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DRUG AND TREATMENT ORDERS
GYN Major Surgery

Available at:  
BMC-B
BMC-D
BMC-N
BMC-S

PACE
Nursing Orders

- Initiate ANES Anesthesia PACE PowerPlan
- Patient Education
  - Turn and cough instructions, PCA and instructions. Instruct patient on the use of Incentive Spirometer. Document baseline effort in mL
- Patient Education
  - PCA instructions
- ***(NOTE)*** Select the "Transfuse Blood Previously on Hold" order below, to transfuse blood on hold
- Transfuse Blood Previously on Hold

Laboratory

- GEN Pre-Operative Labs(SUB)*
  - ***Reminder: Order Gen Pre-Operative Labs (SUB) as a separate form***
- Type and Screen
  - Blood
  - ***(NOTE)*** If wanting to place specific blood products on Hold, select the GEN Blood Administration subphase and select your products with a Transfusion Priority of Hold
- GEN Blood Administration(SUB)*
  - ***Reminder: Order GEN Blood Administration (SUB) as a separate form***
- Pregnancy Screen Serum
  - Pre-Op, Blood, ONCE
- Pregnancy Screen Urine
  - Pre-Op, URINE, ONCE

Radiology

- ***(NOTE)*** If not done in previous six months at Baptist Health
- XR Chest *2 view PA and LAT
  - Pre-op, Pre-op, Pending Discharge - No, ONCE

Cardiology

- ***(NOTE)*** If not done in previous six months at Baptist Health
- EKG Standard
  - Pre-op, ONCE

GYN Pre-Op
Non Categorized

- Surgical Care Quality Measures

Diet

- NPO
  - NPO except for meds with sip of water

Nursing Orders

- Initiate ANES Anesthesia Pre-Op PowerPlan
- Clip and Prep
  - Perineum, ONCE

PHYSICIAN SIGNATURE ____________________________ DATE ________ TIME _______

DRUG ALLERGIES

WT: _______ KG _______

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**DRUG AND TREATMENT ORDERS**

**GYN Major Surgery**

Sequential Compression Device
- ☑ Bilateral knee high, applied in holding (DEF)*
  - ☐ Bilateral thigh high, applied in holding

☐ Communication Order

Instruct patient on the use of Incentive Spirometer. Document baseline effort in mL.

***:(NOTE)*** Select the "Transfuse Blood Previously on Hold" order below, to transfuse blood on hold

☐ Transfuse Blood Previously on Hold

**Medications**

- ☐ Reason Beta Blocker Not Administered Peri-Operatively

**Anticoagulants**

***:(NOTE)*** VTE Prophylaxis

- ☐ Reason Surgical Care VTE Mechanical Prophylaxis Not Ordered
- ☐ Reason Surgical Care VTE Pharmacological Prophylaxis Not Ordered
  - heparin (subcutaneous)
    - ☑ 5,000 unit inj SUBCUT Q12H (DEF)*
    - ☑ 5,000 unit inj SUBCUT Q8H Int
  - enoxaparin (Lovenox)
    - ☑ 40 mg inj SUBCUT DAILY (DEF)*
    - ☑ 30 mg inj SUBCUT DAILY, Clinical Instructions: If creatinine clearance is LESS than 30 mL/min

**Antibiotics**

- cefazolin (Ancef)
  - ☑ 1 g bag IVPB PRE-OP, Clinical Instructions: Patient weight LESS than 80 kg. (DEF)*
    - Comments: Antibiotics to be Administered within 60 minutes prior to incision. Infuse over 30 minutes.
  - ☑ 2 g bag IVPB PRE-OP, Clinical Instructions: Patient weight is between 80 kg and 120 kg.
    - Comments: Antibiotics to be Administered within 60 minutes prior to incision. Infuse over 30 minutes.
  - ☑ 3 g bag IVPB PRE-OP, Clinical Instructions: Patient weight GREATER than 120 kg.
    - Comments: Antibiotics to be Administered within 60 minutes prior to incision. Infuse over 30 minutes.
- ampicillin-sulbactam (Unasyn)
  - 1.5 g bag IVPB PRE-OP
    - Comments: Antibiotics to be Administered within 60 minutes prior to incision

***:(NOTE)*** IF ALLERGIC TO PENICILLIN select ONE of the following SubPhases:

- ☑ SUB Cleocin (clindamycin) & Garamycin (gentamicin)(SUB)*
  - ☑ The above subphase is available at the end of the plan***
- ☑ SUB Flagyl (metronidazole) & Garamycin (gentamicin)(SUB)*
  - ☑ The above subphase is available at the end of the plan***

**Laboratory**

- ☐ GEN Pre-Operative Labs(SUB)*
  - ☑ Remind: Order GEN Pre-Operative Labs (SUB) as a separate form***
- ☐ Type and Screen

  **Blood**

- ☑ (NOTE)*** If wanting to place specific blood products on Hold, select the GEN Blood Administration subphase and select your products with a Transfusion Priority of Hold

***:(NOTE)*** If想要 to place specific blood products on Hold, select the GEN Blood Administration subphase and select your products with a Transfusion Priority of Hold

**PHYSICIAN SIGNATURE**

Date ___________________________ Time ____________

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**DRUG ALLERGIES**

WT: KG

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<thead>
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<th>DRUG ALLERGIES</th>
<th>WT:</th>
<th>KG</th>
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**DRUG AND TREATMENT ORDERS**
GYN Major Surgery

☐ GEN Blood Administration(SUB)*

***Reminder: Order GEN Blood Administration (SUB) as a separate form***

☐ Pregnancy Screen Serum

Pre-Op, Blood, ONCE

☐ Pregnancy Screen Urine

Pre-Op, URINE, ONCE

**Radiology**

***(NOTE)***If not done in previous six months at Baptist Health

☐ XR Chest *2 view PA and LAT

Pre-op, Pre-op, Pending Discharge - No, ONCE

**Cardiology**

***(NOTE)***If not done in previous six months at Baptist Health

☐ EKG Standard

Pre-op, ONCE

**Intra-Op Nursing Orders**

☐ Indwelling Urinary Catheter (Foley)(SUB)*

***Reminder: Order Indwelling Urinary Catheter (Foley) (SUB) as a separate form***

☐ Sequential Compression Device

Knee high at 40 mm Hg to bilateral legs intraoperatively

☐ Abdominal Binder

**Medications**

**Local Anesthetic Agents**

☐ Intra-Op Medication (Volume Medication)

Marcaine 0.25% MDV inj soln 1 dose INfiltrate Periop_ONCE

Comments: To Sterile Field

☐ Intra-Op Medication (Volume Medication)

Marcaine 0.5% MDV inj soln 1 dose INfiltrate Periop_ONCE

Comments: To Sterile Field

☐ Intra-Op Medication (Volume Medication)

Marcaine 0.25%-Epinephrine 1:200,000 MDV inj 1 dose INfiltrate Periop_ONCE

Comments: To Sterile Field

☐ Intra-Op Medication (Volume Medication)

Marcaine 0.5%-Epinephrine 1:200,000 MDV inj 1 dose INfiltrate Periop_ONCE

Comments: To Sterile Field

☐ Intra-Op Medication (Volume Medication)

Xylocaine 1% MDV inj soln 1 dose INfiltrate Periop_ONCE

Comments: To Sterile Field

☐ Intra-Op Medication (Volume Medication)

Xylocaine 1%-epinephrine 1:100,000 MDV inj 1 dose INfiltrate Periop_ONCE

Comments: To Sterile Field

☐ Intra-Op Medication (Volume Medication)

Naropin (5mg/mL) 1 dose INfiltrate Periop_ONCE

Comments: To Sterile Field

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DRUG ALLERGIES

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**DRUG AND TREATMENT ORDERS**

**GYN Major Surgery**

**Irrigants**

- Intra-Op Medication (Volume Medication)
  - **acetic acid 3% irrigation solution 10mL IRRIGATE PERIOP_ONCE**
    - Comments: Unavailable at Baptist Nassau

- Intra-Op Medication (Volume Medication)
  - **Bacitracin 50,000 Units/NS 500 mL 500 mL IRRIGATE PERIOP_ONCE**

- Intra-Op Medication (Volume Medication)
  - **Dakins Solution 0.025% Topical 30 mL IRRIGATE PERIOP_ONCE**

- Intra-Op Medication (Volume Medication)
  - **Methylene Blue 50 mg/ Normal Saline 250 mL 250 mL IRRIGATE PERIOP_ONCE**

**Hemostatic Agents**

- Intra-Op Medication (Volume Medication)
  - **Surgicel 1 unit TOPICAL PERIOP_ONCE**
    - Comments: To Sterile Field for hemostasis

- Intra-Op Medication (Volume Medication)
  - **Gelfoam Sponge 1 dose TOPICAL PERIOP_ONCE**
    - Comments: Mix large sponge with thrombin 10,000 units topically for hemostasis

- Intra-Op Medication (Volume Medication)
  - **thrombin topical 5000 u powder for reconstit 1 dose TOPICAL PERIOP_ONCE**
    - Comments: For Baptist Nassau

- Intra-Op Medication (Volume Medication)
  - **thrombin topical 10000 u powder for reconstit 1 dose TOPICAL PERIOP_ONCE**
    - Comments: Mix with gelfoam sponge to surgical field for hemostasis. Unavailable at Baptist Nassau

**Anticoagulants**

- Intra-Op Medication (Volume Medication)
  - **Heparin Flush 100 units/mL 1 vial ICATH PERIOP_ONCE**
    - Comments: Mix with 100 mL Normal Saline to sterile field for porta-cath

- Intra-Op Medication (Volume Medication)
  - **Heparin 1000 units/10mL PERIOP_ONCE**

- Intra-Op Medication (Volume Medication)
  - **Heparin 100 units/10mL PERIOP_ONCE**

- Intra-Op Medication (Volume Medication)
  - **Heparin 1000 units/Normal Saline 500mL PERIOP_ONCE**

**Miscellaneous Intra-Op Medications**

- Intra-Op Medication (Volume Medication)
  - **Bacitracin Topical Ointment 1 dose TOPICAL PERIOP_ONCE**
    - Comments: To Sterile Field

- Intra-Op Medication (Volume Medication)
  - **Premarin Vaginal Cream 1 dose TOPICAL PERIOP_ONCE**
    - Comments: To Sterile Field. Unavailable at Baptist Nassau

- Intra-Op Medication (Volume Medication)
  - **Botox INFILTRATE PERIOP_ONCE**
    - Comments: To Sterile Field

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**DRUG ALLERGIES ________________________________ WT: __________ KG __________

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**DRUG AND TREATMENT ORDERS**

**GYN Major Surgery**

- Intra-Op Medication (Volume Medication)
  - Mannitol 20% Iso-osmotic Solution 500 mL IV PERIOP_ONCE
  - Comments: To Sterile Field

- Intra-Op Medication (Volume Medication)
  - Mineral Oil 10 mL TOPICAL PERIOP_ONCE
  - Comments: ToSterile Field

- Intra-Op Medication (Volume Medication)
  - Silvadene 1% Topical 1 dose TOPICAL PERIOP_ONCE
  - Comments: To Sterile Field

- Intra-Op Medication (Volume Medication)
  - Silver Nitrate Topical 1 dose TOPICAL PERIOP_ONCE
  - Comments: To Sterile Field

- Intra-Op Medication (Strength Medication)
  - Methylene Blue 50mg IV PERIOP_ONCE
  - Comments: To Sterile Field

- Intra-Op Medication (Strength Medication)
  - Pitocin 10 units IV PERIOP_ONCE
  - Comments: To Sterile Field

- Intra-Op Medication (Strength Medication)
  - Pitressin 20 units IV PERIOP_ONCE
  - Comments: To Sterile Field Mix with 100 mL Normal Saline

**GYN Major Post-Op**

**Condition/Status**

- Patient Status Inpatient
  - Patient Status: Inpatient, Level of Care: Med/Surg without Telemetry (1)

- Place in Observation
  - Patient Status: Outpatient- Refer for Observation Status, Level of Care: Med/Surg without Telemetry (1)

**Vital Signs**

- **Vital Signs**
  - Q2H Int, 24 hour (DEF)*
  - Q4H Int, 24 hour

- **+24 Hours Vital Signs**
  - Q4H (DEF)*
  - Q8H

**Activity**

- **Activity**
  - Bedrest (DEF)*
    - Comments: Day of Surgery

- Bedrest with BRP
  - Comments: Day of Surgery

- Out of Bed to Chair
  - Comments: Day of Surgery

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DRUG ALLERGIES

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**DRUG AND TREATMENT ORDERS**

**GYN Major Surgery**

- **+20 Hours** Activity
  - Ambulate with Assistance, Q8H
  - Comments: Ambulate with assistance at least every shift beginning on POD 1.

- **+44 Hours** Activity
  - Ambulate in Hall, Q8H
  - Comments: Ambulate in hall at least every shift beginning on POD 2.

- **+44 Hours** Shower
  - ☑ May shower (DEF)*
  - Comments: With assistance on POD 1
  - ☑ May shower
  - Comments: With assistance on POD 2

**Diet**

- ☑ Diet Order
  - Clear Liquid, Advance as Tolerated to Regular--adult menu

- ☐ NPO

**Nursing Orders**

- ☑ GYN Bladder Sling Post-Op(SUB)*
  - ***Reminder: Order GYN Bladder Sling Post-Op (SUB) as a separate form***
  - Intake and Output
    - ☑ Q8H (DEF)*
    - ☐ Q4H

- ☑ Abdominal Binder

- ☑ Indwelling Urinary Catheter Care
  - Q12H

- ☑ Discontinue Indwelling Urinary Catheter
  - Discontinue Criteria: Post Op Day #1. In AM, if urine bloody do not remove foley, Special Instructions: Do bladder scan if patient unable to void within 6 hours of removal of urinary catheter UNLESS other instructions are specified. If residual is GREATER

- ☑ Straight Catheterization
  - Q6H, PRN Order
  - Comments: If unable to void, 2 times, on third cath insert Foley

- ☑ Sequential Compression Device
  - ☑ Bilateral knee high (DEF)*
  - Comments: Until ambulatory
  - ☐ Bilateral thigh high
  - Comments: Until ambulatory

- ☑ Ted Hose
  - ☑ Bilateral knee high (DEF)*
  - ☑ Bilateral thigh high

- ☑ Turn and Cough
  - Q2H

- ☑ Convert IV to INT
  - Post op day #1
  - Comments: In AM, if tolerating liquids

**PHYSICIAN SIGNATURE** ___________________________ **DATE** _______ **TIME** _______

**DRUG ALLERGIES**

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DRUG AND TREATMENT ORDERS
GYN Major Surgery

☐ Notify Provider Vital Signs/Urine Output
  Temperature > 101 after 24 hrs pt. op, HR > 120, SBP < 90, DBP < 50, Urine Output < 120 mL in 4 hours

☐ Reason Referral for Addictions Treatment Not Provided

Medications
☐ Reason for Extending PostOp Antibiotics Past 24 Hours
☐ Reason Beta Blocker Not Administered Peri-Operatively
☐ Reason Tobacco Cessation Med Not Given
☐ Reason Alcohol/Substance Abuse Medication Not Prescribed

Analgesics
☐ ANES Patient Controlled Analgesia (PCA)(SUB)*
  ***Reminder: Order ANES Patient Controlled Analgesia (PCA) (SUB) as a separate form***
  ☐ morphine
    2 mg inj IV PUSH Q2H, PRN Pain Moderate/Severe
    Comments: Use for breakthrough pain not relieved by PO pain meds or if unable to tolerate PO.
  ☐ hydromorphone (Dilaudid)
    0.5 mg inj IV PUSH Q2H, PRN Pain Moderate/Severe
    Comments: If ineffective in 15 minutes, may give an additional 0.5 mg IV. If a second dose is required in 15 minutes, may begin next scheduled dose at 1 mg. Not to exceed 1 mg in a two hour period. Use for breakthrough pain not relieved by PO pain meds or if unable to tolerate PO.
  ☐ acetaminophen-oxycodone (Percocet 5 mg/325 mg)
    1 tab PO tab Q4H, PRN Pain Moderate/Severe
    Comments: Once tolerating oral route. If ineffective in 1 hour, may give an additional tablet. If a second dose is required in 1 hour, may begin next scheduled dose at two tablets. Not to exceed two tablets in a four hour period.
  ☐ ibuprofen (Motrin)
    800 mg tab PO Q8H, PRN Pain Moderate
    Comments: for breakthrough pain
  ☐ acetaminophen (Tylenol)
    650 mg tab PO Q4H, PRN Other (see comment)
    Comments: PRN pain mild OR temperature GREATER than 101 degrees Fahrenheit.

Antiemetics
☐ ondansetron (Zofran)
    4 mg inj IV PUSH Q6H, PRN Nausea/Vomiting
    Comments: Unless otherwise specified, ondansetron (Zofran) serves as the first line anti-emetic.
  ☐ promethazine (Phenergan)
    12.5 mg inj IV PUSH Q6H, PRN Nausea/Vomiting
    Comments: Give additional 12.5 mg IV if no effect in 30 minutes. If the patient has an IV infusing, the promethazine should be mixed in 20 mL of saline and administered slowly over at least 3 minutes at the port furthest away from the IV insertion site. If the patient does not have an IV infusing, the promethazine should be mixed in 50 mL bag of saline and administered over 15 minutes. Unless otherwise specified, ondansetron (Zofran) serves as the first line anti-emetic.
  ☐ metoclopramide (Reglan)
    ☐ 10 mg inj IV PUSH QID, PRN Nausea/Vomiting (DEF)*
    ☐ 10 mg tab PO QID, PRN Nausea/Vomiting

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DRUG ALLERGIES

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DRUG AND TREATMENT ORDERS
GYN Major Surgery

Anticoagulants

***(NOTE)***VTE Prophylaxis

☐ Reason Surgical Care VTE Mechanical Prophylaxis Not Ordered
☐ Reason Surgical Care VTE Pharmacological Prophylaxis Not Ordered

***(NOTE)***Heparin to be started 12 hours AFTER surgery. Please modify the Order Offset details to reflect 12 hours post-surgery.

heparin (subcutaneous)

☐ 5,000 unit inj SUBCUT Q12H (DEF)*
☐ 5,000 unit inj SUBCUT Q8H Int

enoxaparin (Lovenox)

☐ 40 mg inj SUBCUT DAILY (DEF)*
☐ 30 mg inj SUBCUT DAILY, Clinical Instructions: If creatinine clearance is LESS than 30 mL/min

Gastrointestinal Agents

☐ docusate (Colace)

100 mg cap PO BID
Comments: when tolerating diet

☐ +24 Hours docusate-senna (Peri-Colace)

1 tab PO BEDTIME
Comments: Give dose evening of Post op day #1 only if active bowel sounds present then every bedtime until bowel movement

+22 Hours bisacodyl (Dulcolax)

☐ 10 mg tab EC PO DAILY, PRN Constipation (DEF)*
Comments: may initiate 24 hours post-op only if active bowel sounds present

☐ 10 mg tab EC PO BID, PRN Constipation
Comments: may initiate 24 hours post-op only if active bowel sounds present

☐ 10 mg supp PR DAILY, PRN Constipation
Comments: may initiate 24 hours post-op only if active bowel sounds present

☐ 10 mg supp PR BID, PRN Constipation
Comments: may initiate 24 hours post-op only if active bowel sounds present

☐ simethicone (Mylicon)

160 mg tab chew PO Q4H, PRN Other (see comment)
Comments: gas

☐ sodium biphosphate-sodium phosphate (Fleet Enema)

1 dose PR enema BID, PRN Constipation
Comments: may initiate 24 hours post-op only if active bowel sounds present

Anti-pruritics

diphenhydRAMINE (Benadryl)

☐ 25 mg cap PO Q4H, PRN Itching (DEF)*

☐ 12.5 mg inj IV PUSH Q4H, PRN Itching, Clinical Instructions: If ineffective may repeat in 15 minutes

☐ 25 mg IM Q4H, PRN Itching

Sleep Aids

☐ zolpidem (Ambien)

5 mg tab PO BEDTIME, PRN Sleep/Insomnia

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DRUG ALLERGIES

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**DRUG AND TREATMENT ORDERS**

**GYN Major Surgery**

**Hormone Replacement**
estradiol (Climara)
- 0.05 mg patch TOPICAL QWEEK (DEF)*
  - Comments: transdermal
- 0.1 mg patch TOPICAL QWEEK
  - Comments: transdermal

**IV Solutions**
Lactated Ringers Injection (LR)
- 1,000 IV bag 125 mL/hour (DEF)*
- 1,000 IV bag 150 mL/hour
Dextrose 5% in Lactated Ringers Injection
- 1,000 IV bag 125 mL/hour (DEF)*
- 1,000 IV bag 150 mL/hour
Dextrose 5% in Water
- 1,000 IV bag 125 mL/hour (DEF)*
- 1,000 IV bag 150 mL/hour

**Laboratory**
- Hemoglobin and Hematocrit
  - Expedite/ASAP, Blood, ONCE
- +8 Hours Hemoglobin and Hematocrit
  - Timed Study, Blood, ONCE
  - Comments: 8 hours post-op
- Hemoglobin and Hematocrit
  - Early AM, Blood, ONCE
  - CBC.
  - Expedite/ASAP, Blood, ONCE (DEF)*
  - Early AM, Blood, ONCE

**Respiratory**
- O2 Therapy.
  - Nasal Cannula, 2, May titrate to maintain O2 sat GREATER than 92%
- Pulse Oximetry (Continuous)
  - Special Instructions: Q12H RT
  - Comments: Q8H sensor site must be inspected. IF circulatory condition or skin integrity has changed, the sensor should be applied to a different site.
- Pulse Oximetry (Intermittent)
  - Routine
- Incentive Spirometry
  - Routine, Q2H RT while awake x 48 hours
  - +48 Hours Incentive Spirometry
  - Routine, QID RT

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**PHYSICIAN SIGNATURE**

| ______________________________ | DATE | TIME |
| ______________________________ | _______ | _______ |

**DRUG ALLERGIES**

| WT: | KG |
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DRUG AND TREATMENT ORDERS
GYN Major Surgery

SUB Cleocin (clindamycin) & Garamycin (gentamicin)
Medications

- Cleocin
  600 mg bag IVPB PRE-OP
  Comments: Begin within 60 minutes of surgical incision

- Garamycin
  120 mg bag IVPB PRE-OP
  Comments: Begin within 60 minutes of surgical incision

SUB Flagyl (metronidazole) & Garamycin (gentamicin)
Medications

- Flagyl
  500 mg bag IVPB PRE-OP
  Comments: Begin within 60 minutes of surgical incision

- Garamycin
  120 mg bag IVPB ONCALL
  Comments: Begin within 60 minutes of surgical incision

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