



STANDARD ORDERS Post-Op Cesarean Section

These orders are to be used as a guideline and do not replace sound clinical judgement and professional standards.
Patient allergy and contraindications must be considered when completing the orders.

Automatically activated (if not in agreement cross out and initial) Activated by checking the box

MEDICATION ORDERS

GENERAL ORDERS

Allergies: No Yes Describe: _____ Patient's weight _____

DATE

TIME

Post Operative Orders:

INTRAVENOUS

- Oxytocin 40 units in 1000 mL normal saline (NS) Rate at ____ mL/hour
- _____ Rate at _____ mL/hour

- Discontinue intravenous when patient drinking well, voiding adequately, and afebrile

MEDICATIONS

- Acetaminophen 500 mg 1 to 2 tablets orally Q4H PRN for pain
Maximum daily dose of acetaminophen from all orders not to exceed 4000 mg
- Ibuprofen 400 mg orally TID PRN for pain
Maximum daily dose 1200 mg
OR
- Naproxen 500 mg orally Q12h PRN for pain
Maximum daily dose 1000 mg
- Patient may self-administer the above analgesic medications
CLI.6010.PL.046
- Metoclopramide 5-10 mg Subcutaneous/intravenous/intramuscular Q6H PRN for nausea and vomiting
- dimenHYDRINATE 50-100 mg intravenous/orally/per rectum Q4H PRN for nausea and vomiting if Metoclopramide ineffective (maximum daily dose 400 mg daily)
- PEG 17 grams orally daily (preferably at night) PRN to prevent constipation
- Zinc Sulfate Hydrocortisone hemorrhoid ointment apply PRN discomfort
- Lanolin nipple cream apply PRN for discomfort
- MMR 0.5 mL subcutaneously x 1 if rubella susceptible
- If patient Rh Negative:** Rh(D) Immune Globulin (human) 300 micrograms intravenous x 1 as per Rh Lab request OR if Rh Lab results not available at time of discharge (**ensure consent is on chart**)

NUTRITION

- Clear fluids, increase as tolerated

TESTS

- CBC
- Perinatal Testing for **Rh negative mothers** 1 hour post delivery
- Sexually transmitted and bloodborne infections (STBBI) – instruct DSM to send results to Primary Care Provider's office
 - Blood for STBBI panel
 - Urine for Chlamydia, Gonorrhea
- Hepatitis C

TREATMENTS

- Vital Signs and Assessment: On admission to the ward, Q1H X 2, Q4H until 24 hours, Q8H from 24 – 48 hours, then BID until discharge and PRN
- TED stockings
OR
- Mechanical sequential compression stockings
- Foley catheter: discontinue 12-24 hours post-delivery if urine output greater than 30 mL/hour
- Dressing: if dry and intact leave on; change if needed and notify physician if concerns
- Dressing: _____

CONSULTS

- Social Worker
- Lactation Consultant
- Other _____

DISCHARGE PLANNING

- Discharge when all outcomes are met
Follow-up appointment in _____ days/weeks with:
 - Obstetrician
 - Family Physician
 - Midwife
 - Public Health Nurse referral
 - Priority PHN referral:
 - if discharged less than 24 hours (unless midwife is following)
 - requires Newborn Universal Screening
 - Other: rationale _____

PHYSICIAN
SIGNATURE _____

PHYSICIAN
PRINTED NAME _____

Order Transcribed Date: _____ Time: _____ Init: _____

COPY TO PHARMACY Date: _____ Time: _____ Init: _____