

**Post-Operative
Adult Urology
STANDARD ORDERS**

MEDICATION ORDERS	GENERAL ORDERS
<p>Antiemetics</p> <p><input type="checkbox"/> dimenhydrinate 25 to 50 mg PO/IV/IM/PR Q4H PRN</p> <p><input type="checkbox"/> Ondansetron 4 to 8 mg IV BID PRN</p> <p>Antianxiety</p> <p><input type="checkbox"/> Lorazepam 1 to 2 mg sublingual/PO Q12H PRN</p> <p>Bladder spasms</p> <p><input type="checkbox"/> Oxybutynin 5 mg PO Q8-12H PRN</p> <p>Note: May increase risk for constipation/urinary retention when used with any Opioid like Hydromorphone.</p> <p>Intravenous Solutions</p> <p><input type="checkbox"/> Ringer's Lactate IV at _____ mL/hour</p> <p><input type="checkbox"/> Normal Saline IV at _____ mL/hour</p> <p><input type="checkbox"/> Dextrose 5%/ 0.45% Normal Saline IV at _____ mL/hour</p> <p><input type="checkbox"/> Potassium Chloride (KCL) 20 mmol in 0.9% Normal Saline IV at _____ mL/hour</p> <p><input type="checkbox"/> Potassium Chloride (KCL) 40 mmol in 0.9% Normal Saline IV at _____ mL/hour</p> <p><input type="checkbox"/> Potassium Chloride (KCL) 20 mmol in 0.45% Normal saline IV at _____ mL/hour</p> <p><input type="checkbox"/> Potassium Chloride (KCL) 20 mmol in 5% Dextrose/0.45% Normal Saline IV at _____ mL/hour</p> <p><input type="checkbox"/> Potassium Chloride (KCL) 40 mmol in 5% Dextrose/0.45% Normal Saline IV at _____ mL/hour</p> <p><input checked="" type="checkbox"/> Discontinue IV when drinking well</p>	<p>Investigations (bloodwork, diagnostics)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Activity</p> <p><input checked="" type="checkbox"/> If post anesthesia, no driving for 24 hours</p> <p><input type="checkbox"/> Activity as tolerated, ambulate 4 times daily starting postoperative day 0</p> <p><input type="checkbox"/> Limit activity for 24 hours</p> <p><input type="checkbox"/> Other: _____</p> <p>Discharge</p> <p><input type="checkbox"/> Discharge home when voiding QS, tolerating oral fluids, pain tolerable on PO meds, prescription obtained if needed.</p> <p><input type="checkbox"/> Discharge home after 0800hrs next day</p> <p><input type="checkbox"/> Call surgeon for discharge order</p> <p><input checked="" type="checkbox"/> Provide written discharge instructions</p> <p><input checked="" type="checkbox"/> Provide written teaching instructions</p> <p>Follow up in _____ (number) of weeks</p> <p><input type="checkbox"/> Patient to make appointment</p> <p><input type="checkbox"/> Clinic will call patient to make appointment</p> <p>Surgeon specific instructions:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>Prescriber Signature: _____</p>	<p>Date: _____ Time: _____</p>
<p>Order Transcribed: Date: _____ Time: _____</p> <p>Initials: _____</p>	<p>Fax/scan to Pharmacy: Date: _____ Time: _____</p> <p>Initials: _____</p>