

McLaren Flint
TAVR
PRE-OPERATIVE ORDERS

Date of Surgery: _____ Allergies: _____

Diagnosis: _____

Procedure: _____

Surgeon: _____ Primary Care Physician: _____

Cardiologist: _____ Intensivist: _____

Obtain actual height and weight – document on chart

1. Consults:

- Notify Primary Care Physician of patient's admission
- Consult Anesthesia for Pre Op Evaluation at 342-5092
- Consult Intensivist Dr. _____ for Pre Op Evaluation
- Consult Cardiac - Rehab for 5 Meter Walk Test and inpatient Pre-Op teaching
- Consult _____ for _____
- Consult _____ for _____

2. Labs:

In-patients - If not done in the previous 48 hours, results on chart by 0500; Out-patients, within 14 days of surgery

- CBC, CMP, PT / INR, PTT, and Troponin,
- Type and Cross match and hold 4 units PRBC's

In-patients and Out-patients within 14 days of surgery

- Nasal Swab for MRSA screen
- HgA1C
- For diabetic patients: Accuchecks every 4 hrs. If blood glucose greater than 150mg/dL notify endocrinology
- TSH
- Magnesium
- Urinalysis and Culture and Sensitivity

3. Diagnostic Tests:

- Chest X –Ray (PA and Lateral) if not done within 14 days of surgery
- CT TAVR
- Carotid Doppler studies- within 6 months
- Spirometry Study with pre & post bronchodilator (4 puffs of Albuterol) if not performed within past 3 months – report on chart; PLEASE CALL RESPIRATORY THERAPY WHEN ORDERED
- Dictated Cardiac Catheterization report on the chart - within 1 year
- TAVR Echocardiogram
- 12 Lead EKG – within 14 days of surgery

4. Miscellaneous:

- Complete Pre-Operative Checklist

Prep:

- 4% Chlorhexidine (CHG) shower every day for four (4) days prior to day of surgery and the morning of surgery
- Clip and CHG prep completed in PreOp Holding
- Oral Care the night before surgery and on call to the OR:
 - Brush teeth with toothpaste
 - Chlorhexidine mouthwash
- Obtain consent for Surgery and Blood Transfusions
- Check manual blood pressures by cuff in the Right and Left arms as part of pre-operative assessment and document. Report to surgeon 20 mm/hg systolic difference between arms
- Notify Surgeon if: Temperature is greater than 37.7° C, chest pain or new neurologic findings
- DVT mechanical prophylaxis (SCDs)
- Dental clearance for valve surgery patients – must obtain letter from dentist for pre-surgical screening and fax to 810-342-2591

Date (required)
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Time (required)

Physician Signature

**PHYSICIANS ORDERS AND
INSTRUCTIONS TO NURSE**
M-1708-313
Revised 02-2017



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PT.

MR.#/P

DR.

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5. **Diet:**

- NPO after midnight prior to surgery except meds with small sip of H₂O

6. **Medications:**

- Zolpidem (AMBIEN) 5 mg at bedtime PO PRN for sleep (if inpatient)
 Mupirocin (BACTROBAN) 2% ointment to each nostril BID, starting prior to surgery, for total of 5 days

Beta-Blocker: Select One

Patient currently taking

Metoprolol (LOPRESSOR) _____mg PO every _____ hours

Carvedilol (COREG) _____mg PO every _____ hours

Other Beta Blocker: _____

HOLD Beta Blockers if SBP less than 100 mmHg or HR less than 60 BPM

Statin: Select One

Patient currently taking

Atorvastatin (LIPITOR) _____mg PO every evening

Simvastatin (ZOCOR) _____mg PO every evening

Other _____

Discontinuation of Medications:

- Cilostazol (PLETAL) 7 Days prior to Surgery
 Discontinue Warfarin (COUMADIN) 5 Days prior to Surgery
 Discontinue Dabigatran (PRADAXA) if patient has a CrCl greater than 50 mL/min, Apixaban (ELIQUIS, and Rivaroxabin (XARELTO) 3 days prior to surgery
 Discontinue Dabigatran (PRADAXA) if patient has a CrCl 30 to 50 mL/min, 4 days prior to surgery
 Discontinue Enoxaparin (LOVENOX) or Fondaparinux (ARIXTRA) 24 48 hours prior to surgery
 Discontinue Clopidogrol (PLAVIX), Prasugrel (EFFIENT) 7 Days prior to Surgery
 Discontinue Ticagrelor (BRILINTA) 5 Days prior to Surgery

Day of Surgery:

- Plavix 300mg PO x1 the morning of surgery
 Plavix 75mg PO the morning of surgery
 325 mg Aspirin PO morning of surgery
 Atorvastatin (LIPITOR) 10 mg PO at 0500 (Document why not given, if held)
 Metoprolol (LOPRESSOR) 25 mg PO at 0500 (hold if HR <55 or SBP <110 – Document why not given if held)

IV'S:

- Start IV in holding area: (1) 18 g – Lactated Ringers at 10 mL/hour; (2) 16 g – Normal Saline 0.9% at 10 mL/hour
 Cefazolin (KEFZOL) 2 Gms IVPB to be given preoperatively by Anesthesia Provider
 - **If allergic to cephalosporin or penicillin**
 Vancomycin 1 Gm IVPB to run over 90 minutes, to be given preoperatively by Anesthesia Provider
 - **If nasal culture positive for MRSA and not allergic to cephalosporin or penicillin:**
 Cefazolin (KEFZOL) 2 Gms IVPB to be given preoperatively by Anesthesia Provider
 AND Vancomycin 1 Gm IVPB to run over 90 minutes, started at least 1 hour prior to incision

Date (required)
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Time (required)

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