

(place patient label here)

Patient Name: _____



PROVIDER ORDERS

Order Set Directions:

- > (✓)- Check orders to activate; Orders with pre-checked box will be followed unless lined out.
- > Initial each place in the pre-printed order set where changes such as additions, deletions or line outs have been made
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Diagnosis: _____

Allergies with reaction type: _____

Vascular Lower Extremity Intervention- Postprocedure Activity

Version 2 10/26/2015

- Up to chair
- 3 times a day beginning post op day 1
- Bed rest HOB 0- 35 degrees x _____ hours

Diet

- Advance diet as tolerated to goal diet: HEART HEALTHY

Nursing Orders

- Vital Signs Post Procedure Q 15 min x 4, Q 30 min x 2, Q1H x 2 then per unit standard
- Vascular checks: every 15 minutes x 4, every 30 min x 2, every hour x 2 then with routine vital signs
- Encourage oral fluids
- Initiate Straight Cath/BVI Protocol if unable to void for more than 6 hours

Notify provider

- Changes in CMS to affected extremity
- Hematoma or bleeding at access site

Respiratory

- Oxygen Delivery RN/RT to Determine Titrate to maintain Oxygen saturation greater than 94%
- Pulse oximetry , continuous until awake and alert and O2 sat remains >94% then routine with vital signs

IV/ Line Insert and/or Maintain

- Peripheral IV insert/maintain
- Convert Peripheral IV to Saline Lock

IV Fluids

- Sodium Chloride 0.9% IV
- 125 milliliter/hour or _____ milliliter/hour Discontinue @ _____ (or at discharge)

Estimated GFR is less than 60 Select One:

- Sodium Chloride 0.9% IV
- 125 milliliter/hour x 12 hours
- Sodium Bicarbonate in D5W 150 mEq/1,000 mL IV
- 125 milliliter/hour x 6 hours
- Consult to nephrology for IV fluid recommendations
- Convert Peripheral IV to Saline Lock after IV fluid discontinued if patient not ready for discharge

Medications

Anticoagulants

- enoxaparin (LOVENOX)
- 1 milligram/kilogram subcutaneously every 12 hours
- 1 milligram/kilogram subcutaneously every 24 hours (Select if GFR < 30 ml/min)

warfarin (COUMADIN) without loading dose

- warfarin (COUMADIN)
- 5 milligram orally once a day start on _____
- 10 milligram orally once a day start on _____

warfarin (COUMADIN) with loading dose SELECT BOTH

- warfarin (COUMADIN)
- 10 milligram orally once start on _____ Loading dose
- 5 milligram orally once a day start on _____ maintenance dose start day after loading dose

Initials _____

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Platelet Inhibitors

aspirin

- 81 milligram orally once a day
- 325 milligram orally once a day

clopidogrel (PLAVIX)

- 300 milligram orally once loading dose
- 75 milligram orally once a day maintenance dose

ticagrelor (BRILINTA)

- 180 milligram orally once loading dose
- 90 milligram orally 2 times a day maintenance dose

Laboratory

Morning Draw:

- CBC/ NO DIFF
- BASIC METABOLIC PANEL
- LIPID PROFILE

Diagnostic Tests

US Arterial Duplex Lower Ext Left Right Bilateral

- in AM; Reason for exam: _____

US Ankle Brachial Index

- routine; Reason for exam: _____; Resting or treadmill exercise Yes No

●(Order for day patient to be discharged)

Consults

- Physician to physician notification preferred.

- Consult provider to provider: _____
- Consult Cardiac Rehab Reason for consult: cardiovascular risk factor management
- Consult Dietitian Reason for consult: heart healthy diet teaching or _____
- PT Physical Therapy Eval & Treat Reason for consult: _____

Provider Signature: _____ Date: _____ Time: _____