Unique Plan Description: Oral and Maxillofacial Surgery Post-Op
Plan Selection Display: Oral and Maxillofacial Surgery Post-Op
PlanType: Medical
Version: 30
Begin Effective Date: 02/25/2026 02/25/2026 14:12
End Effective Date: Current
Available at: ***EMMC***
MERCY HOSPITAL
TAMC - THE AROO
Plan Comment:

Legend		
Green Highlight	=	Addition
Red Highlight	=	Deletion

Oral and Maxillofacial Surgery Post-Op
Admit/Dischg/Transfer

☑ Admission Order (DX)
Outpatient Extended Recovery (OOB), Patient Placement Surgical (DEF)*
IP-meets med nec & ELOS of at least 2 MN, Patient Placement Surgical
IP-meets med nec & ELOS of at least 2 MN, Patient Placement Special Care Unit
IP-meets med nec & ELOS of at least 2 MN, Patient Placement Cardiac

Code Status

☑ Code Status and Treatment Restrictions
Code Status: Full Resuscitation (DEF)*
Code Status: DNAR / May Intubate

Vital Signs

☑ Vital Signs (Frequent)
Every 15 minutes x 4; every 30 minutes x 2; every 1 hour x 4; every 4 hours x 2; then every 8 hours

☑ **+14 Hours** Vital Signs
Every 8 Hours

Activity

☑ Activity
Early & Progressive Mobilization, advance activity as tolerated (DEF)*
Ambulate with Assist, ONCE, then up ad lib
Ambulate with Assist, Four Times Daily
Bedrest, Bathroom Privileges
Bedrest

☑ Head of Bed Elevation
30 Degrees

Diet

☐ Diet
Clear Liquid Diet, Advance As Tolerated, Advance to: Full Liquid Diet (DEF)*
Regular Diet, Mechanically Ground Consistency
Regular Diet, Blenderized/Jaw Fracture Consistency
NPO

☐ NPO Communication
NPO: Post-Procedure, NPO except for medications, with sips of water, Medications Permitted

☐ Tube Feeding-Adult Continuous
Promote with Fiber via NG-Tube (Salem Sump), 20 mL/hr Starting Rate, Special Instructions: Check residuals every 4 hours. Hold for 4 hours if residuals greater than 200 mL. Recheck residual. Advance every 4 hours. (DEF)*
Nepro via NG-Tube (Salem Sump), 20 mL/hr Starting Rate, Special Instructions: Check residuals every 4 hours. Hold for 4 hours if residuals greater than 200 mL. Recheck residual. Advance every 4 hours by 20 mL until goal is achieved

☐ Free Water
30 mL, Every 6 Hour Interval

☐ Tube Feeding Additives

☐ Tube Feeding Additives

Supplemental Tube Feeding

☐ Tube Feeding-Adult Bolus
Other (Fill in Special Instructions), Tube Feeding Additives: PROSource

Patient Care

- ☑ JPP CAUTI Prevention Adult(SUB)*
- ☑ JPP Hypoglycemia Adult(SUB)*
- ☑ JPP Med-Surg Adult(SUB)*
- ☑ JPP Nurse Directed Patient Care(SUB)*
- ☑ JPP Nutrition Services(SUB)*
- ☑ JPP Respiratory Therapy Adult(SUB)*
- ☐ Ice Pack
  - *24 hr, jaw bra with ice topically to surgical site* (DEF)*
  - *24 hr, ice topically to surgical site*
  - *24 hr, apply topically to surgical site, 20 minutes on and 20 minutes off for 24-hours*
- ☐ Mouth Care
  - *Avoid straws*
- ☐ Mouth Care
  - *PRN Bleeding, Bite on gauze over extraction sites*
- ☐ Provider Communication
  - *Do not let patient blow nose*
- ☐ Provider Communication
  - *Have the following at bedside at all times*
    - *Comments: Wire cutter Scissors (available to cut elastics) Yankauer suction Pencil and paper to facilitate communication*
- ☑ Notify If
  - *SBP less than 90 or greater than 170 mmHg, Heart Rate less than 50 or greater than 120 beat/min, Respiratory rate is less than 10 or greater than 30, Temperature greater than 38.5 degrees C, Urine Output is less than 30 mL/hour, O2 is less than 92%*

Continuous Solutions

- ☐ Lactated Ringers Injection
  - *Tot Vol: 1,000 mL, Flow Rate: 100 mL/hr, Soln, IV* (DEF)*
  - *Tot Vol: 1,000 mL, Flow Rate: 125 mL/hr, Soln, IV*
  - *Tot Vol: 1,000 mL, Flow Rate: 75 mL/hr, Soln, IV*
- ☐ Sodium Chloride 0.9%
  - *Tot Vol: 1,000 mL, Flow Rate: 100 mL/hr, Soln, IV* (DEF)*
  - *Tot Vol: 1,000 mL, Flow Rate: 125 mL/hr, Soln, IV*
  - *Tot Vol: 1,000 mL, Flow Rate: 75 mL/hr, Soln, IV*
- ☐ Saline Lock
  - *D/C IV fluids once PO intake is greater than 200 mL per shift*

Medications

- ☐ Nicotine Withdrawal(SUB)*
- ☐ Tylenol
  - *650 mg, Susp, PO, Every 4 Hours, PRN, Fever* (DEF)*
    - *Comments: Temperature greater than 38.5 C*
  - *650 mg, Tablet, PO, Every 4 Hours, PRN, Fever*
    - *Comments: Temperature greater than 38.5 C*
- ☐ Protonix
  - *40 mg, EC Tablet, PO, Daily* (DEF)*
  - *40 mg, Soln, IV Push, Daily*

Decadron Taper Doses:(NOTE)*

- ☐ Decadron
  - *8 mg, Soln, IV Push, Every 6 Hour Interval, 2 Doses/Times*
- ☐ **+12 Hours** Decadron
  - *6 mg, Soln, IV Push, Every 6 Hour Interval, 2 Doses/Times*
- ☐ **+24 Hours** Decadron
  - *4 mg, Soln, IV Push, Every 6 Hour Interval, 2 Doses/Times*
- ☐ Narcan
  - *0.1 mg, Soln, IV Push, Every 2 Minute Interval, PRN, Respiratory Depression*
    - *Comments: Up to 0.4 mg for RR LESS THAN 10 or patient difficult to arouse 1. Concentration: 0.4 mg/1 mL 2. Administer 0.1 mg/0.25 mL IV every 2 minutes up to 0.4 mg until respiratory rate improves to baseline and/or patient easily arousable 3. Titrate dose to avoid precipitation of*

withdrawal symptoms, and/or severe pain

Analgesics

☐ Motrin

600 mg, Susp, PO, Every 8 Hours (DEF)*

Comments: Do not order in conjunction with other NSAIDS

800 mg, Susp, PO, Every 8 Hours

Comments: Do not order in conjunction with other NSAIDS

☐ Toradol

15 mg, Soln, IV Push, Every 6 Hour Interval, 6 Doses/Times

Comments: Do not order in conjunction with other NSAIDS

Pain-Mild (Pain Score: 1 - 3)

☐ oxyCODONE

5 mg, Soln, PO, Every 6 Hours, PRN, Pain-Mild (Pain Score: 1 - 3)

Pain-Moderate (Pain Score: 4 - 6)

☐ oxyCODONE

10 mg, Soln, PO, Every 6 Hours, PRN, Pain-Moderate (Pain Score: 4 - 6)

Pain-Severe (Pain Score: 7 - 10)

☐ Dilaudid

0.5 mg, Soln, IV Push, Every 1 Hour Interval, PRN, Pain-Severe (Pain Score: 7 - 10) (DEF)*

1 mg, Soln, IV Push, Every 2 Hours, PRN, Pain-Severe (Pain Score: 7 - 10)

Antiemetics

☐ Zofran

4 mg, Soln, IV Push, Every 4 Hours, PRN, Nausea and/or Vomiting (DEF)*

4 mg, Soln, IV Push, ONCE

☐ SURG Nausea Control Post Op Protocol Adult(SUB)*

Antimicrobials

General antibiotics(NOTE)*

☐ **+4 Hours** ampicillin

1,000 mg, Soln, IVPB, Every 6 Hour Interval, Indication: Prophylaxis

Comments: Start 6 hours after last dose given.

Severe penicillin allergy: Use ampicillin based regimen unless history of: mediated reaction to penicillins, cephalexin, cefaclor, or cefprozil (anaphylaxis, angioedema, laryngeal edema, etc.) Severe immune cutaneous reaction (Stevens-Johnson, Toxic Epidermal Necrolysis, etc.)(NOTE)*

☐ **+6 Hours** ceFAZolin

2 gm, Soln, IVP, Every 8 Hour Interval, Indication: Prophylaxis

Comments: Start 8 hours after last dose given. Reconstitute each vial with 15 mL Sterile Water for Injection. IV PUSH over 2 minutes.

Confirmed Cefazolin allergy: Use cefazolin based regimen unless history of: 1.IgE-mediated reaction to cefazolin (anaphylaxis, angioedema, laryngeal edema, etc.) 2. Skin-testing confirmed allergy to cefazolin 3. Severe cutaneous reaction (Stevens-Johnson, Toxic Epidermal Necrolysis, etc.)(NOTE)*

☐ **+22 Hours** Zithromax

500 mg, Soln, IVPB, Every 24 Hour Interval, Indication: Prophylaxis

Comments: Start 24 hours after last dose given

Corrective Jaw Surgery(NOTE)*

☐ **+6 Hours** ceFAZolin

2 gm, Soln, IVP, Every 8 Hour Interval, Indication: Prophylaxis

Comments: Start 8 hours after last dose given. Reconstitute each vial with 15 mL Sterile Water for Injection. IV PUSH over 2 minutes.

Confirmed Cefazolin allergy: Use cefazolin based regimen unless history of: 1.IgE-mediated reaction to cefazolin (anaphylaxis, angioedema, laryngeal edema, etc.) 2. Skin-testing confirmed allergy to cefazolin 3. Severe cutaneous reaction (Stevens-Johnson, Toxic Epidermal Necrolysis, etc.)(NOTE)*

☐ **+10 Hours** vancomycin

1,000 mg, Soln, IVPB, ONCE, Indication: Prophylaxis, Infuse Over: 60 Minutes, Weight less than 80 kg [Less Than 80 kg] (DEF)*

Comments: Start 12 hours after last dose given; Weight less than 80 kg No Pharmacy to Dose intervention required

1,500 mg, Soln, IVPB, ONCE, Indication: Prophylaxis, Infuse Over: 90 Minutes, Weight 80-110 kg [80 - 110 kg]

Comments: Start 12 hours after last dose given; Weight 80-110 kg No Pharmacy to Dose

intervention required
2,000 mg, Soln, IVPB, ONCE, Indication: Prophylaxis, Infuse Over: 120 Minutes, Weight greater than or equal to 110 kg [Greater Than or Equal To 110 kg]
Comments: Start 12 hours after last dose given; Weight greater than or equal to 110 kg No Pharmacy to Dose intervention required

☐ **+22 Hours** Zithromax
500 mg, Soln, IVPB, Every 24 Hour Interval, Indication: Prophylaxis
Comments: Start 24 hours after last dose given.

Glucose Management

☑ Insulin Infusion Peri Operative Protocol(SUB)*

☐ _Insulin Basal, Pre-Meal, Correction, and Sliding Scale(SUB)*

☐ Insulin Basal/Pre-Meal Transition Protocol (Non Card Surg)(SUB)*

☐ Bedside Glucose Monitoring
Before Meals+Bedtime, notify provider for bedside glucose GREATER THAN 450 mg/dL. If bedside glucose LESS THAN 70 mg/dL see JPP Hypoglycemia for orders. (DEF)*
Every 6 Hours, notify provider for bedside glucose GREATER THAN 450 mg/dL. If bedside glucose LESS THAN 70 mg/dL see JPP Hypoglycemia for orders.

Bowel Management

☐ Senokot
17.2 mg = 2 TAB, Tab, PO, Daily, PRN, Constipation

☐ Colace
100 mg, Cap, PO, Daily, PRN, Constipation

☐ Dulcolax Laxative
10 mg, EC Tablet, PO, Daily, PRN, Constipation

☐ Dulcolax Laxative
10 mg, Supp, RECTAL, Daily, PRN, Constipation

☐ Milk of Magnesia
30 mL, Susp, PO, Daily, PRN, Constipation
Comments: Use with caution in renal insufficiency

Laboratory

☐ CBC with Differential
BLOOD, AM Tomorrow, Start: T+1;0545

Consults

☐ INP Physician Consult
Hospitalist consult, physician must call

Respiratory

☐ Oxygen.
Via: Face Mask, Humidify Oxygen, 4 L/min, Keep Sats: 92% (DEF)*
Via: Nasal Cannula, Humidify Oxygen, 5 L/min, Keep Sats: 92%

☐ Oxygen
Via: Face Mask, Humidify Oxygen, 4 L/min, Keep Sats: 92% (DEF)*
Via: Nasal Cannula, Humidify Oxygen, 5 L/min, Keep Sats: 92%

☐ Pulse Oximetry
Every 4 Hours, and PRN (DEF)*
Every 8 Hours, and PRN
CONTINUOUS

Non Categorized

☑ VTE Prophylaxis Advisor
General surgery

☑ Provider Communication
Nurse may Initiate Planned PowerPlan upon patient arrival

Providers must exercise independent clinical judgment when using order sets.(NOTE)*

***Report Legend:**
DEF - This order sentence is the default for the selected order
GOAL - This component is a goal
IND - This component is an indicator
INT - This component is an intervention

IVS - This component is an IV Set
NOTE - This component is a note
Rx - This component is a prescription
SUB - This component is a subphase