updated 9/10/2010

Patient Label

Greater New Orleans Surgery Center

Keith Larkin, M. D.

Physician Orders **Patient Name** _____

DATE	TIME	ORDERS FOR MEDICINES AND TREATMENT
		Procedure:
		Admit to PACU Post surgery
		Routine Vital Signs per PACU until discharge
		Elevate and ice _____
		Circulation checks every hour times 12 hours
		Regular Diet
		IV present fluids at _____ ml/hr
		Discontinue IV fluids when tolerating liquids
		Demerol _____ mg IM with Phenergan 25 mg IM q 4 hr prn pain
		Percocet 10/325 1 po q 4 hr prn pain
		Aspirin 81 mg 1 po q day for 21 days
		Discharge home when awake and discharge criteria met

Date _____ **Physician Signature** _____