomfort	
		Oxymetazoline (Afrin Nasal Spray) 2 puffs BID PRN stuffy nose	
		Hydrocortisone (Anusol HC Cream) PRN hemorrhoid pain unrelieved by Witchhazel (Tucks)	
		<input type="checkbox"/> Breast feeding patient Lanolin Cream to nipples after nursing PRN Wash nipples with water before and after nursing Breast pump, nipple shield PRN	
		<input type="checkbox"/> Bottle feeding patient Ice packs to breast PRN discomfort or engorgement	
		<input type="checkbox"/> May shower when IV is discontinued or converted to Heplock	
		<input type="checkbox"/> Infant to mother when stable	
		<input type="checkbox"/> If mother is Rh negative, institute RhoGam investigation	
		<input type="checkbox"/> Cord blood study, direct coombs	
		<input type="checkbox"/> Abd. Dressing will be removed initially by the physician, then change every day	
		<input type="checkbox"/> OB/GYN pre-written orders	
		<input type="checkbox"/> Toradol (Ketorolac) 30 mg IV every 6 hours x _____ doses	
		<input type="checkbox"/> SCD hose until amulating well	
		Physician Signature: _____	
		Date/Time: _____	

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