



ORD

ORDERED DATE / TIME	PRE CARDIAC CATHETERIZATION ORDERS – DR. WILLIAMS	TIME NOTED
	ALLERGIES: See Master Allergy Sheet	
	1. Admit to Out-Patient Unit (unless already hospitalized for cardiac catheterization scheduled for	
	2. Permit to be signed for Cardiac Catheterization	
	3. Notify M.D. if PT is allergic to contrast dye	
	4. Identify home medications	
	5. NPO after midnight if case scheduled before noon. If case scheduled after noon, give clear liquid breakfast then NPO. May give cardiac meds with sip of H ₂ O. DO NOT GIVE COUMADIN.	
	6. PT to watch pre-cath educational tape	
	7. CBC, UA, PT, PTT, BMP Please have lab results on chart evening prior to procedure for in-patient, or by 7AM for out-patient.	
	8. Draw if checked:	
	<input type="checkbox"/> Magnesium	
	<input type="checkbox"/> Digoxin level	
	<input type="checkbox"/> Quinidine level	
	<input type="checkbox"/> Fasting lipid profile	
	9. CXR	
	10. EKG	
	11. IV of 1000 ml NS at 50 ml/hr. Start one hour prior to cath in left arm with 18 gauge angiocath.	
	12. Pre op: Benadryl 25 mg IV on call	
	13. Before the patient leaves the unit: have the patient empty bladder, remove all jewelry, nail polish, lipstick and hair pins. Have patient clothed in hospital gown only. Grade and mark pedal pulses on 0-4 scale and document.	
	Physician Signature: _____ Date/Time: _____	



**PRE CARDIAC CATHETERIZATION ORDERS
DR. WILLIAMS**

▼ Addressograph / Patient Label ▼

