

CARDIAC SURGERY PRE-OPERATIVE ORDERS

Date of Surgery: _____ Allergies: _____

Procedure: _____

Surgeon: _____ Primary Care Physician: _____

Cardiologist: _____ Intensivist: _____

Obtain actual height in CM and weight in KG – 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 inpatient Pre-Op teaching
- Contact Cardiac Surgery NP's for Pre Op Evaluation – please use Perfect Serve - Cardiac Surgery NP's with patient name, DOB, room number, date of surgery and surgeon)
- Consult Endocrine Consultants of Mid Michigan at 810-230-0788 for all diabetic patients.
- 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 2 units PRBC's

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

- Nasal Swab for MRSA screen (IF SURGERY DATE within 48hrs DO NOT obtain MRSA swab)
- HgA1C
- For diabetic patients:** Accuchecks AC&HS. If blood glucose greater than 150 mg/dL notify endocrinology
- TSH
- Hepatitis Panel
- Magnesium
- IN-PATIENTS** – Urinalysis with Scope – Urine culture to follow if urinalysis positive
- OUT-PATIENTS** - UACI (Urinalysis with reflex Urine Culture)

3. Diagnostic Tests:

- Chest X –Ray (PA and Lateral) if not done within 14 days of surgery
- Non contrast Contrast CT scan of the Chest for re-operations- within 6 months
- Radial Artery Dependency Study
- Vein mapping
- Carotid Doppler studies- within 6 months
- ABG on room air
- Spirometry Study with pre & post bronchodilator (4 puffs of Albuterol) if not performed within past 30 days – report on chart. PLEASE CALL RESPIRATORY THERAPY WHEN ORDERED
- Dictated Cardiac Catheterization report on the chart
- Echocardiogram report within the past 30 days on chart - contact cardiologist if unable to locate. If echo not performed within past 30 days, call surgeon before re-ordering
- 12 Lead EKG – within 14 days of surgery
- Ankle Brachial Index (ABI) within 6 months
- TEG with Platelet Mapping

Physician Signature

Date (required)

Time (required)



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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
- Chlorehexidine mouthwash

Obtain consent for Surgery

Obtain separate consent for 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 (IPCs)

Dental clearance for valve surgery patients – Place signed clearance from dentist on chart.

RN to perform 5 Meter Walk Test – document and place on chart

5. **Diet:**

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

6. **Medications:**

Nitroglycerin 0.4 mg sublingual PRN for chest pain

Beta-Blocker: Select One

Patient currently taking

Metoprolol (LOPRESSOR) _____ mg PO every _____ hours

Carvedilol (COREG) _____ mg PO every _____ hour

Other Beta Blocker: _____

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

Statin: Select One

Patient currently taking

Atorvastatin (LIPITOR) _____ mg PO every evening

Pravastatin (PRAVACHOL) _____ mg PO every evening

Other _____

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Discontinuation of Medications:

- Hold ACEI / ARB 48 hours prior to surgery
- Hold Calcium Channel Blockers 48 hours prior to surgery
- Discontinue** Clopidogrol (PLAVIX), Prasugrel (EFFIENT), Ticlopidine (TICLID), Cilostazol (PLETAL), and Pentoxifylline (TRENTAL) 7 Days prior to Surgery
- Discontinue** Ticagrelor (BRILINTA) and 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) 4 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

Day of Surgery:

- Aspirin 325 mg PO at 0500
- 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)
- Povidone Iodine Solution 5% - Swab bilateral nostrils in **PRE OP HOLDING** or **CCU** (for direct transfer) **IF MSSA POSITIVE SWAB, MRSA POSITIVE SWAB or NO SWAB OBTAINED/RESULTED**
- Post Op Emergency Medication Tray to CCU
- TEG with Platelet Mapping

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 m/hour
- NO IV's in Left arm**

PRE OP ANTIBIOTICS: PHARMACY TO DOSE BASED UPON WEIGHT AND RENAL ADJUSTED

- Cefazolin (KEFZOL) 2 grams (or 3 grams if patient ≥ 120 kg) IVPB to be given preoperatively by Anesthesia Provider

IF allergic to cephalosporin or penicillin

- Vancomycin 1000 mg (or 1500 mg if patient ≥ 100 kg) 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 OR if no MRSA Swab obtained/resulted:

- Cefazolin (KEFZOL) 2 grams (3 grams if patient ≥ 120 kg) IVPB to be given preoperatively by Anesthesia Provider **AND** Vancomycin 1000 mg IVPB to run over 90 minutes, started at least 1 hour prior to incision

Physician Signature

Page 3 of 3

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Time (required)

PHYSICIANS ORDERS AND INSTRUCTIONS TO NURSE

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