

NEP / PREP for SURGERY ORDER – Non-Epic Community Providers

Page 1 of 3

PAPER ONLY



Form:30403000001

OSSC Date:3/21/2022

Date of Encounter: _____

Patient Name: _____

Date of Birth: _____

Surgeon Name: _____

Surgery: _____

Diagnosis: _____

ADMIT STATUS:

- Admit to Inpatient Place in Observation Place as Outpatient
- Admitting Physician _____ (Inpatient)

CODE STATUS:

- Full Code / Attempt Resuscitation
- DNAR / DNI - Allow Natural Death (Do NOT attempt Resuscitation / Do NOT intubate)
- Do NOT Intubate (DNI) May administer CPR and ACLS protocols but do NOT intubate.
- DNAR but May Intubate (No CPR / ACLS, but intubation due to respiratory failure is acceptable)
- DNAR / Cardiac Medications Only (May administer emergency medications only without CPR or intubation)
- DNAR / DNI – Comfort Measures Only (Measures include interventions to alleviate the patients misery short of heroic)

ANTICOAGULANTS:

- Continue _____ (med, dose, frequency)
- Discontinue _____ (med, dose)
- Frequency _____ Days prior to surgery.
- Notify Physician If Medication Taken Outside of Discontinuation Timeframe.

■ MRSA Decolonization Orders:

- Nozin Nasal Sanitizer x 2 swabs to bilateral nares in Pre-op
- chlorhexidine gluconate (CHG) Bath:
 - (CHG) Bath x 2 on the day before surgery
 - (CHG) bath morning of surgery

ORAL RINSE:

- chlorhexidine (Peridex) solution 0.12%, 15mL ONCE, Mouth / Throat. for 1 Dose, Pre-op

INFORMED CONSENT:

- Verify Informed Consent – Routine
 - Procedure _____

PRE-ADMISSION TESTING:

- MAY USE CURRENT LABS
- COVID Testing by PCR

LAB- Microbiology

- MRSA Screen by PCR
- MRSA Screen Culture
- MRSA / MSSA Swab

CHEMISTRY:

- COMPREHENSIVE METABOLIC PANEL BASIC METABOLIC PANEL MAGNESIUM PHOSPHORUS
- CALCIUM, Ionized BLOOD GASES, ARTERIAL

HEMATOLOGY:

- CBC Without DIFF Hemoglobin A1C CBC with DIFF
- SEDIMENTATION Rate CRP (High Sensitivity)
- TYPE and SCREEN

COAGULATION STUDIES:

- Prothrombin Time and INR PTT

URINALYSIS:

- Urinalysis with Microscopic (Reflex Culture if Lab Collect Indicated)

URINE PREGNANCY:

- HCG, Urine
- OTHER Labs: _____
- Labs per Anesthesia: _____

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Page 2 of 3

PAPER ONLY



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IMAGING AND CARDIAC TESTING:

- EKG 12 lead
- XR Chest 1 View
- XR Chest 2 View
- CT Abdomen Pelvis Without and With Contrast

DAY OF SURGERY:

Anesthesia Type: _____

LABS: STAT ON ADMISSION TO PRE-OP

CHEMISTRY:

- COMPREHENSIVE METABOLIC PANEL BASIC METABOLIC PANEL MAGNESIUM PHOSPHORUS
- HCG, Quantitative BLOOD GASES, Arterial
- CALCIUM, Ionized (TRH only)
- CALCIUM, Ionized

HEMATOLOGY:

- CBC With DIFF
- HEMOGLOBIN

LAB TYPE AND SCREEN:

- Type and Screen
- Type and Crossmatch for _____ units.
- Transfuse _____ unit, pre-op

COAGULATION STUDIES:

- Prothrombin Time and INR
- aPTT
- Platelet Function Analysis

URINALYSIS:

- Urinalysis with Microscopic (Reflex Culture if ONCE)

IMAGING:

X-Ray

- XR Chest PA and Lateral
- XR Chest 1 View
- KUB

OTHER TESTS:

EKG - ECG for all patients greater than or equal to 50 years old. Taken within 6 months of surgery, unless otherwise indicated, will be accepted if normal. If known cardiac disease, EKG within 2 weeks.

- EKG, 12 Lead

DVT / VTE PROPHYLAXIS:

Mechanical Prophylaxis for DVT / VTE:

- No Mechanical VTE Prophylaxis Needed due to Very Low Risk Surgical or Low Risk Medical Patient
- Medical Patient on Pharmacologic VTE Prophylaxis: Mechanical Prophylaxis NOT indicated.
- Place Knee High Sequential Compression Device
- Place Knee High TED Hose Pre-op
- Other Reason for No Mechanical VTE Prophylaxis – Reason for no mechanical VTE prophylaxis at admission Pre-op

Pharmacologic Prophylaxis for DVT / VTE:

- No Pharmacologic VTE Prophylaxis Needed Low Medical or Low / Very Low Surgical VTE Risk
- enoxaparin (Lovenox) injection, 40 mg ONCE, Subcutaneous, for 1 Dose, Pre-op
 - Administer 1 to 2 hours prior to surgery.
- enoxaparin (Lovenox) injection, 30 mg ONCE, Subcutaneous, for 1 Dose, Pre-op
 - Administer 1 to 2 hours prior to surgery.
- heparin (porcine) injection, 5,000 Units ONCE, Subcutaneous, for 1 Dose, Pre-op
 - Administer 1 to 2 hours prior to surgery.

NEP / PREP for SURGERY ORDER – Non-Epic Community Providers

Page 3 of 3

PAPER ONLY



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Other Reason for No Additional Orders for Pharmacologic VTE Prophylaxis – Reason for no pharmacologic VTE prophylaxis at admission.

Pre-op

MEDICATIONS

NO ANTIBIOTICS NEEDED

Enhanced Recovery After Surgery (ERAS) Pain MEDICATIONS:

- acetaminophen (Tylenol) tablet, 975 mg, ONCE, Oral, Pre-op
- celecoxib (Celebrex) capsule, 400 mg, ONCE, Oral, Pre-op
- methocarbamol (Robaxin) tablet, 750 mg, ONCE, Oral, Pre-op

Procedure Type	Antimicrobial Recommended	Alternatives (severe beta-lactam allergy)
Appendectomy (uncomplicated)	<input type="checkbox"/> ceFOXitin 2 g <input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS metroNIDAZOLE 500 mg	<input type="checkbox"/> clindamycin 900 mg PLUS gentamicin 5 mg/kg
Biliary Tract: Open or High-risk laparoscopic	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) <input type="checkbox"/> ceTRIAXone 2 g	<input type="checkbox"/> clindamycin 900 mg PLUS gentamicin 5 mg/kg <input type="checkbox"/> vancomycin 15 mg/kg (max 2 g) PLUS gentamicin 5 mg/kg
Cardiac	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> vancomycin 15 mg/kg (max 2 g)
Cesarean	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> clindamycin 900 mg PLUS gentamicin 5 mg/kg
Colorectal Surgery	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS metroNIDAZOLE 500 mg <input type="checkbox"/> ceTRIAXone 2 g PLUS metroNIDAZOLE 500 mg <input type="checkbox"/> ceFOXitin 2 g	<input type="checkbox"/> clindamycin 900 mg PLUS gentamicin 5 mg/kg
Gastroduodenal / Bariatric	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> vancomycin 15 mg/kg (max 2 g) PLUS gentamicin 5 mg/kg <input type="checkbox"/> clindamycin 900 mg PLUS gentamicin 5 mg/kg
Head and Neck: Clean w/prosthesis / ENT	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> clindamycin 900 mg
Head and Neck: Clean-contaminated / ENT	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS metroNIDAZOLE 500 mg	<input type="checkbox"/> clindamycin 900 mg
Hernia Repair	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> clindamycin 900 mg <input type="checkbox"/> vancomycin 15 mg/kg (max 2 g)
General GYN / Hysterectomy	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> clindamycin 900 mg PLUS gentamicin 5 mg/kg <input type="checkbox"/> vancomycin 15 mg/kg (max 2 g) PLUS gentamicin 5 mg/kg
Neurosurgery	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> vancomycin 15 mg/kg (max 2 g)
Orthopedic	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> clindamycin 900 mg <input type="checkbox"/> vancomycin 15 mg/kg (max 2 g)
Plastic Surgery: Clean w/ risk factors or Clean-contaminated	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> clindamycin 900 mg <input type="checkbox"/> vancomycin 15 mg/kg (max 2 g)
Small Intestine: Non-obstructed	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> clindamycin 900 mg PLUS gentamicin 5 mg/kg
Small Intestine: Obstructed	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS metroNIDAZOLE 500 mg	<input type="checkbox"/> metroNIDAZOLE 500 mg PLUS levoFLOxacin 500 mg
Thoracic	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> vancomycin 15 mg/kg (max 2 g)
Urologic: Clean w/ entry	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> gentamicin 5 mg/kg PLUS clindamycin 900 mg
Urologic: Clean w/ prosthesis	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS gentamicin 5 mg/kg	<input type="checkbox"/> clindamycin 900 mg <input type="checkbox"/> vancomycin 15 mg/kg (max 2 g) PLUS gentamicin 5 mg/kg
Urologic: Clean w/o entry	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> clindamycin 900 mg <input type="checkbox"/> vancomycin 15 mg/kg (max 2 g)
Urologic: Clean-contaminated	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS metroNIDAZOLE 500 mg	<input type="checkbox"/> gentamicin 5 mg/kg PLUS clindamycin 900 mg
Urologic: Lower tract w/ risk factors	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> gentamicin 5 mg/kg PLUS clindamycin 900 mg
Vascular	<input type="checkbox"/> ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	<input type="checkbox"/> clindamycin 900 mg <input type="checkbox"/> vancomycin 15 mg/kg (max 2 g)

OTHER: _____

OSSC Date: 03/21/2022

Team Review Date: 03/16/2022

Time: _____ Date: _____ Physician's Signature: _____

Preprinted Physician Orders – Scan Orders to Pharmacy before placing in Medical Record