

(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
- > Initial each page and Sign/Date/Time last page

Diagnosis: _____
Allergies with reaction type: _____

LUMBAR OR CERVICAL DECOMPRESSION, DISCECTOMY LAMINECTOMY POST-OP - DR. DUBE
RX = LUMBDUBE

Version 6 Approved 11/27/2018

1. Postop Vitals every 15 min. X 4, every ½ hour X 4, every 1 hour X 4, then every 4 hours
2. Neuro Checks every 1 hrs x 4, then every 4 hrs,
3. Out of bed with assistance when fully awake. Ambulate in halls.
4. D5 1/2 NS with 20 mEq KCL/liter at 80 ml/hour.
Saline Lock IV when po intake adequate and tolerating oral pain pills.
5. ANTIBIOTICS: _____
6. PCA pump (Morphine or Demerol) standard settings per protocol, severe pain. (Circle one)
7. Tylenol 650 mg po q 4 hours PRN. - pain/fever.
8. Laxative of choice.
9. Oral Pain med: moderate pain (fill in)
10. Clear liquids when awake, advance as tolerated.
11. Straight cath PRN _____
12. Check box if ordered:
 SCD AVI Thigh TEDS Knee TEDs

Initials _____

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VTE Prophylaxis

Step 1: VTE Risk Assessment: SELECT ONE RISK CATEGORY

- LOW RISK- FEW PATIENTS FALL IN THIS CATEGORY (Includes ambulatory patients WITHOUT additional VTE risk factors [see Appendix 1 for risk factors]) No specific measure required, early ambulation
Order for all LOW risk patients IF not already ordered.
Ambulate 3 times a day
MODERATE RISK- ANY PATIENT NOT IN LOW RISK OR HIGH RISK CATEGORY-MOST PATIENTS FALL IN THIS CATEGORY (Patients with one or more VTE risk factors)
HIGH RISK- ANY PATIENT NOT IN LOW OR MODERATE RISK CATEGORY (Includes: Elective major lower extremity arthroplasty, hip, pelvic or surgery, lower extremity fracture, acute spinal cord injury with paresis, multiple major trauma, abdominal or pelvic surgery for cancer)

Step 2: Order Prophylaxis

- Prophylaxis already addressed post-operatively- See post-op orders

Pharmacological VTE Prophylaxis

- Order for MODERATE and HIGH risk patients unless contraindicated

- No pharmacological prophylaxis due to the following contraindications: SELECT ALL THAT APPLY

CONTRAINDICATIONS

Absolute

- Active hemorrhage or high risk for hemorrhage
Severe trauma to head or spinal cord WITH hemorrhage in last 4 wks

Relative

- Craniotomy in last 2 weeks
Intracranial hemorrhage in 12 mos.
Intraocular surgery in last 2 wks
GI, GU hemorrhage in last 30 days
Thrombocytopenia (< 50,000)
Coagulopathy (PT > 18 sec)
Active intracranial lesions/ neoplasms
Hypertensive emergency
Post-op bleeding concerns
Scheduled to return to OR in the next 24 hrs
Epidural catheters or spinal block
End stage liver disease

OTHER:

Medications

enoxaparin (LOVENOX)

- 40 milligram subcutaneously once a day
30 milligram subcutaneously once a day for impaired renal function- GFR less than 30 mL/min

heparin

- 5,000 unit subcutaneously every 12 hours
5,000 unit subcutaneously every 8 hours

- Select fondaparinux (ARIXTRA) ONLY IF suspected or known history of immune-mediated HIT OR allergy to enoxaparin (LOVENOX)

fondaparinux (ARIXTRA)

- 2.5 milligram subcutaneously once a day DO NOT USE if GFR less than 30mL/min
Other Medication:

Laboratory

- CBC without differential every 3 days IF pharmacological prophylaxis is ordered

Mechanical VTE Prophylaxis

- Order for HIGH risk patients and MODERATE risk patients without pharmacological prophylaxis

- No mechanical prophylaxis due to the following contraindications: SELECT ALL THAT APPLY

Mechanical Contraindications

- Bilateral lower extremity amputee
Bilateral lower extremity trauma
Other:

Intermittent pneumatic compression

- Sequential compression device (SCD)
Arterial venous impulses (AVI)

Apply anti-embolic stockings (graduated)

- knee high
thigh high

Provider Signature: Date: Time: