



Radiology Pre Procedure Orders

Patient Name:

DOB:

MMI:

Procedure:

Proc Date/Time:

Diagnosis:

Radiologist:

Laboratory Orders (STAT if checked)

CBC w/ differential

PT/INR

BMP / CHEM 7

CBC w/o differential

PTT

CMP / CHEM 14

Type & Screen

Urine Preg Test

Other Orders

Admit to Surgical Center for outpatient procedure.

Insert IV line.

Make patient NPO except for medications.

Complete yellow anesthesia questionnaire.

Check blood sugar if patient is diabetic.

Have patient void on call for procedure.

Check urine pregnancy test if patient is female, under 55 years of age and has not undergone hysterectomy, tubal ligation or doesn't have IUD in place.

Hold AM blood thinners / anticoagulates for procedure.

Administer 25 mg Benadryl IV on call for procedure (give on call to Radiology for procedure).

Physician Signature

Printed Name

PAS#

Date/Time

PERMANENT COPY
PRE-ADMISSION TESTING ORDERS

Page 1 of 1



3000



Radiology Post Procedure Orders (page 1 of 2)

Contact Radiology for any unstable vital signs, changes in patient symptoms or procedure site complications.

For outpatients only, the patient may be discharged at _____ AM / PM if clinical stable.

Vital Signs

Once post procedure then per protocol.

q15mins x 4, q30mins x 2 then per protocol (2 hours total).

q15mins x 4, q30mins x 2, q60mins x 2 then per protocol (4 hours total).

Procedural Site Check

Once post procedure then per protocol.

q60mins x 4 then per protocol (4 hours total).

Vascular & Neuro Checks

Check distal pulses in affected extremity only q15mins x 4, q30mins x 4, q60mins x 3 (6 hours total).

Neuro check in affected extremity only q60mins x 6 (6 hours total).

Activity

Resume pre procedure activity NOW as tolerated.

Bedrest for _____ hours then advance to pre procedure activity as tolerated.

STRICT bedrest for _____ hours. Keep affected extremity straight. Head of bed elevated 30 degrees.

Diet

Resume pre procedure diet NOW.

Resume pre procedure diet after _____ hours.

Physician Signature

Printed Name

PAS#

Date/Time

"PHYSICIAN ORDERS"
PERMANENT COPY
M-300 Form Rev 5/2024





Radiology Post Procedure Orders (page 2 of 2)

Radiology

- XR Chest 1 View NOW - upright insp - post procedure pneumothorax check.
- XR Chest 2 Views at AM / PM - upright insp/exp - post procedure pneumothorax check.
- XR Chest 2 Views at AM / PM - upright insp/exp - post procedure pneumothorax check.

Drain Catheter Management (if applicable)

- Flush drainage catheter with 10 mL saline flush q12hrs. Record output q12hours.
- Do NOT flush drainage catheter. Record output q12hours.
- Keep chest tube Atrium / Pleur-Evac connected to low 20 cm H2O continuous suction.
- Contact Radiology for drain catheter complications, catheter removal or if patient is to be discharged with the drainage catheter in place.

Medications

- Percocet 5 mg / 325 mg PO times one dose as needed for post procedure pain.
- Zofran 4 mg IV times one dose as needed for post procedure nausea/vomiting.

Other

- Venous catheter tip is in adequate position. The line is okay to use.
-
-
-
-

Physician Signature

Printed Name

PAS#

Date/Time

"PHYSICIAN ORDERS"
PERMANENT COPY
M-300 Form Rev 5/2024





Radiology Post Procedure Note

Procedure:

Radiologist:

Guidance:

CT

US

Fluoro

Mammo

Findings:

All equipment that entered the patient during the procedure appeared intact at the conclusion of the procedure.

Please see full report under Radiology for procedure details.

Anesthesia:

local only

moderate sedation

general anesthesia

Specimen:

none

yes sent to lab

Drain(s):

Estimate Blood Loss: Minimal.

Complications: No immediate complications.

Post Procedure Condition: The patient tolerated the procedure well and left the procedure room in stable condition.

Physician Signature

Printed Name

PAS#

Date/Time

PERMANENT COPY

Page 1 of 1

“RADIOLOGY PROCEDURE NOTE”



1600



Radiology Medication Orders

Local Anesthetic

mL Lidocaine 1% SQ

mL Lidocaine 1% w/ Epi SQ

mL Lidocaine 2% w/ Epi SQ

mL Sensorcaine 0.25% SQ

mL Sensorcaine 0.5% SQ

Moderate Sedation & Pain Meds

mg Versed IV

mg Ativan IV

mcg Fentanyl IV

mg Dilaudid IV

mg Narcan IV

mg Flumazenil IV

IV Contrast

mL Omni-300 IV

mL Omni-350 IV

mL Clariscan IV

Oral Contrast & Fizzes

mL Omni-240 / 300 / 350 PO

mL CitraSelect / Volumen PO

mL Vanilla Silq MD PO

mL Vanilla Silq HD PO

mL Varibar Thin PO

mL Varibar Nectar PO

mL Varibar Thin Honey PO

mL Varibar Pudding PO

pill E-Z Disk PO

pack E-Z Gas II PO

Myelogram & Joint Medications

mL Omni-240 intrathecal

mL Omni-300 intrathecal

mL Omni-300 intraarticular

mL Clariscan intraarticular

mg Kenalog intraarticular

mL Sensorcaine 0.5% intraarticular

mL Sensorcaine 0.25% intraarticular

Antibiotics

g Ancef IV

g Rocephin IV

mg Vancomycin IV

mg Clindamycin IV

mg Flagyl IV

mg Cipro IV

Other Medications

g Albumin IV

mg Benadryl IV

mg Glucagon IV

mg Hydralazine IV

mL Heparin for Quinton

mL Hep Loc for Catheters
