

Hospital Regulation: The signature of the physician must accompany all orders

NKA: No Known Allergies  Allergies: \_\_\_\_\_

**Instructions:** Any selected order will be ordered and all orders with a blank check box WILL NOT be ordered unless selected. If there is a selected order that you DO NOT want, please strike through the order.

**Thoracentesis Procedure**

- Thoracentesis Procedure
  - which side should the procedure be performed on?  RIGHT  LEFT
  - Is the procedure for  diagnostic or  therapeutic reasons?
  - Is the patient on anticoagulants or blood thinners?  Yes  No

**Activity**

- Bedrest for 2 hours- continuous

**Labs: Pre Procedure**

- CBC w/o Diff body fluid
- APTT body fluid
- Total Protein body fluid
- Protime-INR body fluid
- Lactate dehydrogenase, body fluid
- Albumin body fluid

**Labs: Intra- Procedure Fluid Analysis**

- Albumin body fluid
- Protein body fluid
- Glucose body fluid
- Cell count body fluid
- Non gyn cytology body fluid
- Culture body fluid
- Gram stain body fluid
- AFB stain
- AFB culture
- Mycobacterium tb pcr
- Fungal culture
- Cholesterol body fluid
- Triglycerides body fluid
- Amylase body fluid

**Imaging: X-ray**

- Xray chest 2 view STAT post thoracentesis

Date:

Time:

Doctor's Signature:

Dictation ID #



Northeast Georgia Medical Center

NGMC PHYSICIANS ORDERS #304100892 (9/11/2017)

**THORACENTESIS ORDERS**



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