


**Cholecystectomy Pre-operative**

- 1.  orders are active unless order is manually lined through to inactivate
- 2.  do not enter as order unless checked
- 3. **• REMINDER:** do not enter as order

**Interventions**

- Confirm signed consent on chart for laparoscopic cholecystectomy, intra-operative cholangiogram, possible open cholecystectomy
- Notify medical records to send results to primary care physician
- Elastic stockings, below the knee
- Elastic stockings, above the knee
- Sequential compression pneumatic devices (SCDs) / Pulsatile Anti-Embolism System (PAS) - discontinue PAS when patient is ambulating without assistance 
- Other \_\_\_\_\_

**Patient/Caregiver Education**

- Education: deep breathing & coughing exercises
- Education: incentive spirometry
- Education: Wound care

**Diet**

- NPO after midnight on \_\_\_\_/\_\_\_\_/\_\_\_\_
- Other \_\_\_\_\_

**Medications**

- VERIFY HOME MEDICATIONS
- Antibiotics**
- Nursing: Pre-op antibiotic should be given in the Operating Room WITHIN ONE HOUR of surgical incision
- cefazolin (ANCEF) 1 gm IV x 1  
**\*\*AND\*\***  
metRONIDAZOLE (FLAGYL) 500 mg IV x 1
- cefoxitin (MEFOXIN) 1 gm IVPB x 1
- Antibiotics if B-lactam Allergy**
- levofloxacin (LEVAQUIN) 500 mg IV x 1  
**\*\*AND\*\***  
metRONIDAZOLE (FLAGYL) 500 mg IV x 1

**Laboratory** (Indicate schedule following order)

- Type & screen for surgery today
- Complete blood cell count with automated white blood cell differential
- Comprehensive metabolic panel (CMP - CHEM 14)
- Pregnancy urine, if female is of childbearing age & has pregnancy ability
- Basic metabolic panel (BMP - CHEM 8) \_\_\_\_\_
- Prothrombin time (PT) & international normalized ratio (INR) & Partial thromboplastin time (PTT), if on Coumadin
- Amylase, serum \_\_\_\_\_
- Lipase \_\_\_\_\_
- Urinalysis (UA) with microscopy \_\_\_\_\_
- Urinalysis (UA) with reflex to culture \_\_\_\_\_
- Other \_\_\_\_\_

**Diagnostic Tests (If not requested by anesthesia. Check with Anesthesia)**

- Chest X-Ray, PA & Lateral  
- Now (indication \_\_\_\_\_)
- in AM (indication) \_\_\_\_\_
- 12-lead ECG
- Other \_\_\_\_\_

**Provider Signature**

Date \_\_\_\_\_ Time \_\_\_\_\_

\*\*\*This order set is not built in FAMIS\*\*\*

