

## General

## Pre Anesthesia Testing Orders

The ambulatory orders in this section are specifically for Pre Anesthesia Testing. For additional PAT orders, please use 'Future Status' and 'Pre-Admission Testing Phase of Care'

[ ] Other Diagnostic Studies	
[ ] ECG Pre/Post Op	Routine, Ancillary Performed, Status: Future, Expires: S+366, Pre-Admission Testing
[ ] Pv carotid duplex	Status: Future, Expires: S+366, Routine, Clinic Performed
[ ] Us vein mapping lower extremity	Status: Future, Expires: S+366, Routine, Clinic Performed
[ ] Respiratory	
[ ] Spirometry pre & post w/ bronchodilator	Routine, Status: Future, Expires: S+366, Pre-Admission Testing Encounter type?
[ ] Body Plethysmographic lung volumes	Routine, Status: Future, Expires: S+366, Pre-Admission Testing Encounter type?
[ ] Diffusion capacity	Routine, Status: Future, Expires: S+366, Pre-Admission Testing Encounter type?
[ ] Spirometry	Routine, Status: Future, Expires: S+366, Pre-Admission Testing Encounter type?
[ ] Laboratory: Preoperative Testing Labs - All Facilities	
[ ] CBC with platelet and differential	Routine, Status: Future, Expires: S+366, Clinic Collect LabCorp Has the patient fasted? Pre-Admission Testing
[ ] Comprehensive metabolic panel	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
[ ] Basic metabolic panel	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
[ ] Prothrombin time with INR	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
[ ] Partial thromboplastin time	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
[ ] Hepatic function panel	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
[ ] Platelet function analysis	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
[ ] Hemoglobin A1c	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
[ ] Type and screen	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
[ ] hCG qualitative, serum screen	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
[ ] POC pregnancy, urine	Routine, Point Of Care, Pre-Admission Testing
[ ] Urinalysis, automated with microscopy	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
[ ] Laboratory: Additional Labs - HMWB, HMSJ, HMSTJ, HMTW	
[ ] Urinalysis screen and microscopy, with reflex to culture	Routine, Status: Future, Expires: S+366, Clinic Collect Specimen Source: Urine Specimen Site: Pre-Admission Testing
[ ] CBC hemogram	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
[ ] HIV 1, 2 antibody	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing

<input type="checkbox"/>	Syphilis treponemal IgG	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Hepatitis acute panel	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Thromboelastograph	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Vitamin D 25 hydroxy level	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	MRSA screen culture	Routine, Status: Future, Expires: S+366, Clinic Collect, Nares Quest Specimen Source: Pre-Admission Testing
<input type="checkbox"/>	T3	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	T4	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Thyroid stimulating hormone	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Prostate specific antigen	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	<b>Laboratory: Additional Labs - HMSL, HMW</b>	
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Routine, Status: Future, Expires: S+366, Clinic Collect Specimen Source: Urine Specimen Site: Pre-Admission Testing
<input type="checkbox"/>	CBC hemogram	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Rapid HIV 1 & 2	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Syphilis treponemal IgG	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Hepatitis acute panel	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Thromboelastograph	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Vitamin D 25 hydroxy level	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	MRSA screen culture	Routine, Status: Future, Expires: S+366, Clinic Collect, Nares Quest Specimen Source: Pre-Admission Testing
<input type="checkbox"/>	T3	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	T4	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Thyroid stimulating hormone	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Prostate specific antigen	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	<b>Laboratory: Additional Labs - HMM</b>	
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Routine, Status: Future, Expires: S+366, Clinic Collect Specimen Source: Urine Specimen Site: Pre-Admission Testing
<input type="checkbox"/>	CBC hemogram	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	HIV Ag/Ab combination	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Syphilis treponemal IgG	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Hepatitis acute panel	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing

<input type="checkbox"/>	Thromboelastograph	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Vitamin D 25 hydroxy level	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	MRSA screen culture	Routine, Status: Future, Expires: S+366, Clinic Collect, Nares Quest Specimen Source: Pre-Admission Testing
<input type="checkbox"/>	T3	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	T4	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Thyroid stimulating hormone	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Prostate specific antigen	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing

### Case Request

Case request operating room Scheduling/ADT, Scheduling/ADT

### Planned ICU Admission Post-Operatively (Admit to Inpatient Order) (Single Response)

Patients who are having an Inpatient Only Procedure as determined by CMS and patients with prior authorization for Inpatient Care may have an Admit to Inpatient order written pre-operatively.

Admit to Inpatient

Diagnosis:  
Admitting Physician:  
Level of Care:  
Patient Condition:  
Bed request comments:  
Certification: I certify that based on my best clinical judgment and the patient's condition as documented in the HP and progress notes, I expect that the patient will need hospital services for two or more midnights.  
Pre-op

## Nursing

### Vitals

Vital signs - T/P/R/BP (per unit protocol) Routine, Every 4 hours  
Times 3, then every 8 hours if stable., Pre-op

### Nursing

Obtain medical records Routine, Once  
Specify From:  
Place History and Physical, Labs, Chest X-Ray and EKG done as an outpatient on chart, Pre-op

IN AOD: Remove hair with clippers or depilatory at operative site Routine, Until discontinued, Starting S, Pre-op

### Diet

NPO-After Midnight Diet effective midnight, Starting S+1 at 12:01 AM  
NPO: Except Sips with meds  
Pre-Operative fasting options:  
Pre-op

Diet Diet effective now, Starting S  
Diet(s):  
Advance Diet as Tolerated?  
Liquid Consistency:  
Fluid Restriction:  
Foods to Avoid:  
Pre-op

## Consent for Upper Extremity

<input type="checkbox"/> Complete consent for Shoulder Diagnostic Arthroplasty	Routine, Once Procedure: Shoulder Diagnostic Arthroplasty Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Arthroscopic Rotator Cuff Repair	Routine, Once Procedure: Arthroscopic Rotator Cuff Repair Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Arthroscopic labral repair of shoulder	Routine, Once Procedure: Arthroscopic labral repair of shoulder Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Arthroscopic SLAP repair of the shoulder	Routine, Once Procedure: Arthroscopic SLAP repair of the shoulder Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Arthroscopic posterior labral repair of shoulder	Routine, Once Procedure: Arthroscopic posterior labral repair of shoulder Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Arthroscopic anterior labral repair of shoulder	Routine, Once Procedure: Arthroscopic anterior labral repair of shoulder Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Arthroscopic Subacromial Decompression (SAD)	Routine, Once Procedure: Arthroscopic Subacromial Decompression (SAD) Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Arthroscopic distal clavicle excision (DCE)	Routine, Once Procedure: Arthroscopic distal clavicle excision (DCE) Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Arthroscopic reconstruction of acromioclavicular (AC) joint with allograft tendon	Routine, Once Procedure: Arthroscopic reconstruction of acromioclavicular (AC) joint with allograft tendon Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Arthroscopic shoulder capsular release and manipulation under Anesthesia	Routine, Once Procedure: Arthroscopic shoulder capsular release and manipulation under Anesthesia Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Open Reduction, Internal fixation of clavicle fracture	Routine, Once Procedure: Open Reduction, Internal fixation of clavicle fracture Diagnosis/Condition: Physician: Pre-op

<input type="checkbox"/> Complete consent for Total shoulder arthroplasty	Routine, Once Procedure: Total shoulder arthroplasty Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Reverse total shoulder arthroplasty	Routine, Once Procedure: Reverse total shoulder arthroplasty Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Elbow arthroplasty	Routine, Once Procedure: Elbow arthroplasty Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Open repair of distal biceps tendon	Routine, Once Procedure: Open repair of distal biceps tendon Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Open biceps tenodesis	Routine, Once Procedure: Open biceps tenodesis Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Biceps tenotomy	Routine, Once Procedure: Biceps tenotomy Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Elbow arthroscopic v. open debridement of extensor carpi radialis brevis tendon	Routine, Once Procedure: Elbow arthroscopic v. open debridement of extensor carpi radialis brevis tendon Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Open reduction, Internal Fixation of _____ fracture	Routine, Once Procedure: Open reduction, Internal Fixation of _____ fracture Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Open reduction, Internal Fixation v Hemiarthroplasty of proximal humerus fracture	Routine, Once Procedure: Open reduction, Internal Fixation v Hemiarthroplasty of proximal humerus fracture Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Removal of hardware _____	Routine, Once Procedure: Removal of hardware _____ Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Removal of Loose Body _____	Routine, Once Procedure: Removal of Loose Body _____ Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for	Routine, Once Procedure: Diagnosis/Condition: Physician: Pre-op

## Consent for Lower Extremity

<input type="checkbox"/> Complete consent for Knee Diagnostic Arthroscopy	Routine, Once Procedure: Knee Diagnostic Arthroscopy Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Knee Arthroscopic Medical/Lateral meniscus repair v meniscectomy	Routine, Once Procedure: Knee Arthroscopic Medical/Lateral meniscus repair v meniscectomy Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Knee Arthroscopic Reconstruction of ACL (Anterior Cruciate Ligament) with allograft/autograft	Routine, Once Procedure: Knee Arthroscopic Reconstruction of ACL (Anterior Cruciate Ligament) with allograft/autograft Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Knee Arthroscopic Reconstruction of PCL (Posterior Cruciate Ligament) with allograft/autograft	Routine, Once Procedure: Knee Arthroscopic Reconstruction of PCL (Posterior Cruciate Ligament) with allograft/autograft Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Knee Arthroscopy with open reconstruction of medial patellofemoral ligament with allograft	Routine, Once Procedure: Knee Arthroscopy with open reconstruction of medial patellofemoral ligament with allograft Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Knee Arthroscopic Debridement,Chondroplasty,Removal of loose body.	Routine, Once Procedure: Knee Arthroscopic Debridement,Chondroplasty,Removal of loose body. Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Knee Arthroscopic Carticel biopsy.	Routine, Once Procedure: Knee Arthroscopic Carticel biopsy. Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Open chondroplasty of the knee, possible allograft cartilage transplant (DeNovo)	Routine, Once Procedure: Open chondroplasty of the knee, possible allograft cartilage transplant (DeNovo) Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Knee Athroscopic lysis of adhesions, manipulation,under anesthesia	Routine, Once Procedure: Knee Athroscopic lysis of adhesions, manipulation,under anesthesia Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Knee Diagnostic Arthroscopy and open reduction, internal fixation of tibial plateau fracture	Routine, Once Procedure: Knee Diagnostic Arthroscopy and open reduction, internal fixation of tibial plateau fracture Diagnosis/Condition: Physician: Pre-op

<input type="checkbox"/> Complete consent for Medial Meniscus Transplant arthroscopic assisted	Routine, Once Procedure: Medial Meniscus Transplant arthroscopic assisted Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Lateral Meniscus Transplant arthroscopic assisted	Routine, Once Procedure: Lateral Meniscus Transplant arthroscopic assisted Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Distal femoral osteotomy	Routine, Once Procedure: Distal femoral osteotomy Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for High tibial osteotomy	Routine, Once Procedure: High tibial osteotomy Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Tibial Tubercle Osteotomy	Routine, Once Procedure: Tibial Tubercle Osteotomy Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Hip Diagnostic Arthroscopy	Routine, Once Procedure: Hip Diagnostic Arthroscopy Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Hip Arthroscopic debridement vs. repair of labral tear	Routine, Once Procedure: Hip Arthroscopic debridement vs. repair of labral tear Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Open reduction , internal fixation of _____ fracture	Routine, Once Procedure: Open reduction , internal fixation of _____ fracture Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for Posterior-Lateral Corner repair with allograft	Routine, Once Procedure: Posterior-Lateral Corner repair with allograft Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Complete consent for	Routine, Once Procedure: Diagnosis/Condition: Physician: Pre-op

## IV Fluids

### Insert and Maintain IV

<input checked="" type="checkbox"/> Initiate and maintain IV	
<input checked="" type="checkbox"/> Insert peripheral IV	Routine, Once, Pre-op
<input checked="" type="checkbox"/> sodium chloride 0.9 % flush	10 mL, intravenous, every 12 hours scheduled, Pre-op
<input checked="" type="checkbox"/> sodium chloride 0.9 % flush	10 mL, intravenous, PRN, line care, Pre-op

### IV Fluids (Single Response)

<input type="checkbox"/> sodium chloride 0.9 % infusion	75 mL/hr, intravenous, continuous, Pre-op
<input type="checkbox"/> lactated Ringer's infusion	75 mL/hr, intravenous, continuous, Pre-op

## Medications

### Antibiotics: For Patients LESS than or EQUAL to 120 kg

<input type="checkbox"/> cefazolin (ANCEF) IV - For Patients LESS than or EQUAL to 120 kg	2 g, intravenous, once, For 1 Doses, Pre-op Within 60 minutes of incision. For patients LESS than or EQUAL to 120 kg; On Call to OR Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> cefepime (MAXIPIME) IV	1 g, intravenous, once, For 1 Doses, Pre-op Within 60 minutes of incision. Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses, Pre-op Within 60 minutes of incision. Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> clindamycin (CLEOCIN) IV - For Penicillin Allergic Patients	900 mg, intravenous, for 30 Minutes, once, For 1 Doses, Pre-op Within 60 minutes of incision. For patients Penicillin Allergic; On Call to OR Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> vancomycin (VANCOCIN) IV	15 mg/kg, intravenous, once, For 1 Doses, Pre-op Within 2 hours prior to incision; On Call to OR Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis

### Antibiotics: For Patients GREATER than 120 kg

<input type="checkbox"/> cefazolin (ANCEF) IV - For Patients GREATER than 120 kg	3 g, intravenous, once, For 1 Doses, Pre-op Within 60 minutes of incision. For patients GREATER than 120 kg; On Call to OR Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> cefepime (MAXIPIME) IV	1 g, intravenous, once, For 1 Doses, Pre-op Within 60 minutes of incision. Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses, Pre-op Within 60 minutes of incision. Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> clindamycin (CLEOCIN) IV - For Penicillin Allergic Patients	900 mg, intravenous, for 30 Minutes, once, For 1 Doses, Pre-op Within 60 minutes of incision. For patients Penicillin Allergic; On Call to OR Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> vancomycin (VANCOCIN) IV	15 mg/kg, intravenous, once, For 1 Doses, Pre-op Within 2 hours prior to incision; On Call to OR Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis

## Labs

### Labs

<input type="checkbox"/> CBC and differential	Once, Pre-op
<input type="checkbox"/> Basic metabolic panel	Once, Pre-op
<input type="checkbox"/> Comprehensive metabolic panel	Once, Pre-op
<input type="checkbox"/> Partial thromboplastin time	Once, Pre-op



<input type="checkbox"/> Prothrombin time with INR	Once, Pre-op
<input type="checkbox"/> hCG qualitative, serum screen	Once, Pre-op

## Cardiology

## Imaging

## Other Studies

## Respiratory

## Rehab

## Consults

## Additional Orders

## Blood Products

### Lab Draw

<input type="checkbox"/> Type and screen	Once, Pre-op
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### Blood Products

#### Red Blood Cells

<input type="checkbox"/> Prepare RBC	Routine Transfusion Indications: Transfusion date: Blood Products
<input type="checkbox"/> Transfuse RBC	Routine Transfusion duration per unit (hrs): Pre-op

#### Platelets

<input type="checkbox"/> Prepare platelet pheresis	Routine Transfusion Indications: Transfusion date: Blood Products
<input type="checkbox"/> Transfuse platelets	Routine Transfusion duration per unit (hrs): Pre-op

#### Fresh Frozen Plasma

<input type="checkbox"/> Prepare fresh frozen plasma	Routine Transfusion Indications: Transfusion date: Blood Products
<input type="checkbox"/> Transfuse fresh frozen plasma	Routine Transfusion duration per unit (hrs): Pre-op

#### Cryoprecipitate

<input type="checkbox"/> Prepare cryoprecipitate	Routine Transfusion Indications: Transfusion date: Blood Products
<input type="checkbox"/> Transfuse cryoprecipitate	Routine Transfusion duration per unit (hrs): Pre-op

### IV Fluid for Blood Transfusion

<input type="checkbox"/> sodium chloride 0.9 % infusion	250 mL, intravenous, at 30 mL/hr, continuous, Pre-op Administer with blood
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### Medications

<input type="checkbox"/> acetaminophen (TYLENOL) tablet	oral, once, For 1 Doses, Pre-op
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<input type="checkbox"/>	diphenhydrAMINE (BENADRYL) tablet	25 mg, oral, once, For 1 Doses, Pre-op
<input type="checkbox"/>	diphenhydrAMINE (BENADRYL) injection	25 mg, intravenous, once, For 1 Doses, Pre-op
<input type="checkbox"/>	hydrocortisone sodium succinate (PF) (Solu-CORTEF) injection	intravenous, once, For 1 Doses, Pre-op
<input type="checkbox"/>	furosemide (LASIX) injection	intravenous, once, For 1 Doses, Pre-op
<input type="checkbox"/>	furosemide (LASIX) tablet	oral, once, For 1 Doses, Pre-op