

CLINICAL RECORD - DOCTOR'S ORDERS

For use of this form, see AR 40-66, the proponent agency is OTSG

THE DOCTOR SHALL RECORD DATE, TIME AND SIGN EACH SET OF ORDERS. IF PROBLEM ORIENTED MEDICAL RECORD SYSTEM IS USED, WRITE PROBLEM NUMBER IN COLUMN INDICATED BY ARROW BELOW.

PATIENT IDENTIFICATION			DATE OF ORDER	TIME OF ORDER	LIST TIME ORDER NOTED AND SIGN
			1	Admit to Same Day Surgery for: <input type="checkbox"/> EGD <input type="checkbox"/> Colonoscopy	
			1A	Prep: <input type="checkbox"/> Fleets Phospha Soda <input type="checkbox"/> Colyte Prep	
				<input type="checkbox"/> Other:	
			1B	Perform the following pre-op tests :	
				<input type="checkbox"/> Complete blood count <input type="checkbox"/> Chem 20 <input type="checkbox"/> Urinalysis <input type="checkbox"/> EKG	
NURSING UNIT	ROOM NO.	BED NO.		<input type="checkbox"/> Urine HCG <input type="checkbox"/> Chest x-ray - posterior/anterior & lateral	
				<input type="checkbox"/> P1 <input type="checkbox"/> Pt/PTT	
PATIENT IDENTIFICATION			DATE OF ORDER	TIME OF ORDER	
			1C	Intravenous normal saline in right arm (if possible) 1000ml to keep vein open.	
			1D	For procedure: Oxygen via nasal cannula; monitor oxygen saturation, vital signs, and cardiac monitor per conscious sedation protocol.	
NURSING UNIT	ROOM NO.	BED NO.	1E	Medications for procedure: <input type="checkbox"/> Meperidine 50mg/ml IV	
				<input type="checkbox"/> Midazolam 2mg/2ml IV <input type="checkbox"/> Other:	
PATIENT IDENTIFICATION			DATE OF ORDER	TIME OF ORDER	
			2	Post-procedure orders for EGD and Colonoscopy:	
			2A	Transfer to Post-anesthesia Care Unit when discharge criteria is met.	
			2B	Activity: Out of bed as desired.	
			2C	Diet: As tolerated. Discontinue intravenous fluids when stable and tolerating fluids.	
NURSING UNIT	ROOM NO.	BED NO.	2D	May discharge home with escort when Same Day Surgery criteria met.	
			2E	Other:	
PATIENT IDENTIFICATION			DATE OF ORDER	TIME OF ORDER	
NURSING UNIT	ROOM NO.	BED NO.			