## Adult Open Heart Surgery CVICU orders

Physicians must sign all orders - check and/or fill in appropriate blanks.

<table>
<thead>
<tr>
<th>Admission</th>
<th>CVICU</th>
<th>Operative Procedure</th>
<th>Allergies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Check</td>
<td>Open Heart Surgery</td>
<td>Open Heart Surgery</td>
</tr>
</tbody>
</table>

### Care Reminders and Treatments

- **Enter weight**
- **Cardiac Monitoring**
- **Condition: Critical**
- **Initiate Collaborative Path** Open Heart Surgery
- **Pulse Oximeter, Bedside Contin**
- **Catheter - Arterial** Monitor blood pressure continuously; change dressing q 72h (use transparent dressing); change lines q 72h with dressing change.
- **Nursing:** Vital signs q15 min X 4 post-op, then q1h
- **Nursing:** Maintain fluid line connected but clamped to brown port on MAC x 4 hours post op
- **Notify House Officer:** T>; 101.5 SBP>; 160 SBP<; 90 DBP>; 90 HR>; 120 HR<; 60 RESP>; 24 RESP<; 10 UOP<; 30 ml/h MAP<; 60; O2 Sat <90%; CT output >100ml/hr, or CT output > 50ml 30min or > 25ml 15 min. and Blood glucose >180 or <60
- **Saline for Pressure Line (Adult):** 1 bag press ln per unit
- **Saline for Cardiac Output:** 1 bag inject per unit now
- **Mediastinal Tube** to -20 cm H2O pleuravac suction; assess output Q30minX2, then Q1h X12, then Q2h; Mark on drainage system date/time & record on flowsheet Q1h; change dressing Q24h; Maintain patency of mediastinal tube
- **Nursing:** CVICU CT team contact beeper: 835-8205 or 831-6241 - notify team when patient arrives in the CVICU.
- **Nursing:** on arrival to unit, secure all chest tube connections with tie bands
- **Foley - Remove Per D/C Protocol:** Remove Foley by POD 2 (if not removed already)
- **Nursing:** Insert OGT/NGT upon admission to CVICU and connect to continuous LWS; Irrigate Q4h and PRN; Discontinue with extubation
- **Neurovascular Checks Q2H**
- **Measure Weight QDay 05** on chart by 0600 every am
- **Nursing:** incision and pacing wire care once daily with soap and water.
- **Nursing:** Remove Ace wrap POD 1 and remove sternal dressing POD 2
- **Nursing:** orient patient & family to CVICU; explain anticipated plan of care to patient/family
- **Mouth Care PRN** per CVICU standards
- **Activity:** bedrest, HOB elevated 30 degrees when hemodynamically stable; when extubated, pt. to dangle within 2 hours & if hemodynamically stable OOB to chair at that time; if not hd stable re-evaluate 4 hrs. post extubation
- **Activity:** sternal precautions: do not lift/push/pull more than 10 pounds
- **Nursing:** please use tilt mode on bed q30 minutes and use percuss mode on bed q 4 hours and 1 hour before CPAP abg
- **Activity:** to chair before 0900 if hemodynamically stable POD 1 and thereafter
- **Ambulate with Assist w/assist TID** 50 to 100 feet
- **Nothing by Mouth Daily Until D/C** while intubated and NG tube in place
- **Bariatric Clear Liquid Diet Daily Until D/C** BAR clear liquids x 1 meal when extubated then advance to heart healthy diet, no concentrated sweets
- **Volurex Incentive Spirometer Q1H W/A** (10 times each hour while awake; do NOT deliver/charge for 2nd volurex if pt. already has one)
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- **Cough/Deep Breath Q2h W/A**
- **Nursing**: If CT drainage greater than or equal to 200 ml/h for 2 hours, order stat pt, ptt, and platelet count
- **Nursing**: If O2 saturation is less than or equal to 92%, order ABG and notify beeper 835-8205
- **Sequential Compression Device off 1h q8h AS Dir** Off-pump patients: start SCD 6 hours postop; On-pump patients: start SCD on POD#1
- **Nursing**: For platelet transfusions notify MD and premedicate with benadryl 50 mg IV x1 and H2 Blocker unless patient is allergic
- **Initiate Collaborative Path** Open Heart Surgery - print from eDocs and place in chart.
- **Dr. Reminder**: Are post-op antibiotics ordered? Is the Type and Screen current?
- **Senna/Docusate**: Senokot S 2 tab po bid =+1d (Give if patient is tolerating oral diet)
- **Nursing**: If a patient receives 75ml or more in continuous medication infusions for greater than 2 hours, increase the concentration of the high volume medications.
- **Nursing**: Order a new type & screen if one was not drawn the day of surgery or the day before surgery
- **Nursing**: Place surgical bra on all patients with breasts that strain the midline incision
- **Type & Screen (ABO/RH/ATBY SCN)** stat x1
- **Restraint Orders**
- **Pacemaker**: Mode ____ Rate ____ Mode: ____ Rate ____

**Choose one of the Following**

- **Nursing**: PA catheter: 1) assess PAP, PCWP, CVP, SVR, PVR, CO, CI, q1h X 4 then q4h; 2) change tubing q72h with dressing change 3) flush ports q24h with saline flush
- **Nursing**: Cordis 1) assess CVP q1h X 4 then q4h; 2) change tubing q72h with dressing change 3) flush unused ports q24h with saline flush

**Respiratory**

- **Ventilator Settings Contin (TV=10ml/kg unless PIP>40, then NHO or NP)**
- **Nursing**: Suction ETT q6 hours and PRN
- **Nursing**: upon extubation, place patient on 6 liters of Oxygen, if Oxygen saturation is greater than 92%- wean nasal cannula down to 2 liters oxygen.
- **Adult Oxygen Therapy Protocol**

**If patient has a history of smoking, COPD, or asthma, please order the following:**

- **Albuterol HFA Inhaler** 6 puf inhalatn q4h

**Choose one of the following**

- Standard CS ventilator weaning protocol
- Fast track CS weaning protocol
- Do NOT wean ventilator until further orders from MD Do NOT wean ventilator (until further orders from MD)

**If pt. on Nitric oxide, order:**

**Methemoglobin Resp** stat qam 05 until d/c (while pt. getting nitric oxide)
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**Labs/Tests**

- O2 SATURATION (VENOUS) RESP stat x1
- stat EKG on admission x1 (Heart Disease Unspecified)
- CHEST PORTABLE XR x1 stat (following surgery V58.49 other spec aftercare URGENT upon admission to CVICU)
- ABG RESP stat q4hx16 hours
- CBC / PLT CT stat x1
- IONIZED CALCIUM RESP stat q4hx16 hours
- POTASSIUM RESP stat q4hx16 hours
- GLUCOSE, WHOLE BLOOD RESP stat q4hx16 hours
- LACTATE, WHOLE BLOOD RESP stat q4hx16 hours
- TOTAL HEMOGLOBIN RESP stat q4hx16 hours
- portable CXR in am POD1 x1 (following surgery V58.49 other spec aftercare)
- EKG in am POD1 in am 05x1 (Heart Disease Unspecified)
- cbc/plt ct qam 05x until d/c
- sgot bld in am POD1 in am 05x1
- ck-mbiso/ck battery in am POD1 in am 05x1
- PROTHROMBIN TIME (PT) BLOOD in am 05x1
- LYTES, CREAT, BUN, GLU W/ CALCIUM qam 05x7 days