



# Admission Note & Pre-Surgical Orders

## E.N.T. & PLASTIC SURGERY

### ADULT

Patient Name	_____
Date of Birth	_____
Admission Date	_____
Admitting Physician (FULL NAME W/MIDDLE INITIAL)	_____

Admit to ASU - Adult     Admit Inpatient

**ICD-10 Diagnosis(es) code(s):** \_\_\_\_\_

**Planned Procedure(s) CPT codes:** \_\_\_\_\_

**Anesthesia**     General     MAC/Sedation     Local

**Admit Note** (admit note must contain justification for surgery or admission)

\_\_\_\_\_

\_\_\_\_\_

**Clinical History or Conditions Present On Admission**     NONE

Diabetes (please specify):     Insulin Dependent     Oral Medication     Diet Controlled

**Cardiac**

Myocardial Infarction     Congestive Heart Failure     Coronary Artery Disease     DVT/VTE     AICD (refer to NYEE/MS policy on patients with defibrillators)

**Neuro**

CVA     Other: \_\_\_\_\_

**Pulmonary**

Asthma     COPD     Other: \_\_\_\_\_

**Renal**

ESRD     Hemodialysis     Peritoneal Hemodialysis

**Other Hx:** \_\_\_\_\_

Hx of Multidrug-Resistant Organism (MDRO) within past 12 months    Isolation status if required:     Contact     Droplet

**Allergies: (include medications, food, environmental)**

No Known Allergies     Latex     Allergies: \_\_\_\_\_

**Orders**

**1. Medical Clearance/Consult**

Medical clearance to be completed by an outside Licensed Independent Practitioner within 30 days of surgical procedure (information required on file at NYEE/MS no later than 72 hours prior to scheduled surgery)

Medical Consult for medical clearance     Specify MD: (optional) \_\_\_\_\_

**2. Diet** - NPO on admission    **3. Insert saline lock on IV**

**4. Pre-Op Diagnostic Testing** (Refer to pre-surgical guidelines or contact Anesthesia Department at 212-979-4464)

**NOTE: All diagnostic information completed at outside facility required on file at NYEE/MS no later than 72 hours prior to scheduled surgery**

No labs Required; Healthy Patient Protocol     No EKG Required or completed at outside facility

No labs Required; Completed at outside facility     EKG; 12 Lead: (required for all patients over age 50)

**Hx of Diabetes**

Basic Metabolic Panel - BMP  
Finger Stick (Capillary Blood Glucose) on admission  
Diabetic Protocol for NPO Patients Order Set on admission

**Hx of Renal Disease, Cardiac/Pulmonary disease including Hypertension**

Basic Metabolic Panel - BMP  
EKG; 12 Lead

**Hx of Liver Disease (with MAC/Sedation)**

CBC3 (WBC,HGB,PLT) Basic  
Metabolic Panel - BMP  
Prothrombin Time- INR PROFILE  
Activated PTT

**Hx of Liver Disease (with General Anesthesia)**

CBC3 (WBC,HGB,PLT)  
Basic Metabolic Panel - BMP  
Prothrombin Time- INR PROFILE  
Activated PTT  
Hepatic Profile - LFT

**Hx of Anemia or expected blood loss in surgery greater than 200 ml**

CBC3 (WBC,HGB,PLT)

**Current Coumadin or Warfarin Anticoagulant Therapy**

Prothrombin Time- INR PROFILE

**Current Dialysis Patient**

Serum Potassium on admission

**Female of Menstruating Age**

Pregnancy Test, URINE on admission

\_\_\_\_\_

Physician name (PRINT)

\_\_\_\_\_

Physician signature

\_\_\_\_\_

Date

\_\_\_\_\_

Time

