

**GI (Colorectal) Post-op**

**Admit To:**

- Inpatient     Observation
- Med-Surg    Telemetry    ICU

**Vital Signs & Monitoring**

Vital signs

- q15 mins x 1 hour, then qh x 3 and then
- q4h    q8h

**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 to keep in.
- Cardiac monitor
- Remove NG/orogastric tube
- Drain management bulb suction (if any)
- SCDs/PAS: DC when ambulating
- Below the knee Elastic Stockings
- Other \_\_\_\_\_

**Respiratory**

- Incentive spirometry q 1 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 for 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 q \_\_\_\_\_ hours PRN pain
- hydromorphone (DILAUDID) \_\_\_\_\_ mg IV q \_\_\_\_\_ hours PRN pain

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

**Antibiotics(B-lactam allergy) - IV**

- levofloxacin (LEVAQUIN) 500 mg IV q24h x1 dose **\*\*AND\*\*** metronidazole (FLAGYL) 500 mg x1 q8h 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: \_\_\_\_\_
- Consult to \_\_\_\_\_ Reason: \_\_\_\_\_

**Provider Signature**

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

Patient Information

St. Elizabeth's Hospital  
Belleville, Illinois  
**GI (Colorectal)Post-op**

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