

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, Pre-Admission Testing
[] Us vein mapping lower extremity	Status: Future, Expires: S+366, Routine, Clinic Performed, Pre-Admission Testing
[] Methicillin-resistant staphylococcus aureus (MRSA), NAA	Routine, Status: Future, Expires: S+366, Clinic Collect, Nares, Pre-Admission Testing

[] Respiratory

[] Spirometry pre & post w/ bronchodilator, diffusion, lung volumes	Routine, Status: Future, Expires: S+366, Scheduling/ADT Location: Encounter type?
[] Spirometry, diffusion, lung volumes	Routine, Status: Future, Expires: S+366, Scheduling/ADT Location: Encounter type?
[] 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, Scheduling/ADT Encounter type?
[] Spirometry	Routine, Status: Future, Expires: S+366, Scheduling/ADT Encounter type?
[] OP Diffusion Capacity Combination Panel (Single Response)	
() Spirometry, diffusion	Routine, Status: Future, Expires: S+366, Scheduling/ADT Location: Encounter type?
() Spirometry, diffusion, lung volumes	Routine, Status: Future, Expires: S+366, Scheduling/ADT Location: Encounter type?
() Spirometry, diffusion, MIPS/MEPS	Routine, Status: Future, Expires: S+366, Scheduling/ADT Location: Encounter type?
() Spirometry, diffusion, lung volumes, MIPS/MEPS	Routine, Status: Future, Expires: S+366, Scheduling/ADT Location: Encounter type?
() Spirometry pre & post w/ bronchodilator, diffusion	Routine, Status: Future, Expires: S+366, Pre-Admission Testing Location: Encounter type?
() Spirometry pre & post w/ bronchodilator, diffusion, lung volumes	Routine, Status: Future, Expires: S+366, Scheduling/ADT Location: Encounter type?
() Spirometry pre & post w/ bronchodilator, diffusion, MIPS/MEPS	Routine, Status: Future, Expires: S+366, Scheduling/ADT Location: Encounter type?
() Spirometry pre & post w/ bronchodilator, diffusion, lung volumes, MIPS/MEPS	Routine, Status: Future, Expires: S+366, Scheduling/ADT Location: Encounter type?

[] Laboratory: Preoperative Testing Labs

[] COVID-19 qualitative RT-PCR - Nasal Swab	Routine, Status: Future, Expires: S+366, Clinic Collect Specimen Source: Nasal Swab Is this for pre-procedure or non-PUI assessment? Yes Pre-Admission Testing
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<input type="checkbox"/>	CBC with platelet and differential	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Comprehensive metabolic panel	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Basic metabolic panel	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Prothrombin time with INR	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Partial thromboplastin time	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Hepatic function panel	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Platelet function analysis	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Hemoglobin A1c	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Type and screen	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	hCG qualitative, serum screen	Routine, Status: Future, Expires: S+366, Clinic Collect Release to patient (Note: If manual release option is selected, result will auto release 10 days from finalization.): Pre-Admission Testing
<input type="checkbox"/>	POC pregnancy, urine	Routine, Point Of Care, Pre-Admission Testing
<input type="checkbox"/>	Urinalysis, automated with microscopy	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Laboratory: Additional Labs	
<input type="checkbox"/>	Urinalysis screen and microscopy, with reflex to culture	Routine, Status: Future, Expires: S+366, Clinic Collect Specimen Source: Urine Specimen Site: Clean catch Pre-Admission Testing
<input type="checkbox"/>	CBC hemogram	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	HIV 1/2 antigen/antibody, fourth generation, with reflexes (HMH, HMB, HMCL, HMWB, HMW, HMSL)	Routine, Status: Future, Expires: S+366, Clinic Collect Release to patient (Note: If manual release option is selected, result will auto release 10 days from finalization.): Pre-Admission Testing
<input type="checkbox"/>	Syphilis treponema screen with RPR confirmation (reverse algorithm)	Routine, Status: Future, Expires: S+366, Clinic Collect Release to patient (Note: If manual release option is selected, result will auto release 10 days from finalization.): Pre-Admission Testing
<input type="checkbox"/>	Acute viral hepatitis panel (HAV, HBV, HCV)	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 PCR	Routine, Status: Future, Expires: S+366, Clinic Collect, Nares, 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 Release to patient (Note: If manual release option is selected, result will auto release 10 days from finalization.): Pre-Admission Testing
<input type="checkbox"/>	Laboratory: Additional for Bariatric patients	
<input type="checkbox"/>	Lipid panel	Routine, Status: Future, Expires: S+366, Clinic Collect Has the patient been fasting for 8 hours or more? Pre-Admission Testing

<input type="checkbox"/>	hCG qualitative, serum screen	Routine, Status: Future, Expires: S+366, Clinic Collect Release to patient (Note: If manual release option is selected, result will auto release 10 days from finalization.): Pre-Admission Testing
<input type="checkbox"/>	Total iron binding capacity	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	T4, free	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"/>	Hemoglobin A1c	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Parathyroid hormone	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	CBC with platelet and differential	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Prothrombin time with INR	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Partial thromboplastin time, activated	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Vitamin A level, plasma or serum	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Vitamin B12 level	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"/>	Copper level, serum	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Folate level	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Vitamin B1 (thiamine)	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing
<input type="checkbox"/>	Zinc level, serum	Routine, Status: Future, Expires: S+366, Clinic Collect, Pre-Admission Testing

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.

<input type="checkbox"/>	Admit to Inpatient	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
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Nursing

Vital Signs

<input checked="" type="checkbox"/>	Vital signs - T/P/R/BP - Per Unit Protocol	Routine, Per unit protocol, Pre-op
<input type="checkbox"/>	Vital signs - T/P/R/BP - Every 4 Hours	Routine, Every 4 hours, Pre-op

Notify

<input type="checkbox"/> Notify Physician for vitals:	Routine, Until discontinued, Starting S Temperature greater than: 101.5 Temperature less than: Systolic BP greater than: 180 Systolic BP less than: 80 Diastolic BP greater than: 120 Diastolic BP less than: 40 MAP less than: Heart rate greater than (BPM): 115 Heart rate less than (BPM): 45 Respiratory rate greater than: 25 Respiratory rate less than: SpO2 less than: Output less than 240 mL/shift or JP output greater than 180 mL/shift
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Stoma Therapist

<input type="checkbox"/> Stomal therapist to mark patient	Routine, Until discontinued, Starting S Colostomy irrigation (mLs): Pre-op
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Nursing

<input checked="" type="checkbox"/> Height and weight on arrival	Routine, Once, Pre-op
<input checked="" type="checkbox"/> Complete consent form	Routine, Once Procedure: Diagnosis/Condition: Physician: Pre-op
<input type="checkbox"/> Void on call to OR	Routine, Once, Pre-op
<input type="checkbox"/> Verify modification of diabetic agents	Routine, Until discontinued, Starting S Nurse to check with primary physician for diabetic medication adjustment., Post-op
<input type="checkbox"/> Verify lab results available	Routine, Once For 1 Occurrences Nurse to verify the following labs are available: PRE-OP: CBC, INR (if on coumadin), potassium, urinalysis; Call surgeon with abnormal results, Pre-op
<input type="checkbox"/> Verify surgical site confirmation documentation completed	Routine, Once For 1 Occurrences, Pre-op
<input type="checkbox"/> Verify discontinuation of anti-thrombotics	Routine, Once For 1 Occurrences If patient has taken any of the following agents within the listed period prior to surgery, contact surgeon for further instructions: Apixaban, aspirin, clopidogrel, rivaroxiban, dabigatran, prasugrel, or ticagrelor; 5-7 days COUMADIN/warfarin 3-5 days; enoxaparin 12 hours; and heparin 4 hours prior to procedure. If patient is taking COUMADIN/warfarin within 72 hours of exam, have INR drawn prior to appointment., Pre-op
<input type="checkbox"/> Saline lock IV	Routine, Continuous, Pre-op
<input type="checkbox"/> Insert peripheral IV	Routine, Once, Pre-op
<input type="checkbox"/> Change IV site dressing	Routine, Per unit protocol, Pre-op
<input type="checkbox"/> Nasogastric tube insertion	Routine, Once Type: Set to low intermittent suction., Pre-op
<input type="checkbox"/> Tobacco cessation education	Routine, Once, Pre-op
<input type="checkbox"/> Alcohol and or drug assessment	Routine, Once, Pre-op

Diet

<input type="checkbox"/> NPO - effective midnight	Diet effective midnight, Starting S+1 at 12:01 AM NPO: Pre-Operative fasting options: An NPO order without explicit exceptions means nothing can be given orally to the patient., Pre-op
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IV Fluids

IV Fluids

<input type="checkbox"/> sodium chloride 0.9 % infusion	intravenous, continuous, Pre-op
<input type="checkbox"/> lactated Ringer's infusion	intravenous, continuous, Pre-op
<input type="checkbox"/> dextrose 5 % and sodium chloride 0.45 % with potassium chloride 20 mEq/L infusion	intravenous, continuous, Pre-op
<input type="checkbox"/> dextrose 5%-sodium chloride 0.45% (D5-1/2NS) with potassium chloride (custom amount) infusion	intravenous, continuous, Pre-op Per HM policy, sodium infusions greater than 154mEq/L require an independent double check. Does this infusion contain greater than 154mEq/L of total sodium?
<input type="checkbox"/> sodium chloride 0.45% with potassium chloride (custom amount) infusion	intravenous, continuous, Pre-op Per HM policy, sodium infusions greater than 154mEq/L require an independent double check. Does this infusion contain greater than 154mEq/L of total sodium?

Medications

Antibiotics - Pubovaginal Sling (Pre-Op): For Patients LESS than or EQUAL to 120 kg (Single Response)

HOP Outpatient Surgery approved antibiotic options for Pubovaginal Sling. If patient allergy prevents use of the options below, consult pharmacy or infectious disease consultant for alternative options.

<input type="checkbox"/> ceFAZolin (ANCEF) IV - For Patients LESS than or EQUAL to 120 kg	2 g, intravenous, once, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> cefoxitin (MEFOXIN) 2 g IVPB	2 g, intravenous, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> gentamicin plus metronidazole for Penicillin Allergic Patients	"And" Linked Panel
<input type="checkbox"/> gentamicin (GARAMICIN) IVPB	5 mg/kg, intravenous, Administer over: 30 Minutes, once, For 1 Doses, Pre-op Indication:
<input type="checkbox"/> metronidazole (FLAGYL) 500 mg IVPB	500 mg, intravenous, once, Starting S, For 1 Doses, Pre-op Give within 1 hour of urology procedure. Infuse over 30 minutes. Repeat 3 hours after initial dose if still intra-op. Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied: Reason for Therapy:
<input type="checkbox"/> ciprofloxacin (CIPRO) IV	400 mg, intravenous, Administer over: 60 Minutes, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis

Antibiotics - Pubovaginal Sling (Pre-Op): For Patients GREATER than 120 kg (Single Response)

HOP Outpatient Surgery approved antibiotic options for Pubovaginal Sling. If patient allergy prevents use of the options below, consult pharmacy or infectious disease consultant for alternative options.

<input type="checkbox"/> ceFAZolin (ANCEF) IV - For Patients GREATER than 120 kg	3 g, intravenous, once, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> cefoxitin (MEFOXIN) 2 g IVPB	2 g, intravenous, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> gentamicin plus metronidazole for Penicillin Allergic Patients	"And" Linked Panel
<input type="checkbox"/> gentamicin (GARAMICIN) IVPB	5 mg/kg, intravenous, Administer over: 30 Minutes, once, For 1 Doses, Pre-op Indication:

<input type="checkbox"/> metronidazole (FLAGYL) 500 mg IVPB	500 mg, intravenous, once, Starting S, For 1 Doses, Pre-op Give within 1 hour of urology procedure. Infuse over 30 minutes. Repeat 3 hours after initial dose if still intra-op. Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied: Reason for Therapy:
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<input type="checkbox"/> ciprofloxacin (CIPRO) IV	400 mg, intravenous, Administer over: 60 Minutes, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
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Antibiotics - Prostate Biopsy: For Patients LESS than or EQUAL to 120 kg (Single Response)

HOP Outpatient Surgery approved antibiotic options for prostate biopsy surgery. If patient allergy prevents use of the options below, consult pharmacy or infectious disease consultant for alternative options.

<input type="checkbox"/> ceFAZolin (ANCEF) IV - For Patients LESS than or EQUAL to 120 kg	2 g, intravenous, once, For 1 Doses, Pre-op Give within 1 hour of urology procedure. Infuse over 30 minutes. Repeat 3 hours after initial dose if still intra-op. Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> cefoxitin (MEFOXIN) 2 g injection	2 g, intravenous, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> gentamicin (GARAMICIN) IVPB	5 mg/kg, intravenous, Administer over: 30 Minutes, once, For 1 Doses, Pre-op Indication:
<input type="checkbox"/> ciprofloxacin (CIPRO) IV	400 mg, intravenous, Administer over: 60 Minutes, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> trimethoprim-sulfamethoxazole (BACTRIM) IVPB	160 mg, intravenous, Administer over: 2 Hours, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis

Antibiotics - Prostate Biopsy: For Patients GREATER than 120 kg (Single Response)

HOP Outpatient Surgery approved antibiotic options for prostate biopsy surgery. If patient allergy prevents use of the options below, consult pharmacy or infectious disease consultant for alternative options.

<input type="checkbox"/> ceFAZolin (ANCEF) IV - For Patients GREATER than 120 kg	3 g, intravenous, once, For 1 Doses, Pre-op Give within 1 hour of urology procedure. Infuse over 30 minutes. Repeat 3 hours after initial dose if still intra-op. Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> cefoxitin (MEFOXIN) 2 g injection	2 g, intravenous, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> gentamicin (GARAMICIN) IVPB	5 mg/kg, intravenous, Administer over: 30 Minutes, once, For 1 Doses, Pre-op Indication:
<input type="checkbox"/> ciprofloxacin (CIPRO) IV	400 mg, intravenous, Administer over: 60 Minutes, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> trimethoprim-sulfamethoxazole (BACTRIM) IVPB	160 mg, intravenous, Administer over: 2 Hours, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis

Antibiotics - Penile Prosthesis Insertion, Removal, or Revision (Pre-Op) (Single Response)

HOP Surgery approved antibiotic options for penile prosthesis surgery. If patient allergy prevents use of the options below, please confirm that the allergy is documented on the patient allergy list and consult pharmacy or infectious disease consultant for alternative options.

<input type="checkbox"/> ampicillin-sulbactam (UNASYN) IVPB	3 g, intravenous, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> gentamicin (GARAMYCIN) IVPB plus ceFAZolin (ANCEF) IVPB - For patients GREATER THAN 120 kg	"And" Linked Panel
<input type="checkbox"/> gentamicin (GARAMICIN) IVPB	5 mg/kg, intravenous, Administer over: 30 Minutes, once, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis

<input type="checkbox"/> cefazolin (ANCEF) IVPB	3 g, intravenous, once, Starting S, For 1 Doses, Pre-op Give within 1 hour of procedure. Infuse over 30 minutes. Repeat 8 hours after initial dose if still intra-op. Reason for Therapy: Surgical Prophylaxis
() gentamicin (GARAMYCIN) IVPB plus ceFAZolin (ANCEF) IVPB - For patients LESS than or EQUAL to 120 kg	"And" Linked Panel
<input type="checkbox"/> gentamicin (GAROMICIN) IVPB	5 mg/kg, intravenous, Administer over: 30 Minutes, once, For 1 Doses, Pre-op Reason for Therapy:
<input type="checkbox"/> cefazolin (ANCEF) IVPB	2 g, intravenous, once, Starting S, For 1 Doses, Pre-op Give within 1 hour of procedure. Infuse over 30 minutes. Repeat 8 hours after initial dose if still intra-op. Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values. Reason for Therapy:
() gentamicin (GARAMYCIN) IVPB plus clindamycin (CLEOCIN) IVPB - For Penicillin or Vancomycin Allergic patients	"And" Linked Panel
<input type="checkbox"/> gentamicin (GAROMICIN) IVPB	5 mg/kg, intravenous, Administer over: 30 Minutes, once, For 1 Doses, Pre-op Indication:
<input type="checkbox"/> clindamycin (CLEOCIN) IVPB	900 mg, intravenous, Administer over: 30 Minutes, once, For 1 Doses, Pre-op Give within 1 hour of penile prosthesis procedure. Infuse over 30 minutes. Repeat 3 hours after initial dose if still intra-op. Indication:
() gentamicin (GARAMYCIN) IVPB plus vancomycin (VANCOCIN) IVPB	"And" Linked Panel
<input type="checkbox"/> gentamicin (GAROMICIN) IVPB	5 mg/kg, intravenous, Administer over: 30 Minutes, once, Starting S, For 1 Doses, Pre-op Indication:
<input type="checkbox"/> vancomycin (VANCOCIN) IVPB	15 mg/kg, intravenous, once, Starting S, For 1 Doses, Pre-op Give within 2 hours of penile prosthesis procedure. Infuse over 90 minutes. Repeat 8 hours after initial dose if still intra-op. Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis

Antibiotics

<input type="checkbox"/> ampicillin-sulbactam (UNASYN) IV	3 g, intravenous, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, Administer over: 30 Minutes, once, Starting S, For 1 Doses, Pre-op On Call Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> gentamicin (GAROMICIN) IVPB	5 mg/kg, intravenous, Administer over: 30 Minutes, once, For 1 Doses, Pre-op Indication:
<input type="checkbox"/> levofloxacin (LEVAQUIN) IV solution	500 mg, intravenous, once, Starting S, For 1 Doses, Pre-op Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> For penicillin allergic patients: clindamycin (CLEOCIN) IV	900 mg, intravenous, Administer over: 30 Minutes, 60 min pre-op, Starting S, For 1 Doses, Pre-op To be initiated within 1 hour of surgery. Type of Therapy: New Anti-Infective Order Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> metronidazole (FLAGYL)	500 mg, intravenous, once, Starting S, For 1 Doses, Pre-op On Call Reason for Therapy: Surgical Prophylaxis
<input type="checkbox"/> gentamicin (GARAMYCIN) IVPB plus clindamycin (CLEOCIN) IVPB - For Penicillin or Vancomycin Allergic patients	"And" Linked Panel

<input type="checkbox"/> gentamicin (GARAMICIN) IVPB	5 mg/kg, intravenous, Administer over: 30 Minutes, once, For 1 Doses, Pre-op Indication:
<input type="checkbox"/> clindamycin (CLEOCIN) IVPB	900 mg, intravenous, Administer over: 30 Minutes, once, For 1 Doses, Pre-op Give within 1 hour of penile prosthesis procedure. Infuse over 30 minutes. Repeat 3 hours after initial dose if still intra-op. Indication:
<input type="checkbox"/> gentamicin (GARAMYCIN) IVPB plus vancomycin (VANCOCIN) IVPB	"And" Linked Panel
<input type="checkbox"/> gentamicin (GARAMICIN) IVPB	5 mg/kg, intravenous, Administer over: 30 Minutes, once, Starting S, For 1 Doses, Pre-op Indication:
<input type="checkbox"/> vancomycin (VANCOCIN) IVPB	15 mg/kg, intravenous, once, Starting S, For 1 Doses, Pre-op Give within 2 hours of penile prosthesis procedure. Infuse over 90 minutes. Repeat 8 hours after initial dose if still intra-op. Reason for Therapy: Surgical Prophylaxis

Beta Blocker - Required if patient is on Home Beta Blockers (Pre-Op) (Single Response)

If patient is on a beta blocker at home, they should receive a dose on the day of procedure unless contraindicated.

<input type="checkbox"/> Contraindication to beta blocker - patient is on a beta blocker at home, but contraindicated at this time.	Routine, Until discontinued, Starting S, Pre-op
<input type="checkbox"/> metoprolol tartrate (LOPRESSOR) tablet	12.5 mg, oral, 60 min pre-op, Starting S, For 1 Doses, Pre-op Hold for systolic blood pressure less than 100 mmHg, diastolic blood pressure less than 60 mmHg, heart rate less than 50 bpm or patient is on a vassopressor or inotrope. BP & HR HOLD parameters for this order: Contact Physician if:

VTE

VTE Risk and Prophylaxis Tool (Single Response) (Selection Required)

Low Risk Definition Moderate Risk Definition

Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated. High Risk Definition

Both pharmacologic AND mechanical prophylaxis must be addressed.

Age less than 60 years and NO other VTE risk factors One or more of the following medical conditions: One or more of the following medical conditions:

Patient already adequately anticoagulated CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)

Age 60 and above Severe fracture of hip, pelvis or leg

Central line Acute spinal cord injury with paresis

History of DVT or family history of VTE Multiple major traumas

Anticipated length of stay GREATER than 48 hours Abdominal or pelvic surgery for CANCER

Less than fully and independently ambulatory Acute ischemic stroke

Estrogen therapy History of PE

Moderate or major surgery (not for cancer)

Major surgery within 3 months of admission

[Anticoagulation Guide for COVID patients](#)

URL:

"https://formweb.com/files/houstonmethodist/documents/C OVID-19 Anticoagulation Guideline - 8.20.2021v15.pdf"

Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis with Risk Stratification (Single Response) (Selection Required)

Moderate Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)

Moderate risk of VTE

Routine, Once, PACU & Post-op

<input type="checkbox"/>	Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: PACU & Post-op
<input type="checkbox"/>	Place sequential compression device (Single Response)	
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/>	Moderate Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)	
<input type="checkbox"/>	Moderate risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/>	Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: PACU & Post-op
<input type="checkbox"/>	Place sequential compression device (Single Response)	
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/>	High Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)	
<input type="checkbox"/>	High risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/>	Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: PACU & Post-op
<input type="checkbox"/>	Place sequential compression device (Single Response)	
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/>	High Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)	
<input type="checkbox"/>	High risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/>	Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: PACU & Post-op
<input type="checkbox"/>	Place sequential compression device (Single Response)	
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/>	LOW Risk of VTE (Selection Required)	
<input type="checkbox"/>	Low Risk (Single Response) (Selection Required)	

<input type="checkbox"/> Low risk of VTE	Routine, Once Low risk: Due to low risk, no VTE prophylaxis is needed. Will encourage early ambulation PACU & Post-op
<input type="checkbox"/> MODERATE Risk of VTE - Surgical (Selection Required)	
<input type="checkbox"/> Moderate Risk (Selection Required)	
<input type="checkbox"/> Moderate risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> Moderate Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis BUT order Sequential compression device	"And" Linked Panel
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
Patient renal status: @CRCL@	
For patients with CrCl GREATER than or EQUAL to 30mL/min, enoxaparin orders will apply the following recommended doses by weight: Weight Dose LESS THAN 100kg enoxaparin 40mg daily 100 to 139kg enoxaparin 30mg every 12 hours GREATER THAN or EQUAL to 140kg enoxaparin 40mg every 12 hours	
<input type="checkbox"/> For CrCl LESS than 30mL/min - enoxaparin (LOVENOX) subcutaneous Daily at 1700	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	30 mg, subcutaneous, daily at 1700, Starting S+1, PACU & Post-op Indication(s):
<input type="checkbox"/> For CrCl GREATER than or EQUAL TO 30 mL/min - enoxaparin (LOVENOX) subcutaneous	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	subcutaneous, Starting S+1, PACU & Post-op Indication(s):
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.

<input type="checkbox"/> heparin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, Starting S+1, PACU & Post-op For patients with weight GREATER than 100 kg.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1, PACU & Post-op Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> MODERATE Risk of VTE - Non-Surgical (Selection Required)	
<input type="checkbox"/> Moderate Risk (Selection Required)	
<input type="checkbox"/> Moderate risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> Moderate Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis - Order Sequential compression device	"And" Linked Panel
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis	"And" Linked Panel
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
Patient renal status: @CRCL@	
For patients with CrCl GREATER than or EQUAL to 30mL/min, enoxaparin orders will apply the following recommended doses by weight: Weight Dose LESS THAN 100kg enoxaparin 40mg daily 100 to 139kg enoxaparin 30mg every 12 hours GREATER THAN or EQUAL to 140kg enoxaparin 40mg every 12 hours	
<input type="checkbox"/> For CrCl LESS than 30mL/min - enoxaparin (LOVENOX) subcutaneous Daily at 1700	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	30 mg, subcutaneous, daily at 1700, PACU & Post-op Indication(s):
<input type="checkbox"/> For CrCl GREATER than or EQUAL TO 30 mL/min - enoxaparin (LOVENOX) subcutaneous	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	subcutaneous, PACU & Post-op Indication(s):

fondaparinux (ARIXTRA) injection 2.5 mg, subcutaneous, daily, PACU & Post-op
If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT), do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min
This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):

heparin (Single Response)
High Risk Bleeding Characteristics
Age > 75
Weight < 50 kg
Unstable Hgb
Renal impairment
Plt count < 100 K/uL
Dual antiplatelet therapy
Active cancer
Cirrhosis/hepatic failure
Prior intra-cranial hemorrhage
Prior ischemic stroke
History of bleeding event requiring admission and/or transfusion
Chronic use of NSAIDs/steroids
Active GI ulcer

High bleed risk 5,000 Units, subcutaneous, every 12 hours
Indication for lower dose/frequency:

Not high bleed risk (Single Response)

Wt > 100 kg 7,500 Units, subcutaneous, every 8 hours

Wt LESS than or equal to 100 kg 5,000 Units, subcutaneous, every 8 hours

warfarin (COUMADIN) (Single Response)

WITHOUT pharmacy consult oral, daily at 1700
Indication:

WITH pharmacy consult

Pharmacy consult to manage warfarin (COUMADIN) STAT, Until discontinued, Starting S
Indication:

warfarin (COUMADIN) tablet oral, daily at 1700
Indication:

Mechanical Prophylaxis (Single Response) (Selection Required)

Contraindications exist for mechanical prophylaxis Routine, Once
No mechanical VTE prophylaxis due to the following contraindication(s):
PACU & Post-op

Place/Maintain sequential compression device continuous Routine, Continuous, PACU & Post-op

HIGH Risk of VTE - Surgical (Selection Required)

High Risk (Selection Required)

High risk of VTE Routine, Once, PACU & Post-op

High Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s):
PACU & Post-op

enoxaparin (LOVENOX) injection (Single Response) (Selection Required)

Patient renal status: @CRCL@

For patients with CrCl GREATER than or EQUAL to 30mL/min, enoxaparin orders will apply the following recommended doses by weight:

Weight Dose

LESS THAN 100kg enoxaparin 40mg daily

100 to 139kg enoxaparin 30mg every 12 hours

GREATER THAN or EQUAL to 140kg enoxaparin 40mg every 12 hours

() For CrCl LESS than 30mL/min - enoxaparin (LOVENOX)

subcutaneous Daily at 1700

enoxaparin (LOVENOX) injection 30 mg, subcutaneous, daily at 1700, Starting S+1, PACU & Post-op
Indication(s):

() For CrCl GREATER than or EQUAL TO 30 mL/min -

enoxaparin (LOVENOX) subcutaneous

enoxaparin (LOVENOX) injection subcutaneous, Starting S+1, PACU & Post-op
Indication(s):

() fondaparinux (ARIXTRA) injection

2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op
If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min.
This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):

() heparin (porcine) injection

5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op

() heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)

5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op
Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.

() heparin (porcine) injection - For Patients with weight GREATER than 100 kg

7,500 Units, subcutaneous, every 8 hours, Starting S+1, PACU & Post-op
For patients with weight GREATER than 100 kg.

() warfarin (COUMADIN) tablet

oral, daily at 1700, Starting S+1, PACU & Post-op
Indication:

() Pharmacy consult to manage warfarin (COUMADIN)

STAT, Until discontinued, Starting S
Indication:

Mechanical Prophylaxis (Single Response) (Selection Required)

() Contraindications exist for mechanical prophylaxis

Routine, Once
No mechanical VTE prophylaxis due to the following contraindication(s):
PACU & Post-op

() Place/Maintain sequential compression device continuous

Routine, Continuous, PACU & Post-op

() HIGH Risk of VTE - Non-Surgical (Selection Required)

High Risk (Selection Required)

High risk of VTE

Routine, Once, PACU & Post-op

High Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)

() Contraindications exist for pharmacologic prophylaxis

Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s):
PACU & Post-op

() enoxaparin (LOVENOX) injection (Single Response) (Selection Required)

Patient renal status: @CRCL@

For patients with CrCl GREATER than or EQUAL to 30mL/min, enoxaparin orders will apply the following recommended doses by weight:

Weight Dose

LESS THAN 100kg enoxaparin 40mg daily

100 to 139kg enoxaparin 30mg every 12 hours

GREATER THAN or EQUAL to 140kg enoxaparin 40mg every 12 hours

() For CrCl LESS than 30mL/min - enoxaparin (LOVENOX)

subcutaneous Daily at 1700

enoxaparin (LOVENOX) injection 30 mg, subcutaneous, daily at 1700, PACU & Post-op
Indication(s):

() For CrCl GREATER than or EQUAL TO 30 mL/min -

enoxaparin (LOVENOX) subcutaneous

enoxaparin (LOVENOX) injection subcutaneous, PACU & Post-op
Indication(s):

() fondaparinux (ARIXTRA) injection

2.5 mg, subcutaneous, daily, PACU & Post-op
If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):

() heparin (porcine) injection

5,000 Units, subcutaneous, every 8 hours, PACU & Post-op

() heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)

5,000 Units, subcutaneous, every 12 hours, PACU & Post-op
Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.

() heparin (porcine) injection - For Patients with weight GREATER than 100 kg

7,500 Units, subcutaneous, every 8 hours, PACU & Post-op
For patients with weight GREATER than 100 kg.

() warfarin (COUMADIN) tablet

oral, daily at 1700, PACU & Post-op
Indication:

() Pharmacy consult to manage warfarin (COUMADIN)

STAT, Until discontinued, Starting S
Indication:

Mechanical Prophylaxis (Single Response) (Selection Required)

() Contraindications exist for mechanical prophylaxis

Routine, Once
No mechanical VTE prophylaxis due to the following contraindication(s):
PACU & Post-op

() Place/Maintain sequential compression device continuous

Routine, Continuous, PACU & Post-op

() HIGH Risk of VTE - Surgical (Hip/Knee) (Selection Required)

High Risk (Selection Required)

High risk of VTE

Routine, Once, PACU & Post-op

High Risk Pharmacological Prophylaxis - Hip or Knee (Arthroplasty) Surgical Patient (Single Response) (Selection Required)

() Contraindications exist for pharmacologic prophylaxis

Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s):
PACU & Post-op

() aspirin chewable tablet

162 mg, oral, daily, Starting S+1, PACU & Post-op

() aspirin (ECOTRIN) enteric coated tablet

162 mg, oral, daily, Starting S+1, PACU & Post-op

() Apixaban and Pharmacy Consult (Selection Required)

apixaban (ELIQUIS) tablet

2.5 mg, oral, 2 times daily, Starting S+1, PACU & Post-op
Indications: VTE prophylaxis

Pharmacy consult to monitor apixaban (ELIQUIS) therapy

STAT, Until discontinued, Starting S
Indications: VTE prophylaxis

() enoxaparin (LOVENOX) injection (Single Response) (Selection Required)

Patient renal status: @CRCL@

For patients with CrCl GREATER than or EQUAL to 30mL/min, enoxaparin orders will apply the following recommended doses by weight:

Weight Dose

LESS THAN 100kg enoxaparin 40mg daily

100 to 139kg enoxaparin 30mg every 12 hours

GREATER THAN or EQUAL to 140kg enoxaparin 40mg every 12 hours

<input type="checkbox"/> For CrCl LESS than 30mL/min - enoxaparin (LOVENOX) subcutaneous Daily at 1700	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	30 mg, subcutaneous, daily at 1700, Starting S+1, PACU & Post-op Indication(s):
<input type="checkbox"/> For CrCl GREATER than or EQUAL TO 30 mL/min - enoxaparin (LOVENOX) subcutaneous	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	subcutaneous, Starting S+1, PACU & Post-op Indication(s):
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> heparin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op For patients with weight GREATER than 100 kg.
<input type="checkbox"/> Rivaroxaban and Pharmacy Consult (Selection Required)	
<input type="checkbox"/> rivaroxaban (XARELTO) tablet for hip or knee arthroplasty planned during this admission	10 mg, oral, daily at 0600 (TIME CRITICAL), PACU & Post-op Indications: VTE prophylaxis
<input type="checkbox"/> Pharmacy consult to monitor rivaroxaban (XARELTO) therapy	STAT, Until discontinued, Starting S Indications: VTE prophylaxis
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1, PACU & Post-op Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op

VTE Risk and Prophylaxis Tool (Single Response)

Low Risk Definition Moderate Risk Definition

Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated. High Risk Definition

Both pharmacologic AND mechanical prophylaxis must be addressed.

Age less than 60 years and NO other VTE risk factors One or more of the following medical conditions: One or more of the following medical conditions:

Patient already adequately anticoagulated CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)

Age 60 and above Severe fracture of hip, pelvis or leg

Central line Acute spinal cord injury with paresis

History of DVT or family history of VTE Multiple major traumas

Anticipated length of stay GREATER than 48 hours Abdominal or pelvic surgery for CANCER

Less than fully and independently ambulatory Acute ischemic stroke

Estrogen therapy History of PE

Moderate or major surgery (not for cancer)

Major surgery within 3 months of admission

[Anticoagulation Guide for COVID patients](#)

URL:

"https://formweb.com/files/houstonmethodist/documents/C
OVID-19 Anticoagulation Guideline - 8.20.2021v15.pdf"

() Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis with Risk Stratification (Single Response) (Selection Required)

() Moderate Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)

Moderate risk of VTE Routine, Once, PACU & Post-op

Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis Routine, Once
No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication.
Therapy for the following:
PACU & Post-op

Place sequential compression device (Single Response)

() Contraindications exist for mechanical prophylaxis Routine, Once
No mechanical VTE prophylaxis due to the following contraindication(s):
PACU & Post-op

() Place/Maintain sequential compression device continuous Routine, Continuous, PACU & Post-op

() Moderate Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)

Moderate risk of VTE Routine, Once, PACU & Post-op

Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis Routine, Once
No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication.
Therapy for the following:
PACU & Post-op

Place sequential compression device (Single Response)

() Contraindications exist for mechanical prophylaxis Routine, Once
No mechanical VTE prophylaxis due to the following contraindication(s):
PACU & Post-op

() Place/Maintain sequential compression device continuous Routine, Continuous, PACU & Post-op

() High Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)

High risk of VTE Routine, Once, PACU & Post-op

<input type="checkbox"/>	Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: PACU & Post-op
<input type="checkbox"/>	Place sequential compression device (Single Response)	
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/>	High Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)	
<input type="checkbox"/>	High risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/>	Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis	Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: PACU & Post-op
<input type="checkbox"/>	Place sequential compression device (Single Response)	
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/>	LOW Risk of VTE (Selection Required)	
<input type="checkbox"/>	Low Risk (Single Response) (Selection Required)	
<input type="checkbox"/>	Low risk of VTE	Routine, Once Low risk: Due to low risk, no VTE prophylaxis is needed. Will encourage early ambulation PACU & Post-op
<input type="checkbox"/>	MODERATE Risk of VTE - Surgical (Selection Required)	
<input type="checkbox"/>	Moderate Risk (Selection Required)	
<input type="checkbox"/>	Moderate risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/>	Moderate Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis BUT order Sequential compression device	"And" Linked Panel
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis	"And" Linked Panel
<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	

Patient renal status: @CRCL@

For patients with CrCl GREATER than or EQUAL to 30mL/min, enoxaparin orders will apply the following recommended doses by weight:

Weight Dose

LESS THAN 100kg enoxaparin 40mg daily

100 to 139kg enoxaparin 30mg every 12 hours

GREATER THAN or EQUAL to 140kg enoxaparin 40mg every 12 hours

For CrCl LESS than 30mL/min - enoxaparin (LOVENOX)
subcutaneous Daily at 1700

enoxaparin (LOVENOX) injection 30 mg, subcutaneous, daily at 1700, Starting S+1, PACU & Post-op
Indication(s):

For CrCl GREATER than or EQUAL TO 30 mL/min -
enoxaparin (LOVENOX) subcutaneous

enoxaparin (LOVENOX) injection subcutaneous, Starting S+1, PACU & Post-op
Indication(s):

fondaparinux (ARIXTRA) injection 2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op
If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):

heparin (porcine) injection 5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op

heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs) 5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op
Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.

heparin (porcine) injection - For Patients with weight GREATER than 100 kg 7,500 Units, subcutaneous, every 8 hours, Starting S+1, PACU & Post-op
For patients with weight GREATER than 100 kg.

warfarin (COUMADIN) tablet oral, daily at 1700, Starting S+1, PACU & Post-op
Indication:

Pharmacy consult to manage warfarin (COUMADIN) STAT, Until discontinued, Starting S
Indication:

Mechanical Prophylaxis (Single Response) (Selection Required)

Contraindications exist for mechanical prophylaxis Routine, Once
No mechanical VTE prophylaxis due to the following contraindication(s):
PACU & Post-op

Place/Maintain sequential compression device continuous Routine, Continuous, PACU & Post-op

MODERATE Risk of VTE - Non-Surgical (Selection Required)

Moderate Risk (Selection Required)

Moderate risk of VTE Routine, Once, PACU & Post-op

Moderate Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)

Contraindications exist for pharmacologic prophylaxis - **"And" Linked Panel**
Order Sequential compression device

Contraindications exist for pharmacologic prophylaxis Routine, Once
No pharmacologic VTE prophylaxis due to the following contraindication(s):
PACU & Post-op

Place/Maintain sequential compression device continuous Routine, Continuous, PACU & Post-op

Contraindications exist for pharmacologic prophylaxis **"And" Linked Panel**
AND mechanical prophylaxis

<input type="checkbox"/>	Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/>	Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<hr/>		
() enoxaparin (LOVENOX) injection (Single Response) (Selection Required)		
Patient renal status: @CRCL@		
For patients with CrCl GREATER than or EQUAL to 30mL/min, enoxaparin orders will apply the following recommended doses by weight: Weight Dose LESS THAN 100kg enoxaparin 40mg daily 100 to 139kg enoxaparin 30mg every 12 hours GREATER THAN or EQUAL to 140kg enoxaparin 40mg every 12 hours		
<hr/>		
() For CrCl LESS than 30mL/min - enoxaparin (LOVENOX) subcutaneous Daily at 1700		
<input type="checkbox"/>	enoxaparin (LOVENOX) injection	30 mg, subcutaneous, daily at 1700, PACU & Post-op Indication(s):
<hr/>		
() For CrCl GREATER than or EQUAL TO 30 mL/min - enoxaparin (LOVENOX) subcutaneous		
<input type="checkbox"/>	enoxaparin (LOVENOX) injection	subcutaneous, PACU & Post-op Indication(s):
<hr/>		
() fondaparinux (ARIXTRA) injection		
		2.5 mg, subcutaneous, daily, PACU & Post-op If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT), do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<hr/>		
() heparin (Single Response)		
	High Risk Bleeding Characteristics Age > 75 Weight < 50 kg Unstable Hgb Renal impairment Plt count < 100 K/uL Dual antiplatelet therapy Active cancer Cirrhosis/hepatic failure Prior intra-cranial hemorrhage Prior ischemic stroke History of bleeding event requiring admission and/or transfusion Chronic use of NSAIDs/steroids Active GI ulcer	
<hr/>		
() High bleed risk		5,000 Units, subcutaneous, every 12 hours Indication for lower dose/frequency:
<hr/>		
() Not high bleed risk (Single Response)		
() Wt > 100 kg		7,500 Units, subcutaneous, every 8 hours
() Wt LESS than or equal to 100 kg		5,000 Units, subcutaneous, every 8 hours
<hr/>		
() warfarin (COUMADIN) (Single Response)		
() WITHOUT pharmacy consult		oral, daily at 1700 Indication:
<hr/>		
() WITH pharmacy consult		
<input type="checkbox"/>	Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:

<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700 Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> HIGH Risk of VTE - Surgical (Selection Required)	
<input type="checkbox"/> High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
Patient renal status: @CRCL@	
For patients with CrCl GREATER than or EQUAL to 30mL/min, enoxaparin orders will apply the following recommended doses by weight: Weight Dose LESS THAN 100kg enoxaparin 40mg daily 100 to 139kg enoxaparin 30mg every 12 hours GREATER THAN or EQUAL to 140kg enoxaparin 40mg every 12 hours	
<input type="checkbox"/> For CrCl LESS than 30mL/min - enoxaparin (LOVENOX) subcutaneous Daily at 1700	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	30 mg, subcutaneous, daily at 1700, Starting S+1, PACU & Post-op Indication(s):
<input type="checkbox"/> For CrCl GREATER than or EQUAL TO 30 mL/min - enoxaparin (LOVENOX) subcutaneous	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	subcutaneous, Starting S+1, PACU & Post-op Indication(s):
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> heparin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, Starting S+1, PACU & Post-op For patients with weight GREATER than 100 kg.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1, PACU & Post-op Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	

<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> HIGH Risk of VTE - Non-Surgical (Selection Required)	
<input type="checkbox"/> High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once, PACU & Post-op
<input type="checkbox"/> High Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	
Patient renal status: @CRCL@	
For patients with CrCl GREATER than or EQUAL to 30mL/min, enoxaparin orders will apply the following recommended doses by weight: Weight Dose LESS THAN 100kg enoxaparin 40mg daily 100 to 139kg enoxaparin 30mg every 12 hours GREATER THAN or EQUAL to 140kg enoxaparin 40mg every 12 hours	
<input type="checkbox"/> For CrCl LESS than 30mL/min - enoxaparin (LOVENOX) subcutaneous Daily at 1700	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	30 mg, subcutaneous, daily at 1700, PACU & Post-op Indication(s):
<input type="checkbox"/> For CrCl GREATER than or EQUAL TO 30 mL/min - enoxaparin (LOVENOX) subcutaneous	
<input type="checkbox"/> enoxaparin (LOVENOX) injection	subcutaneous, PACU & Post-op Indication(s):
<input type="checkbox"/> fondaparinux (ARIXTRA) injection	
2.5 mg, subcutaneous, daily, PACU & Post-op If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):	
<input type="checkbox"/> heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, PACU & Post-op
<input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
<input type="checkbox"/> heparin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, PACU & Post-op For patients with weight GREATER than 100 kg.
<input type="checkbox"/> warfarin (COUMADIN) tablet	oral, daily at 1700, PACU & Post-op Indication:
<input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required)	
<input type="checkbox"/> Contraindications exist for mechanical prophylaxis	Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): PACU & Post-op
<input type="checkbox"/> Place/Maintain sequential compression device continuous	Routine, Continuous, PACU & Post-op
<input type="checkbox"/> HIGH Risk of VTE - Surgical (Hip/Knee) (Selection Required)	
<input type="checkbox"/> High Risk (Selection Required)	
<input type="checkbox"/> High risk of VTE	Routine, Once, PACU & Post-op

[] High Risk Pharmacological Prophylaxis - Hip or Knee
(Arthroplasty) Surgical Patient (Single Response)
(Selection Required)

() Contraindications exist for pharmacologic prophylaxis	Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): PACU & Post-op
() aspirin chewable tablet	162 mg, oral, daily, Starting S+1, PACU & Post-op
() aspirin (ECOTRIN) enteric coated tablet	162 mg, oral, daily, Starting S+1, PACU & Post-op
() Apixaban and Pharmacy Consult (Selection Required)	
[] apixaban (ELIQUIS) tablet	2.5 mg, oral, 2 times daily, Starting S+1, PACU & Post-op Indications: VTE prophylaxis
[] Pharmacy consult to monitor apixaban (ELIQUIS) therapy	STAT, Until discontinued, Starting S Indications: VTE prophylaxis
() enoxaparin (LOVENOX) injection (Single Response) (Selection Required)	

Patient renal status: @CRCL@

For patients with CrCl GREATER than or EQUAL to 30mL/min, enoxaparin orders will apply the following recommended doses by weight:

Weight Dose

LESS THAN 100kg enoxaparin 40mg daily

100 to 139kg enoxaparin 30mg every 12 hours

GREATER THAN or EQUAL to 140kg enoxaparin 40mg every 12 hours

() For CrCl LESS than 30mL/min - enoxaparin (LOVENOX) subcutaneous Daily at 1700	
[] enoxaparin (LOVENOX) injection	30 mg, subcutaneous, daily at 1700, Starting S+1, PACU & Post-op Indication(s):
() For CrCl GREATER than or EQUAL TO 30 mL/min - enoxaparin (LOVENOX) subcutaneous	
[] enoxaparin (LOVENOX) injection	subcutaneous, Starting S+1, PACU & Post-op Indication(s):
() fondaparinux (ARIXTRA) injection	2.5 mg, subcutaneous, daily, Starting S+1, PACU & Post-op If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT):
() heparin (porcine) injection	5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op
() heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs)	5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM, PACU & Post-op Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs.
() heparin (porcine) injection - For Patients with weight GREATER than 100 kg	7,500 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM, PACU & Post-op For patients with weight GREATER than 100 kg.
() Rivaroxaban and Pharmacy Consult (Selection Required)	
[] rivaroxaban (XARELTO) tablet for hip or knee arthroplasty planned during this admission	10 mg, oral, daily at 0600 (TIME CRITICAL), PACU & Post-op Indications: VTE prophylaxis
[] Pharmacy consult to monitor rivaroxaban (XARELTO) therapy	STAT, Until discontinued, Starting S Indications: VTE prophylaxis
() warfarin (COUMADIN) tablet	oral, daily at 1700, Starting S+1, PACU & Post-op Indication:
() Pharmacy consult to manage warfarin (COUMADIN)	STAT, Until discontinued, Starting S Indication:

Mechanical Prophylaxis (Single Response) (Selection Required)

- | | |
|--|--|
| <input type="checkbox"/> Contraindications exist for mechanical prophylaxis | Routine, Once
No mechanical VTE prophylaxis due to the following contraindication(s):
PACU & Post-op |
| <input type="checkbox"/> Place/Maintain sequential compression device continuous | Routine, Continuous, PACU & Post-op |

Labs

COVID-19 Qualitative PCR

- | | |
|---|---|
| <input type="checkbox"/> COVID-19 qualitative RT-PCR - Nasal Swab | STAT For 1 Occurrences
Specimen Source: Nasal Swab
Is this for pre-procedure or non-PUI assessment? Yes
Pre-op |
|---|---|

Laboratory

- | | |
|---|---|
| <input type="checkbox"/> Basic metabolic panel | Once, Pre-op |
| <input type="checkbox"/> Electrolyte panel | Once, Pre-op |
| <input type="checkbox"/> Creatinine level | Once, Pre-op |
| <input type="checkbox"/> BUN level | Once, Pre-op |
| <input type="checkbox"/> Hemoglobin and hematocrit | Once, Pre-op |
| <input type="checkbox"/> CBC with platelet and differential | Once, Pre-op |
| <input type="checkbox"/> Type and screen | Once, Pre-op |
| <input type="checkbox"/> Prothrombin time with INR | Once, Pre-op |
| <input type="checkbox"/> Partial thromboplastin time | Once, Pre-op |
| <input type="checkbox"/> Urinalysis screen and microscopy, with reflex to culture | Once
Specimen Source: Urine
Specimen Site:
Pre-op |
| <input type="checkbox"/> Urinalysis, automated with microscopy | Once, Pre-op |
| <input type="checkbox"/> hCG QUALitative, urine | Once
Release to patient (Note: If manual release option is selected, result will auto release 10 days from finalization.):
Pre-op |
| <input type="checkbox"/> Bedside glucose | Routine, Once, Pre-op |

Imaging

Imaging

- | | |
|--|---|
| <input type="checkbox"/> Chest 2 Vw | Routine, 1 time imaging, Starting S at 1:00 AM For 1 , Pre-op |
| <input type="checkbox"/> XR Abdomen 1 Vw | Routine, 1 time imaging, Starting S at 1:00 AM For 1 , Pre-op |

Other Studies

Other Diagnostic Studies

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> ECG 12 lead | Routine, Once
Clinical Indications:
Interpreting Physician:
Pre-op |
|--------------------------------------|---|

Consults

For Physician Consult orders use sidebar

Consults

- | | |
|---|---|
| <input type="checkbox"/> Consult Anesthesiology | Reason for Consult?
Patient/Clinical information communicated?
Patient/clinical information communicated?
Pre-op |
|---|---|

[] Consult Cardiology	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated? Pre-op
[] Consult Internal Medicine	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated? Pre-op
[] Consult to Nutrition Services	Reason For Consult? Purpose/Topic: Pre-op
[] Consult to Spiritual Care	Reason for consult? Pre-op
[] Consult to Case Management	Consult Reason: Pre-op
[] Consult to Social Work	Reason for Consult: Pre-op