

General

Discharge (Single Response)

Discharge patient Discharge at 12:00 AM
 Specific Destination:
 Is a readmission planned within 30 days?

Discontinue tubes/drains/telemetry

Discontinue Telemetry Routine, Once
 Discontinue Foley catheter Routine, Once
 Discharge home with Foley catheter Routine, Once
 Discontinue IV Routine, Once For 1 Occurrences
 Deaccess port
 Deaccess Port-a-cath Routine, Once
 heparin, porcine (PF) 100 unit/mL injection intra-catheter, once

Diet

Discharge Diet Routine, Normal
 Discharge Diet: Regular

Activity instructions

Activity as tolerated Routine, Normal
 Ambulate with assistance or assistive device Routine, Normal
 Avoid pulling or pushing movements and do not perform abdominal exercises until your physician releases you to do these activities Routine, Normal
 Do not lift anything heavier than the baby Routine, Normal
 Limit the number of trips up and down stairs Routine, Normal
 Do not drive a car until released by your physician to drive. No driving while taking narcotic medications. Routine, Normal
 Plan to have someone drive you to and from your first Postpartum appointment Routine, Normal
 When released to drive, have another licensed driver with you the first time you drive Routine, Normal
 Complete pelvic rest (nothing in the vagina) for 6 weeks Routine, Normal
 No sexual intercourse Routine, Normal
 Showers only, no baths or Jacuzzi's Routine, Normal
 You may take showers or baths. Use plain water- NO bubble baths or oils or you may run the risk of infection. Routine, Normal
 Other restrictions (specify): Routine, Normal

Perineal Care

Discharge perineal care Routine, Normal

Incision Care

Leave Steri-Strips in place until next office visit Routine, Normal
 Discharge incision care Routine, Normal, ***
 Discharge dressing Routine, Normal, ***

Patient to notify physician

Call physician for: Routine, Normal

Additional Instructions for Nursing- Will not show on After Visit Summary

[] Discharge patient home with staple removal kit and Steri Strips	Routine, Until discontinued, Starting S
[] Discharge instructions for Nursing	Routine, Once
Additional Patient Discharge Education	
[] Nurse to provide discharge education	Routine, Once Patient/Family: Both Education for: Other (specify) Specify: Nurse to provide patient education

COVID 19 Discharge instructions

[] CONFIRMED POSITIVE: COVID 19 Discharge instructions: Patients with Novel Coronavirus (COVID-19)

Routine, Normal, You've been diagnosed with a viral syndrome and have a virus referred to as SARSCoV-2, otherwise known as the Novel Coronavirus (COVID-19).

We have notified the local health department where you reside that you were confirmed to have COVID and hospitalized and now are being discharged from our facility. You will need to have a negative result before being released from home quarantine.

You will be contacted by your local health department after discharge for follow up.

In the meantime:

Please follow these precautions:

--- As advised by the Centers for Disease Control and Prevention (CDC), we recommend you stay in your home (quarantine) and minimize contact with others to avoid spreading an infection.

--- Separate yourself from other people and animals in your home as much as possible. Stay in a specific room and away from other people in your home. Use a separate bathroom if possible. Do not handle pets or other animals while sick.

--- Avoid sharing personal household items, such as dishes, glasses, eating utensils, towels or bedding. After using these items, they should be washed thoroughly with soap and water.

--- Clean all "high-touch" surfaces every day (e.g., counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets and bedside tables). Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe and follow the instructions on the label to ensure safe and effective use of the cleaning product.

--- Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, clean your hands with an alcohol-based hand sanitizer containing at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used if hands are visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.

--- Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can and immediately wash or clean your hands as outlined above.

--- If your symptoms worsen and you have trouble breathing, chest pain, are unable to eat or drink enough and/or have severe vomiting, diarrhea or weakness, you may need to return to the emergency department or contact your clinic provider for re-evaluation. When seeking care at a healthcare facility, put on a facemask before you enter the facility.

If you experience any of these symptoms,

- Severe shortness of breath
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

Call 911 and notify the dispatch personnel that you have COVID-19. If you decide to go to the ER directly yourself, call them before you arrive and let them know you have COVID-19. Wear a facemask when you enter.

Only call your local health department and/or Employee Health after you've called 911 if you experience any emergency warning signs.

Place Follow-Up Order (Selection Required)

<input type="checkbox"/> Follow-up with me	Follow up with me: Clinic Contact: Follow up in: On date: Appointment Time:
<input type="checkbox"/> Follow-up with primary care physician	Routine, Normal
<input type="checkbox"/> Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
<input type="checkbox"/> Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
<input type="checkbox"/> Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
<input type="checkbox"/> Follow-up with physician	Follow up on: Appointment Time: Follow up in: Instructions for Follow Up:
<input type="checkbox"/> Follow-up with department	Details

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<input type="checkbox"/> Follow-up with department	Details