

GI (Appendectomy) Post-op

Admit To: Inpatient Observation
 Med-Surg Telemetry ICU

Vital Signs & Monitoring

- q 15 mins x 1 hour, q hour x3 and then
 q 4 hours q 8 hours

Activity

- Bed rest Up independently
 Up to chair _____ times per day
 Ambulate _____ times per day

Interventions

- Measure intake & output
 Discontinue indwelling urinary catheter within 24 hours of insertion unless order obtained by physician.
 Cardiac monitor
 Remove NG/orogastric tube
 Drain management bulb suction (if any)
 SCDs/PAS: DC when ambulating
 Below the knee Elastic Stockings

Respiratory

- Incentive spirometry every hour while awake.
Goal is 20 puffs/hour

Diet

- NPO except ice chips
 Clear liquid diet first meal, advance to full liquid diet & then advance to regular diet
 Therapeutic diet, low fat
 Therapeutic diet, diabetic _____ ADA

IV Fluids

- Saline lock when taking PO well (flush per protocol)
 IV soln _____ @ _____ ml/hr;
KCl additive _____ mEq/L

Medications

- VERIFY HOME MEDICATIONS

Analgesics - Oral

- acetaminophen (TYLENOL) 650 mg PO q4h PRN pain &/ or fever
 oxycodone (OXY-IR) _____ mg PO q6h PRN pain
 acetaminophen-hydrocodone (VICODIN) _____ tablet(s) PO q6h PRN pain

Analgesics - IV

- morphine _____ mg IV PRN pain q _____ hrs
 hydromorphone (DILAUDID) _____ mg IV PRN pain q _____ hrs

Antacids

- MAALOX 15 mL PO q4h PRN indigestion
 famotidine (PEPCID) 20 mg IV q12h

Sedatives - Oral

- zolpidem (AMBIEN) 5 mg PO qhs PRN insomnia

Antibiotics - IV

- **Discontinue prophylactic antibiotics within 24 hours after surgery end time @ _____ unless infection noted.**

- cefoxitin (MEFOXIN) 2gm IV q6h x1 dose
 cefazolin (ANCEF) 1 gm IV q8h x1 dose
****AND****
metroNIDAZOLE (FLAGYL) 500 mg IV q8h x1 dose

Antibiotics(B-lactam allergy) - IV

- metroNIDAZOLE (FLAGYL) 500 mg IV q8h x1 dose
****AND****
levofloxacin (LEVAQUIN) 500 mg IV q24h x1 dose

Antibiotics:If infection suspected or noted must indicate reason, med, dose, route, and frequency below.

*Indication: _____

Antiemetics - IV

- ondansetron (ZOFRAN) 4 mg IV q6h PRN nausea/vomiting

DVT Prophylaxis

- enoxaparin (LOVENOX) 40 mg subQ daily
 heparin 5,000 units subQ q8h

Laboratory (Indicate Schedule following the order)

- CMP (CHEM 14)____ BMP (CHEM 8) ____
 CBC with diff____ PT with INR____
 Amylase, serum____ Lipase____

Consults

- Consult to _____

Reason: _____

Provider Signature _____

Date _____ **Time** _____

Patient Information

St. Elizabeth's Hospital
Belleville, Illinois

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Form # 1452

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