



**PHYSICIAN'S ORDERS**

ORDERED		OUTPATIENT PRE-OP ORDERS	ORDERS	DR. CHARLES S. RHEA	TIME ORDER NOTED
Date	Time				
		<b>Diagnosis</b>			
		<b>Lab – Complete Blood Count, Urinalysis, Chemistry Panel, Chest X-Ray,</b>			
		<b>EKG, Blood Urea Nitrogen, Creatinine, Blood Sugar, Blood Gases, CMP</b>			
		<b>Regular Diet – Nothing by mouth after:</b>			
		<b>Bed rest – Bathroom privileges – Ambulate whenever necessary.</b>			
		<b>Have patient/parent/spouse sign OP permit for:</b>			
		<b>Sterile orthopedic prep to:</b>			
		<b>Meds: Propoxyphene Napsylate 100 mg / Acetaminophen 650 mg (Darvocet – N 100)</b>			
		<b>1 by mouth q4h whenever necessary pain.</b>			
		<b>Acetaminophen 300 mg / Codeine 30 mg (Tylenol No. 3)</b>			
		<b>1 q4h whenever necessary moderately severe pain,</b>			
		<b>q3h whenever necessary severe pain</b>			
		<b>Milk of Magnesia (MOM) 30 ml at bedtime or Fleets enema whenever</b>			
		<b>necessary constipation</b>			
		<b>Aluminum hydroxide &amp; Magnesium hydroxide with simethicone (Mylanta)</b>			
		<b>30 ml q2h whenever necessary indigestion</b>			
		<b>Flurazepam (Dalmane) 15 mg at bedtime whenever necessary sleep-repeat</b>			
		<b>X 1 if necessary one hour later</b>			
		<b>Pre-op meds</b>	<b>On call or at _____ A.M. _____ P.M.</b>		
		<b>Notify office of room No. today or in A.M.</b>			
			_____		
			Dr. Charles S. Rhea		
			_____		
			Date/Time		

▼ Addressograph / Patient Label ▼



**OUTPATIENT PRE-OP ORDERS  
DR. CHARLES S. RHEA**