

## Ceserean Section - Postoperative

### Order Set Directions:

 = Performance Indicator

(√)-Check orders to activate. Orders with a pre-checked box  will be followed unless lined out.  
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### Activity

- Ambulate tid after epidural is removed
- Bed rest
- Up ad lib POD # 1

### Nursing Orders

- Vital signs every 15 minutes x 4, every ½ hour x 2, every 1 hour x 2, every 2 hours x 4, and then every 8 hours
- Notify provider if temperature greater than 100.5, pulse greater than 110, blood pressure less than 90/60, output less than 30 ml/hour
- Urinary straight catheterization x 2 for distress, on 3rd catheterization insert Foley
- TCDB every 2 hours until ambulatory
- Remove Foley when epidural catheter is removed
- Straight cath prn for distress or no void in 8 hours
- May shower POD # 1
- Replace dressing POD # 1

### Respiratory

- Incentive spirometry every 2 hours while awake until discharge
- Pulse oximetry check every shift
- Oxygen per cardiopulmonary oxygen protocol
- Oxygen administration @ \_\_\_\_\_ via \_\_\_\_\_

### Diet

- Clear liquids until active bowel sounds and no nausea, then advance to General diet
- NPO
- Other \_\_\_\_\_

### IV Fluids

- Lactated Ringers with Pitocin 10 units at 150 ml/hour x 24 hours, then
- D5 ½ Normal Saline at 80 ml/hour (discontinue when oral intake 500 ml)
- Saline lock
- Other \_\_\_\_\_

Provider initials: \_\_\_\_\_



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### Medications

#### Analgesics

acetaminophen (TYLENOL)

- 1000 mg PO every 6 hours PRN for mild pain or fever greater than 101° F.

ibuprofen (MOTRIN)

- 800 mg PO every 8 hours PRN for moderate pain if patient not taking Toradol

propoxyphene (DARVON)

- 65 mg PO every 4 hours PRN for severe pain

ketorolac (TORADOL)

- 30 mg IV every 6 hours for 4 total doses starting 4 hours after surgery, then  
 10 mg PO every 6 hours (limit 4 days)

#### Antiflatulents

simethicone (MYLICON)

- 80 mg PO 4 times a day, after meals and at bedtime PRN for gas

#### Immunizations

measles/mumps/rubella virus vaccine (M-M-R II)

- 0.5 ml subcutaneously once upon discharge for patients without evidence or equivocal on rubella immunity

diphtheria/pertussis, acellular/tetanus (ADACEL)

- 0.5 ml intramuscularly once upon discharge for patients whose most recent Td vaccine was greater than 2 years

influenza virus vaccine, inactivated (AFLURIA;FLUZONE) October through March only

- 0.5 ml intramuscularly once

#### Iron Supplements

ferrous sulfate (FEOSOL)

- 325 mg PO daily

#### Laxatives

docusate sodium (COLACE)

- 100 mg PO 2 times a day

glycerin

- 1 suppository rectally once PRN for constipation

FLEET ENEMA

- 1 enema rectally once PRN for constipation

- Begin with 1<sup>st</sup> drug and if no results, move to next

#### Sleep Aide

zolpidem (AMBIEN)

- 5 mg PO daily, at bedtime PRN for insomnia, may repeat x 1 if non-breastfeeding

diphenhydramine (BENADRYL)

- 25 mg capsule PO daily, at bedtime PRN for insomnia if breastfeeding

#### Topical Agents

lanolin topical

- applied topically every 2 hours PRN for sore nipples

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### Laboratory

- Complete blood count (CBC) 12 hours after surgery
- Hemoglobin and hematocrit
- Basic metabolic panel (BMP)
- Complete metabolic panel (CMP)
- Fasting blood sugar (FBS)
- Rhophylac status if Rh Negative
- Rho (D) immune globulin
  - 300 ucg intramuscularly once or intravenous once if indicated
- Kleihauer-Betke to determine dose of Rhophylac
- Placenta to Lab per criteria (labor and delivery policy "placenta pathology protocol")
- Other \_\_\_\_\_

### Other

- Cord blood gases if APGAR less than 6 at 5 minutes or at the physician's request

### Smoking Cessation

#### Nursing Orders

#### Patient/Caregiver Education

- Education, smoking cessation

#### Medications

- nicotine 7 mg/24 hr transdermal film, extended release (NICODERM)
  - 1 patch transdermally daily
- nicotine 14 mg/24 hr transdermal film, extended release (NICODERM)
  - 1 patch transdermally daily (less than 10 cigarettes per day)
- nicotine 21 mg/24 hr transdermal film, extended release (NICODERM)
  - 1 patch transdermally daily (10 or more cigarettes per day)

### Other Orders

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### DVT Prophylaxis for OB

#### Interventions

##### Low Risk

- Early ambulation

##### Moderate/High Risk

- Sequential Compression Devices (SCD)
- Apply anti-embolic stockings (graduated) heparin
  - 5,000 unit subcutaneously every 12 hours

#### Risk Criteria

##### Low Risk

- Less than 35 y/o
- Prescribed bedrest

##### Moderate/High Risk

- Greater than 35 y/o
- Obesity
- Grand Multiparity
- Severe Varicosities
- Current Infection
- Pre-eclampsia
- Trauma
- Cancer
- Heart and Respiratory Failure
- Inflammatory Bowel Disease
- Nephrotic Syndrome

##### Very High Risk

- Extended surgeries (i.e. c/hyst)
- History of VTE
- Antiphospholipid Syndrome
- Thrombophilia

#### • Anticoagulants not prescribed due to:

- Patient is ambulatory
- Active hemorrhage
- Patient currently on anticoagulants
- Abnormal creatinine clearance
- Epidural /spinal catheter in place
- Patient has heparin induced thrombocytopenia
- Platelet count less than 100,000 mm<sup>3</sup>
- Severe trauma to head, spinal cord, or extremities with hemorrhage within the last 4 weeks
- Active intracranial lesion/neoplasms/monitoring devices
- Warfarin use in the first trimester of pregnancy
- Coagulopathy (PT greater than 18 sec, INR greater than 2)
- GI/GU hemorrhage within the past 6 months, history of cerebral hemorrhage
- Proliferative retinopathy
- Uncontrolled hypertension (SBP greater than 200, DBP greater than 120, or both)
- End stage liver disease

Provider Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

