

PHYSICIAN'S ORDERS
PREOPERATIVE

REFER TO THE ALLERGY SCREEN IN MEDITECH FOR ALLERGY INFORMATION

To complete the order form, fill in the required blanks and/or check the appropriate boxes.
To delete orders, draw one line through the item and initial.

Diagnosis: _____ MRP _____ [] SDC [] SDA & ELOS _____

Reason for Pre-Surgery Clinic visit:

- No preoperative assessment required (male 18-44 & healthy)
- Pre-operative diagnostic testing and nursing assessment
- Paediatric diagnostics (physician to specify diagnostic tests)
- Consult anaesthesiology (includes nursing assessment) **Required for Thoracic surgery**
- GYNE only** CBC and/or BHCG (females 18-44 years if required for surgical or medical reason)

Other lab tests _____ Reason _____

X-rays _____ Reason _____

Referrals: Orders with an asterisk (*) form will be completed by the physician and arranged by the physician's office

- CCAC * (signed homecare form required)
- Blood conservation * (Add ferritin to labwork)
- Enterostomal Nurse *
- Physiotherapy * (hip/knee class)

Critical Care medicine *

DAY OF SURGERY:

- VTE prophylaxis:** Heparin 5,000 units sc 1-2 hours pre op
- Antiembolic stockings (apply preoperatively)
- Antimicrobial prophylaxis:** Cefazolin 1 g IV pre op to be given in the operating room
- OR**
- Cefoxitin 1 g IV pre op to be given in the operating room
- Other _____

Date: _____ Time: _____

MD SIGNATURE

Pain management: (ADULTS ONLY)

Give the day of surgery with a sip of water 1-2 hours before scheduled OR time:

Acetaminophen 975 mg po

Naproxen 500 mg po **OR** Celecoxib 400 mg po

Warning: Do not use if impaired renal function or sulpha allergy. Caution if age greater than 70 years.

Gabapentin 300 mg po

Other orders:

Date: _____ Time: _____

MD SIGNATURE



Ontario Pre-operative Testing Grid
(white areas indicate recommended tests)

FOR USE IN PRE-SURGERY CLINIC, REGISTERED NURSES ONLY

Indicate required tests with an **X** in the corresponding box. Indicate number of packed cells for crossmatch in box.

	Chest X-ray (6 months)	ECG	CBC		GROUP & RESERVE	PACKED CELLS NUMBER OF UNITS	INR/PT	LYTES	UREA CREAT.	SERUM GLUCOSE	AST ALP/BILI	SICKLE CELL SCREEN
			Male	Female								
Surgical procedure on Standard Transfusion list.												
45-70 years old												
Greater than 70 years of age												
Cardiovascular disease/HTN												
Pulmonary disease												
Malignancy												
Hepatic disease												
Renal disease												
Blood disorders												
Use of anticoagulants												
Diabetes												
Smoking greater than 20 pack years												
Use of digoxin, diuretics, ACE inhibitor												
Use of steroids												
CNS disease												
Sickle Cell Disease Risk												

Grid revised March 2011

NOTE: Adapted from Ontario Pre-operative Task Force, Sunnybrook and Women's College Health Sciences Centre Table.

Date: _____ Time: _____

RN SIGNATURE

