



PREOPERATIVE SPINE SURGERY ORDERS

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Patient Name: _____ DOB: _____

Surgery Date: _____ Precertification #: _____

Case Conf #: _____

Pre-Surgery Diagnosis: _____

Scheduled Procedure: _____

INPATIENT OPS

Preadmission Testing Orders:

1. ☐ CBC ☐ PT, PTT ☐ H&H ☐ BMP ☐ CMP ☐ MRSA Screening
☐ HIV ☐ UA ☐ HEPATITUS SCREEN ☐ HCG ☐ HgA1C
☐ PREGNANCY TEST ☐ TYPE & SCREEN ☐ OTHER: _____

2. ADDITIONAL LABS AS NEEDED PER ANESTHESIA

3. EKG: Per Anesthesia Protocol

4. CHEST XRAY Per Anesthesia Protocol

5. ☐ STANDING LUMBAR XRAY (AP, LATERAL, SPOT)
☐ UPRIGHT CERVICAL XRAY (AP, LATERAL, ODONTOID)

6. Fleet enema evening before surgery YES NO

7. Verify operative consent for procedure.

8. Instruct patient to scrub operative area the night before surgery for 10 minutes using Hibiclens.

OPERATIVE SITE: CHEST BACK ABDOMEN NECK HIP

LOCATION: RIGHT LEFT ANTERIOR POSTERIOR



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PREOP ORDERS FOR DAY OF SURGERY

1. Admit to AMBULATORY SURGERY UNIT
2. VERIFY NPO 8 HOURS PRIOR TO SURGERY
 - ☐ ERAS Protocol
 - Ensure Pre-Surgery Clear Carbohydrate Drink: 8 ounces, Apple Juice 12 ounces or Sports Drink (Orange or Clear) 12 ounces PO. (No red color). Give 2 hours or more before induction of anesthesia. Consume product within 5 minutes.
 - Exclude Pts w/HX of:
 - Diabetes Type 1; Uncontrolled diabetes
 - Hemoglobin A1C > 7.5% or per provider's direction
 - Uncontrolled GERD
 - Gastric emptying complications
 - Hiatal hernia
 - Dysphagia and is on thickened liquids
3. _____
4. Cross match _____ units of _____ blood.
5. Train patient to use Incentive Spirometer for postop use.
6. Routine preop prep to surgical site per hospital protocol.
7. Knee high TED stockings on prior to surgery.
8. SCD's
9. No Hypo's (injections) in either hip
10. No IV access in wrist or hand on Cervical surgeries.
11. ☐ Ancef 2 Grams IVPB X 1 on call to the OR (start within 60 minutes of incision)
If patient weight > 120KG give
☐ Ancef 3 Grams IVPB X 1 on call to OR (start within 60 minutes of incision)
Allergy to PCN/Beta – Lactam
☐ Vancomycin 1 gram IVPB X 1 on call to OR (start within 120 minutes of incision) Pharmacy to renal dose.
If patient weight > 70KG give
☐ Vancomycin 15mg/kg IVPB X 1 on call to OR (start within 120 minutes of incision) Pharmacy to renal dose.
OR
☐ Cleocin 900mg IVPB X 1 on call to OR (start within 30 minutes of incision)
12. ☐ Gabapentin 300 mg PO (on call to OR)
☐ Acetaminophen (Ofirmev) 1000 mg IVPB (on call to OR)
☐ Ibuprofen (Caldolor) 800 mg IVPB (on call to OR)
☐ Ketorolac (Toradol) 30 mg IVP x 1 (on-call to OR)
13. ☐ OT/PT Consult
☐ Care Management Consult

Physician Signature

Date/Time