

CARDIAC CATH LAB PACEMAKER ORDERS

All orders inactive unless circled. All blank or crossed-out orders are inactive.

ANOTHER BRAND OF GENERICALLY EQUIVALENT PRODUCT IDENTICAL IN DOSAGE AND CONTENT OF
ACTIVE INGREDIENT MAY BE ADMINISTERED UNLESS INITIALED OTHERWISE

DATE	TIME	PHYSICIAN'S ORDERS	INITIAL
		PRE-PACEMAKER IMPLANT	
		1. <input type="checkbox"/> Permanent pacemaker implant / Status according to Case Management Assignment Protocol	
		OR	
		<input type="checkbox"/> Generator change / OPP	
		2. Consent for permanent pacemaker implantation by Dr. _____	
		3. PT/PTT, CBC.	
		4. NPO except meds.	
		5. 0.45 NS or NS TKO, start in left arm if possible.	
		6. Void on call to Cath Lab.	
		7. Medications on arrival to Cath Lab _____	
		8. Patient may receive _____ for pre-procedure anxiety.	
		9. Ancef 1 gm IV in Cardiac Cath Lab. Should be given 30 min's prior to skin incision.	
		10. Vancomycin 1 gm IV in Cardiac Cath Lab (Per infection control guidelines for current institutional MRSA rates)	
		POST PERMANENT PACEMAKER IMPLANT/CMAP	
		1. Diagnosis: S/P Permanent Pacemaker/CMAP	
		_____ Pacer Mode _____ Pacer Rate	
		2. Diet:	
		3. Activity: L/R arm in sling; flat in bed x 24°, up in chair in A.M.	
		4. Foley PRN.	
		5. May have HOB 15° to facilitate feeding/comfort.	
		6. CXR (done).	
		7. EKG – 12 lead x 1 on unit.	
		8. Meds: Percocet 1 tab every 4 hours as needed for pain. Vicodin 1 tab every 4 hours as needed for pain.	
		9. IV – TKO _____/SL _____	
		10. May take oral meds.	
		PHYSICIAN'S SIGNATURE _____	

