

Cardiac Surgery- Orders & Power Plans

Power Plan Name	When to Initiate	Notes
Cardiac Surgery Pre-op	Pre-Op Admission	All Pre-op Candidates (Except Transplants)
Cardiac Surgery Transplant Pre-op	Pre-Op Transplant Admit	*Pre-Op Serologies Must be Sent Prior to going to OR.
		*HLA Form and Serum Sample must be Sent Prior to going to OR
		*Notify Transplant Coordinator (Extension 8-2864)
Cardiac Surgery Post Op	Post- Op Admission	All General Post-Op Patients (i.e. CABG, Valves, etc)
Cardiac Surgery Transplant Post op	Post- Op Transplant	FK506 Levels Must be Ordered Daily at 0600 (Nurse Draw)
Cardiac Surgery Post Op	Post- Op VAD	Once inside Power Plan Must click on "Cardiac Surgery- Ventricular Assist Device (VAD)"
Cardiac Surgery Transfer to Telemetry	Transfer to Telemetry	*All Transfers (Except Transplants)
		* Don't forget to click on Daily Labs (Place under Lab Draw)
Cardiac Surgery Transplant Transfer to Telemetry	Post-Op Transplant Transferring to Telemetry	Don't forget to click on Daily Labs (Place under Lab Draw)

Admissions

- 1. Choose Appropriate Power Plan
- 2. Click all Applicable Orders in Power Plan (Most are Pre-Checked)
- 3. Click **Initiate** in top Left Corner of Power Plan then Click **Orders for Signature** in bottom right corner
- 4. Perform **Documented Medications by History** (Usually already done if Post Op Patient)- click on **Orders** then **Add** then **Document Medications by Hx**. (Top Left Corner) then Add All Patients Home Medications/Dosages/Frequencies. Finish by Clicking **Document History** (Right Bottom Corner). A Green Check Mark will Appear in the Top Right Corner of Screen Next to **Meds History** once completed
- 5. Perform Admission Medication Reconciliation click on Reconciliation tab (Top Left Corner). Click on Admission. The Admission Medication Reconciliation Screen will open with a list of all Active and Documented Medications. Click on Continue or Do Not Continue for each Medication that

- has an orange asterix (*) next to it. Finish by Clicking **Reconcile and Sign**. A Green Check Mark will appear in Top Right Hand Corner Next to **Adm. Med Rec.** If one does not appear you must reopen the Admission Medication Reconciliation Page and find the med that was not reconciled and resubmit.
- 6. Always do **Documented Medication by History** Prior to **Admission Medication Reconciliation**
- 7. If New Admission (Pre-Op) Perform H&P on Blue/White Form

Transfers

- 1. Before Choosing a Transfer Power Plan you **MUST** first discontinue the Current ICU Power Plan. Right Click on Active Power Plan and click Discontinue. All Orders from the Current Power Plan will open in a new window- In this window Click on the box next to the **Inpatient Admission w/ Dx** Order so a Check Mark Appears. Do the same thing to the box next to the **Code Status** Order. This will prevent these two particular orders from being discontinued from the Power Plan that you are discontinuing. Next click on the drop down box at the top of the window and choose **Cancel**. Finish by clicking **OK** tab at the bottom of the window
- 2. Choose the Appropriate Transfer Power Plan.
- 3. Click all Applicable Orders (Most are Pre-Checked Already) Choose appropriate Daily Labs making note to click them under the **No Central Line-Lab Draw** Tab.
- 4. Click **Initiate** in top Left Corner of Power Plan then Click **Orders for Signature** in bottom right corner
- 5. Perform Transfer Medication Reconciliation click on Reconciliation tab (Top Left Corner). Click on Transfer. The Transfer Medication Reconciliation Screen will open with a list of all Active and Documented Medications. Click on Continue or Do Not Continue for each Medication listed. Finish by Clicking Reconcile and Sign
- 6. If prior to 11am no Handoff is required for transfer unless major changes occurred since morning rounds. If after 11am then formal handoff must be given to the Telemetry NP Team. NP Telemetry Pager Number for handoff is **9272**. NOTE: If transferring a VAD patient forgo Paging the Telemetry NP Team- Instead Page the VAD Nurse Practitioner Lynn Dees directly at Pager **410-232-0388**
- 7. If Performing a Lateral Transfer (ICU-ICU) then you can **forgo all of the above directions**. Simply place a **Transfer to** order into Power chart and choose the appropriate Floor/ICU that the patient is transferring to. Call the Accepting Team and give a **verbal handoff**. Finally Dictate a **Interim Discharge Summary** and note the Job # in the Additional Note Section in Power Chart

Discharges

- 1. Click on Depart tab in Power Chart and Fill out in entirety.
- 2. Add Appointments: Primary Care Provider, Cardiologist, Cardiac Surgery Follow-Up

- Primary Care Provider: Choose within 1-2 weeks of Discharge. Click on "Please Call to Schedule Appointment"
- Referring Cardiologist: Choose within 1-2 weeks of Discharge. Click on "Please Call to Schedule Appointment"
- Cardiac Surgery Follow-Up: Patient Should Leave with this appointment in Place. Call the Cardiac Surgery Office at Extension 8-5842 to schedule a 1-Month Follow-Up with the Cardiac Surgeon who Performed the Case and put date, time and phone number on the Depart.
- Write a Disclaimer next the Cardiac Surgery Follow-Up Appointment that Says: Please Call the Cardiac Surgery office at 410-328-5842 to talk to the on-call Nurse Practitioner if you exhibit any of the following symptoms: Fever>101, Chills, Night Sweats, Chest Pain, Shortness of Breath Drainage/Redness from your incision site, Pain Uncontrolled by your Current Pain Medication, OR for any questions/concerns.
- 3. Print Discharge Scripts from Power Chart and Sign.
- 4. Put Discharge Order in Power Chart
- 5. Dictate Discharge Summary