



**Regional Pre-Printed Orders for
General Surgery PRE-Operative - Adult**



Form ID: DRDO106121B

Rev: April 25, 2016

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|-----------------------|
| DRUG & FOOD ALLERGIES |
|-----------------------|

- **Mandatory** **Optional: Prescriber check (✓) to initiate, cross out and initial any orders not indicated.**

Weight: _____ kg Height: _____ cm

Preadmission Clinic

Diet:

- No Bowel Preparation
 - No solid food after midnight, or: _____
 - Drink clear fluids up to 2 hours before leaving for hospital
 - Drink 3 cups (800 mL) of clear juice (apple or cranberry) on evening before surgery, and drink 1½ cups (400 mL) of clear juice (apple or cranberry) 2 hours before your hospital check in time, unless instructed otherwise by anesthesiologist.

- Bowel Preparation
 - Bowel prep as per surgeons instructions: _____

 - Clear fluids only starting day before surgery
 - Drink clear fluids up to 2 hours before leaving for hospital
 - Drink 3 cups (800 mL) of clear juice (apple or cranberry) on evening before surgery, and drink 1½ cups (400 mL) of clear juice (apple or cranberry) 2 hours before your hospital check in time, unless instructed otherwise by anesthesiologist.

Skin Prep:

- Patient to shower evening prior to surgery and apply skin prep as instructed

Consults:

- Enterstomal Therapist to see patient for stoma marking
- Dietitian
- Anesthesiologist

Other: _____

Labs / Diagnostics: as indicated below **OR** see OR Booking Form

- | | | |
|-------------------------------------------------------------------------|-------------------------------------|----------------------------------------------|
| <input type="checkbox"/> CBC | <input type="checkbox"/> Lytes (E7) | <input type="checkbox"/> Hgb A1C if diabetic |
| <input type="checkbox"/> INR / PTT | <input type="checkbox"/> Albumin | <input type="checkbox"/> Group and Screen |
| <input type="checkbox"/> ALT / ALP / AST/ bilirubin direct and indirect | <input type="checkbox"/> CXR | <input type="checkbox"/> ECG |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | |

Medications:

- Take morning prescribed medications as instructed by surgeon or as per anesthesiology before hospital check-in with clear fluids.

| Date (DD/MMM/YYYY) | Time | Prescriber Signature | Printed Name or College ID# |
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Admit Day of Surgery / Surgical Day Care

Hydration

- Start IV of Lactated Ringer's at 100 mL/h **OR** start: _____
- Glucometer, if diabetic

Medications:

Antibiotics:

- Consult prophylaxis guidelines (see back of page)
- Administer 60 minutes or less **before** skin incision.

Weight less than 120 kg

- ceFAZolin 2 g IV**
- ceFAZolin 2 g IV and metronidazole 500 mg IV**

Weight greater than 120 kg

- ceFAZolin 3 g IV**
- ceFAZolin 3 g IV and metronidazole 500 mg IV**

For Patients with significant **penicillin / cephalosporin** allergy:

- clindamycin 900 mg IV**
- metronidazole 500 mg IV**
- gentamicin** (5 mg/kg, round to closest 20 mg) _____ mg IV. *If patient's body weight is 20% above ideal body weight gentamicin dose should be adjusted. See back of page for recommendation.*
- ciprofloxacin 400 mg IV.** *If renal dysfunction precludes use of gentamicin.*

For Patients with known MRSA colonization:

- vancomycin** (15 mg/kg IV, round to closest 250 mg) _____ mg IV, *See table on back of page, and check PDTM for infusion time.*

Analgesics: Review anaesthesia orders, if no orders give the following 90 minutes pre-op with sip of water.

- No NSAIDs**
- acetaminophen 650 mg PO/ per rectum** **OR** **acetaminophen 1000 mg PO**
- naproxen 500 mg PO/ per rectum** **OR** **naproxen 250 mg PO/ per rectum** (hold if eGFR is below 60 mL/min)

Venous Thromboembolism (VTE) Prophylaxis:

- Minor surgery procedures give **heparin 5000 units** subcutaneous 60 to 90 minutes pre-op
- Major surgery procedures prophylaxis to be given in OR by anesthesiologist after consideration of epidural

Additional Orders:

- Use warming device on patient to maintain temperature at or above 36° C prior to major surgery and PRN

Other: _____

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| Total Body Weight (kg) | Pre-op Dosing for VANCOMYCIN (15 mg/kg rounded to the nearest 250 mg increment, not to exceed 2500 mg per dose). Check PDTM for infusion time. |
|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| 42 to 58 | 750 mg |
| 59 to 74 | 1000 mg |
| 75 to 91 | 1250 mg |
| 92 to 108 | 1500 mg |
| 109 to 124 | 1750 mg |
| 125 to 141 | 2000 mg |
| 142 to 158 | 2250 mg |
| 159 or above | 2500 mg |

Patients with Ideal Body Weight greater than 20% use Dosing Body Weight calculation below.

GENTAMICIN dosing body weight (DBW) calculator: $\text{Dosing Body Weight (DBW)} = 0.4 (\text{ABW} - \text{IBW}) + \text{IBW}$

ABW = Actual Body Weight

IBW = Ideal Body Weight

IBW (female) $45.5 \text{ kg} + (0.92 \times \text{height in cm greater than } 150 \text{ cm})$

IBW (male) $50 \text{ kg} + (0.92 \times \text{height in cm greater than } 150 \text{ cm})$