NEP / PREP for SURGERY ORDER – Non-Epic Community Providers Page 1 of 3 Date of Encounter: PAPER ONLY Patient Name: Date of Birth: **Ballad**Health Surgeon Name: _____ Surgery: Form: 30403000001 Diagnosis:__ OSSC Date: 04/03/2023 **ADMIT STATUS:** • Place in Observation O Place as Outpatient Admit to Inpatient Admitting Physician__ (Inpatient) **CODE STATUS:** O Full Code / Attempt Resuscitation O DNAR / DNI - Allow Natural Death (Do NOT attempt Resuscitation / Do NOT intubate O Do NOT Intubate (DNI) May administer CPR and ACLS protocols but do NOT intubate. O DNAR but May Intubate (No CPR / ACLS, but intubation due to respiratory failure is acceptable) O DNAR / Cardiac Medications Only (May administer emergency medications only without CPR or intubation) O DNAR / DNI - Comfort Measures Only (Measures include interventions to alleviate the patients misery short of heroic) **ANTICOAGULANTS:** (med, dose, frequency) Continue □ 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:**

OSSC Date:04/03/2023 Team Review Date: 03/14/2023

☐ HCG, Urine ☐ OTHER Labs:

■ Labs per Anesthesia:

NEP / PREP for SURGERY ORDER - Non-Epic Community Providers Page 2 of 3 Date of Encounter: PAPER ONLY Patient Name: Date of Birth: **Ballad**Health Surgeon Name: _____ Surgery: Form: 30403000001 Diagnosis: OSSC Date: 04/03/2023 **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-Rav ☐ 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: O 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. O Place Knee High Sequential Compression Device O 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: O No Pharmacologic VTE Prophylaxis Needed Low Medical or Low / Very Low Surgical VTE Risk O enoxaparin (Lovenox) injection, 40 mg ONCE, Subcutaneous, for 1 Dose, Pre-op • Administer 1 to 2 hours prior to surgery. O 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

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PAPER ONLY

BalladHealth...

Form: 30403000001 OSSC Date: 04/03/2023

Date of Encounter:	
Patient Name:	
Date of Birth:	
Surgeon Name:	
Surgery:	
Diagnosis:	

Team Review Date: 03/14/2023

Administer 1 to 2 hours prior to surgery.

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

MEDICATIONS

■ NO ANTIBIOTICS NEEDED

OSSC Date:04/03/2023

Enhanced	Daggyany	After Surgery	(EDAC) Dain	MEDICATIONS:
⊏nnanceo	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)	□ cefOXitin 2 g □ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS metroNIDAZOLE 500 mg	☐ clindamycin 900 mg PLUS gentamicin 5 mg/kg
Biliary Tract: Open or High-risk laparoscopic	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) □ cefTRIAXone 2 g	☐ clindamycin 900 mg PLUS gentamicin 5 mg/kg☐ vancomycin 15 mg/kg (max 2 g) PLUS gentamicin 5 mg/kg
Cardiac	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	□ vancomycin 15 mg/kg (max 2 g)
Cesarean	☐ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	☐ clindamycin 900 mg PLUS gentamicin 5 mg/kg
Colorectal Surgery	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS metroNIDAZOLE 500 mg □ cefTRIAXone 2 g PLUS metroNIDAZOLE 500 mg □ cefOXitin 2 g	□ clindamycin 900 mg PLUS gentamicin 5 mg/kg
Gastroduodenal / Bariatric	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	□ vancomycin 15 mg/kg (max 2 g) PLUS gentamicin 5 mg/kg □ clindamycin 900 mg PLUS gentamicin 5 mg/kg
Head and Neck: Clean w/prosthesis / ENT	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	□ clindamycin 900 mg
Head and Neck: Clean- contaminated / ENT	ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS metroNIDAZOLE 500 mg	□ clindamycin 900 mg
Hernia Repair	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	☐ clindamycin 900 mg ☐ vancomycin 15 mg/kg (max 2 g)
General GYN / Hysterectomy	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	☐ clindamycin 900 mg PLUS gentamicin 5 mg/kg☐ vancomycin 15 mg/kg (max 2 g) PLUS gentamicin 5 mg/kg
Neurosurgery	☐ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	☐ vancomycin 15 mg/kg (max 2 g)
Orthopedic	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	☐ clindamycin 900 mg ☐ vancomycin 15 mg/kg (max 2 g)
Plastic Surgery: Clean w/ risk factors or Clean-contaminated	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	☐ clindamycin 900 mg ☐ vancomycin 15 mg/kg (max 2 g)
Small Intestine: Non-obstructed	□ ce FAZ olin 2 g (3 g if weight greater than or equal to 120 kg)	☐ clindamycin 900 mg PLUS gentamicin 5 mg/kg
Small Intestine: Obstructed	ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS metroNIDAZOLE 500 mg	☐ metroNIDAZOLE 500 mg PLUS levoFLOXacin 500 mg
Thoracic	☐ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	□ vancomycin 15 mg/kg (max 2 g)
Urologic: Clean w/ entry	☐ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	☐ gentamicin 5 mg/kg PLUS clindamycin 900 mg
Urologic: Clean w/ prosthesis	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS gentamicin 5 mg/kg	☐ clindamycin 900 mg ☐ vancomycin 15 mg/kg (max 2 g) PLUS gentamicin 5 mg/kg
Urologic: Clean w/o entry	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	☐ clindamycin 900 mg ☐ vancomycin 15 mg/kg (max 2 g)
Urologic: Clean-contaminated	ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg) PLUS metroNIDAZOLE 500 mg	gentamicin 5 mg/kg PLUS clindamycin 900 mg
Urologic: Lower tract w/ risk factors	☐ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	☐ gentamicin 5 mg/kg PLUS clindamycin 900 mg
Vascular	□ ceFAZolin 2 g (3 g if weight greater than or equal to 120 kg)	□ clindamycin 900 mg □ vancomycin 15 mg/kg (max 2 g)
OTHER:		

_ Physician's Signature: _