BAPTIST MEMORIAL HOSPITAL – GOLDEN TRIANGLE

ORD

PHYSICIAN'S ORDERS

ALLERGIES: See Master Allergy Sheet

ORDERED Date	ORDERED Time	POST BRONCHOSCOPY ORDERS – DR. SUSAN G. TAYLOR	TIME ORDER NOTED
		1. NPO until _____ then sips of water and if not coughing/choking,diet and meds as before.	
		2. O2 at _____ liters per min. until _____ then _____ or PRN _____ liters per min. _____.	
		3. IV at _____ until _____ then discontinue.	
		4. Up with help after _____ then activity as before if stable.	
		5. Vital signs _____.	
		6. Discharge if stable after _____.	
		7. Collect post bronch sputum for _____ until _____.	
		8. Additional instructions:	
		_____ _____	
		Susan G. Taylor, MD Date/Time	

▼ Addressograph / Patient Label ▼

BAPTIST MEMORIAL HOSPITAL GOLDEN TRIANGLE

POST BRONCHOSCOPY ORDERS
DR. SUSAN G. TAYLOR

Form # 18-214.171 (04/07)

Original – Chart / Canary – Lab/Pharmacy