



Cardiac Surgery Clinical Pathway Post-Op Step 1



Cardiac Surgery Clinical Pathway Post-Op Step 1

TIME										EVENTS / INTERVENTIONS										EVENTS / INTERVENTIONS									
ASSESSMENT / ASSESSMENT OUTCOMES: To be completed q4h x 24 hours post-op, then q8h. If normal, initial only. If abnormal, describe in events/interventions section.	CRITERIA									EVENTS / INTERVENTIONS										EVENTS / INTERVENTIONS									
	Central Nervous System																												
	Alert & oriented x 3 spheres																												
	Follows commands																												
	Moves all limbs																												
	Cardiovascular																												
	Skin color/warmth/circulation:																												
	Edema:																												
	Peripheral pulses palpable Rt ____ Lt ____																												
	Capillary refill < 3 sec																												
	Epicardial pacing wires A <input type="checkbox"/> V <input type="checkbox"/>																												
	• Intact & Insulated																												
	• Attached to pacemaker																												
	• Settings: mode _____ rate _____																												
	A/V mA _____ A/V mV _____																												
	Lines/IV sites: #1 _____ #2 _____																												
	Respiratory																												
	No shortness of breath at rest																												
	Air Entry: Anterior:																												
	Posterior:																												
	Chest tube site: _____ dry & intact																												
	Chest tube site: _____ dry & intact																												
	Chest tube site: _____ dry & intact																												
	Chest tube(s) to 20cm H ₂ O suction																												
	Air leak: Yes <input type="checkbox"/> No <input type="checkbox"/> site _____																												
	Chest tube dressing: dry and intact																												
	Changed																												
	Gastrointestinal																												
	Abdomen soft / non tender / not distended																												
	No nausea or controlled nausea																												
Bowel sounds x 4 quadrants																													
Passing flatus																													
Bowel Movement																													
Genitourinary																													
Foley in situ or D/C @ _____																													
Urine output > 240 ml per 8 hours																													
Urine clear, amber																													
Denies dysuria/burning with voiding																													



Cardiac Surgery Clinical Pathway Post-Op Step 1

Date: _____

Time admitted: _____

Assessment Parameters

- Continuous cardiac monitoring (telemetry). Electrodes to be changed q24h and PRN. Record rhythm strip on transfer to ward, q8h with rhythm change or chest pain
- ST Monitoring (Lead II, V5) with suspected ischemia
- Vital signs on ward transfer, q4h x 4, then q6h: BP, HR, RR, temperature
- Assess/re-assess pain q1h & PRN
- Head to toe assessment on transfer, q4h x 24 post-op, then q8h
- Titrate oxygen to SpO₂ ≥ 92%. Discontinue oxygen when SpO₂ ≥ 92% on room air.

INTERVENTIONS/OUTCOMES		N	D	E	
TESTS	<input checked="" type="checkbox"/> Blood & wound cultures, sputum, urine C&S if temp ≥ 38.5° C (CABG) or ≥ 38° C (valve)	.....	.....	.....
	<input type="checkbox"/> If on Warfarin: Daily INR.....	.....	.....	.....
	<input type="checkbox"/> Glycemic Protocol.....	.....	.....	.....
TREATMENTS/ OXYGENATION	<input checked="" type="checkbox"/> Daily SpO ₂ on room air _____	.....	.....	.....
	<input checked="" type="checkbox"/> Intake & Output .....	.....	.....	.....
	<input checked="" type="checkbox"/> Weigh daily in am kg.....	.....	.....	.....
	<input checked="" type="checkbox"/> EVH Site: Wrap leg in tensor X 48h. Re-wrap q12h done at ..... .....	.....	.....	.....
	<input checked="" type="checkbox"/> Change sternal and leg dressing daily and PRN. Leave incision open to air if no drainage.	.....	.....	.....
	Sternal incision <input type="checkbox"/> open to air .....	.....	.....	.....
	<input type="checkbox"/> dressing dry and intact .....	.....	.....	.....
	<input type="checkbox"/> dressing changed at ..... .....	.....	.....	.....
	Leg incision <input type="checkbox"/> open to air .....	.....	.....	.....
	<input type="checkbox"/> dressing dry and intact .....	.....	.....	.....
<input type="checkbox"/> dressing changed at ..... .....	.....	.....	.....
<ul style="list-style-type: none"> • Vital signs stable..... • Oxygen saturation ≥ 92% .....		.....	.....	.....
INTRAVENOUS/ MEDICATIONS	<input checked="" type="checkbox"/> Reduce IV rate to keep the vein open or lock off once oral intake is adequate.....	.....	.....	.....
	<input checked="" type="checkbox"/> Check IV site & rate q 1 h.....	.....	.....	.....
	• IV site patent, not reddened and infusing at ordered rate.....	.....	.....	.....
NUTRITION	<input checked="" type="checkbox"/> Modified fat, 100 mmol sodium diet.....	.....	.....	.....
	<input type="checkbox"/> Controlled carbohydrate diet <input type="checkbox"/> with HS Snack.....	.....	.....	.....
	<input type="checkbox"/> Clear fluids .....	.....	.....	.....
• Tolerates oral intake .....		.....	.....	.....
SAFETY / ACTIVITY	Nursing and/or Physiotherapy	.....	.....	.....
	• Orientation to unit & routine care .....	.....	.....	.....
	• Call system within reach .....	.....	.....	.....
	• Deep breathing & supported coughing q1h while awake.....	.....	.....	.....
	• Up in chair 2 times & PRN - transfer with sternal precautions.....	.....	.....	.....
	• Range of motion exercises - foot/ankle, hip/knee & unilateral shoulder flexion 2 - 3 times ..	.....	.....	.....
	• Walk with assistance 2-3 times.....	.....	.....	.....
	• Hygiene <input type="checkbox"/> Self-care <input type="checkbox"/> Assist (encourage female patients to wear bra).....	.....	.....	.....
	• Ambulates in room/hallway distance _____ RHR _____ EHR _____	.....	.....	.....
	Resting SpO ₂ _____ Ex. SpO ₂ _____ Independent _____	.....	.....	.....
	Assist/Gait aids .....	.....	.....	.....
	Auscultation .....	.....	.....	.....
	<ul style="list-style-type: none"> • Tolerates Step 1 Activities • Activity outcomes met but experiencing the following • Patient Safety maintained
	TEACHING	• Step 1 completed on Cardiac Sciences Inpatient Unit Discharge/Teaching Checklist
		
PSYCHOSOCIAL / SPIRITUAL	Spiritual Care/Nursing	.....	.....	.....
	• Assess emotional and spiritual concerns.....	.....	.....	.....
	Consult as needed: <input type="checkbox"/> Social Work .....	.....	.....	.....
<ul style="list-style-type: none"> • Opportunity to express concerns provided • Patient/family is coping with cardiac condition.....		.....	.....	.....
PLAN REVIEWED	• Plan reviewed (interventions completed, outcomes in shaded areas met).....	.....	.....	.....
	• Move to Step 2 <input type="checkbox"/> yes <input type="checkbox"/> no .....	.....	.....	.....



Cardiac Surgery Clinical Pathway Post-Op Step 1

SIGNATURE (WRITE/PRINT)	SHIFT	CATEGORY	INITIAL	CULTURES:	DATE/TIME
1.				Sites	
2.				1.	
3.				2.	
4.				3.	
5.				4.	
6.				5.	
				6.	
TIME					
Rhythm					
Ectopics					
O ₂ Therapy					
SpO ₂					
Respiratory Rate					
Pain (0-10 scale)					
Temperature					
Heart Rate					
(R) Radial					
(A) Apical					
(S) Screen					
Blood Pressure					
INFUSIONS					
1.					
Initial					
2.					
Initial					
3.					
Initial					
OTHER					
Initial					



Cardiac Surgery Clinical Pathway Post-Op Step 2



Cardiac Surgery Clinical Pathway Post-Op Step 2

	TIME						EVENTS / INTERVENTIONS	EVENTS / INTERVENTIONS
ASSESSMENT / ASSESSMENT OUTCOMES: To be completed q4h x 24 hours post-op, then q8h. If normal, initial only. If abnormal, describe in events/interventions section.	CRITERIA							
	Central Nervous System							
	Alert & oriented x 3 spheres							
	Follows commands							
	Moves all limbs							
	Cardiovascular							
	Skin color/warmth/circulation:							
	Edema:							
	Peripheral pulses palpable Rt ____ Lt ____							
	Capillary refill < 3 sec							
	Epicardial pacing wires A <input type="checkbox"/> V <input type="checkbox"/>							
	• Intact & Insulated							
	• Attached to pacemaker							
	• Settings: mode _____ rate _____							
	A/V mA _____ A/V mV _____							
	Lines/IV sites: #1 _____ #2 _____							
	Respiratory							
	No shortness of breath at rest							
	Air Entry: Anterior:							
	Posterior:							
	Chest tube site: _____ dry & intact							
	Chest tube site: _____ dry & intact							
	Chest tube site: _____ dry & intact							
	Chest tube(s) to 20cm H ₂ O suction							
	Air leak: Yes <input type="checkbox"/> No <input type="checkbox"/> site _____							
	Chest tube dressing: dry and intact							
	Changed							
	Gastrointestinal							
	Abdomen soft / non tender / not distended							
	No nausea or controlled nausea							
Bowel sounds x 4 quadrants								
Passing flatus								
Bowel Movement								
Genitourinary								
Foley in situ or D/C @ _____								
Urine output > 240 ml per 8 hours								
Urine clear, amber								
Denies dysuria/burning with voiding								

Cardiac Surgery Clinical Pathway Post-Op Step 2

Date: _____

Assessment Parameters

- Continuous cardiac monitoring (telemetry). Electrodes to be changed q24h and PRN. Record rhythm strip on transfer to ward, q8h with rhythm change or chest pain
- ST Monitoring (Lead II, V5) with suspected ischemia
- Vital signs on ward transfer, q4h x 4, then q6h: BP, HR, RR, temperature
- Assess/re-assess pain q1h & PRN
- Head to toe assessment on transfer, q4h x 24 post-op, then q8h
- Titrate oxygen to SpO₂ ≥ 92%. Discontinue oxygen when SpO₂ ≥ 92% on room air.

INTERVENTIONS/OUTCOMES	N	D	E																																
Carry over interventions/outcomes from Step 1 _____																																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 10%;">TESTS</th> <td> <input checked="" type="checkbox"/> Blood & wound cultures, sputum, urine C&S if temp ≥ 38.5° C (CABG) or ≥ 38° C (valve) <input type="checkbox"/> If on Warfarin: Daily INR..... <input type="checkbox"/> Glycemic Protocol..... </td> <td></td> <td></td> <td></td> </tr> <tr> <th style="width: 10%;">TREATMENTS/OXYGENATION</th> <td> <input checked="" type="checkbox"/> Daily SpO₂ on room air <input checked="" type="checkbox"/> Intake & Output <input checked="" type="checkbox"/> Weigh daily in am kg..... <input checked="" type="checkbox"/> EVH Site: Wrap leg in tensor X 48h. Re-wrap q12h done at <input checked="" type="checkbox"/> Change sternal and leg dressing daily and PRN. Leave incision open to air if no drainage. Sternal incision <input type="checkbox"/> open to air <input type="checkbox"/> dressing dry and intact <input type="checkbox"/> dressing changed at Leg incision <input type="checkbox"/> open to air <input type="checkbox"/> dressing dry and intact <input type="checkbox"/> dressing changed at <input checked="" type="checkbox"/> Remove sternal dressing with chest tube removal..... <input checked="" type="checkbox"/> Chest tube dressing for 48 h post chest tube removal..... • Vital signs stable..... • Oxygen saturation ≥ 92% • Foley discontinued at 0600 </td> <td></td> <td></td> <td></td> </tr> <tr> <th style="width: 10%;">INTRAVENOUS/MEDICATIONS</th> <td> <input checked="" type="checkbox"/> Reduce IV rate to keep the vein open or lock off once oral intake is adequate..... • IV Flushed <input checked="" type="checkbox"/> Check IV site & rate q 1 h..... • IV site patent, not reddened and infusing at ordered rate..... </td> <td></td> <td></td> <td></td> </tr> <tr> <th style="width: 10%;">NUTRITION</th> <td> <input checked="" type="checkbox"/> Modified fat, 100 mmol sodium diet <input type="checkbox"/> Controlled carbohydrate diet <input type="checkbox"/> with HS Snack..... <input type="checkbox"/> Clear Fluids • Tolerates oral intake </td> <td></td> <td></td> <td></td> </tr> <tr> <th style="width: 10%;">SAFETY / ACTIVITY</th> <td> Nursing • Activity progression: Deep breathing & supported coughing → transfer with sternal precautions → up in chair for meals & PRN → walk with assist 4-6 times..... Walked at • Hygiene <input type="checkbox"/> Self care <input type="checkbox"/> Assist..... • No/minimal discomfort with mobilization..... Physiotherapy • Ambulates in room/hallway distance _____ RHR _____ EHR _____ Resting SpO₂ _____ Ex. SpO₂ _____ Independent _____ Assist/Gait aids _____ Auscultation _____ • Tolerates Step 2 Activities • Activity outcomes met but experiencing the following </td> <td></td> <td></td> <td></td> </tr> <tr> <th style="width: 10%;">TEACHING</th> <td>• Step 2 completed on Cardiac Sciences Inpatient Unit Discharge/Teaching Checklist</td> <td></td> <td></td> <td></td> </tr> <tr> <th style="width: 10%;">PLAN REVIEWED</th> <td> • Plan reviewed (interventions completed, outcomes in shaded areas met)..... • Carry over interventions met <input type="checkbox"/> yes <input type="checkbox"/> no • Move to Step 3 <input type="checkbox"/> yes <input type="checkbox"/> no </td> <td></td> <td></td> <td></td> </tr> </table>	TESTS	<input checked="" type="checkbox"/> Blood & wound cultures, sputum, urine C&S if temp ≥ 38.5° C (CABG) or ≥ 38° C (valve) <input type="checkbox"/> If on Warfarin: Daily INR..... <input type="checkbox"/> Glycemic Protocol.....				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Walked at • Hygiene <input type="checkbox"/> Self care <input type="checkbox"/> Assist..... • No/minimal discomfort with mobilization Physiotherapy • Ambulates in room/hallway distance _____ RHR _____ EHR _____ Resting SpO ₂ _____ Ex. SpO ₂ _____ Independent _____ Assist/Gait aids _____ Auscultation _____ • Tolerates Step 2 Activities • Activity outcomes met but experiencing the following				TEACHING	• Step 2 completed on Cardiac Sciences Inpatient Unit Discharge/Teaching Checklist				PLAN REVIEWED	• Plan reviewed (interventions completed, outcomes in shaded areas met)..... • Carry over interventions met <input type="checkbox"/> yes <input type="checkbox"/> no • Move to Step 3 <input type="checkbox"/> yes <input type="checkbox"/> no			
TESTS	<input checked="" type="checkbox"/> Blood & wound cultures, sputum, urine C&S if temp ≥ 38.5° C (CABG) or ≥ 38° C (valve) <input type="checkbox"/> If on Warfarin: Daily INR..... <input type="checkbox"/> Glycemic Protocol.....																																		
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SAFETY / ACTIVITY	Nursing • Activity progression: Deep breathing & supported coughing → transfer with sternal precautions → up in chair for meals & PRN → walk with assist 4-6 times..... Walked at • Hygiene <input type="checkbox"/> Self care <input type="checkbox"/> Assist..... • No/minimal discomfort with mobilization Physiotherapy • Ambulates in room/hallway distance _____ RHR _____ EHR _____ Resting SpO ₂ _____ Ex. SpO ₂ _____ Independent _____ Assist/Gait aids _____ Auscultation _____ • Tolerates Step 2 Activities • Activity outcomes met but experiencing the following																																		
TEACHING	• Step 2 completed on Cardiac Sciences Inpatient Unit Discharge/Teaching Checklist																																		
PLAN REVIEWED	• Plan reviewed (interventions completed, outcomes in shaded areas met)..... • Carry over interventions met <input type="checkbox"/> yes <input type="checkbox"/> no • Move to Step 3 <input type="checkbox"/> yes <input type="checkbox"/> no																																		

SIGNATURE (WRITE/PRINT)	SHIFT	CATEGORY	INITIAL	CULTURES:	DATE/TIME
1.				Sites	
2.				1.	
3.				2.	
4.				3.	
5.				4.	
6.				5.	
				6.	
TIME					
Rhythm					
Ectopics					
O ₂ Therapy					
SpO ₂					
Respiratory Rate					
Pain (0-10 scale)					
Temperature					
Heart Rate (R) Radial (A) Apical (S) Screen					
Blood Pressure					
INFUSIONS					
1.					
Initial					
2.					
Initial					
3.					
Initial					
OTHER					
Initial					



Cardiac Surgery Clinical Pathway Post-Op Step 3



Cardiac Surgery Clinical Pathway Post-Op Step 3

		TIME						EVENTS / INTERVENTIONS						EVENTS / INTERVENTIONS					
ASSESSMENT / ASSESSMENT OUTCOMES: To be completed q4h x 24 hours post-op, then q8h. If normal, initial only. If abnormal, describe in events/interventions section.	CRITERIA																		
	Central Nervous System																		
	Alert & oriented x 3 spheres																		
	Follows commands																		
	Moves all limbs																		
	Cardiovascular																		
	Skin color/warmth/circulation:																		
	Edema:																		
	Peripheral pulses palpable Rt ____ Lt ____																		
	Capillary refill < 3 sec																		
	Epicardial pacing wires A <input type="checkbox"/> V <input type="checkbox"/>																		
	• Intact & Insulated																		
	• Attached to pacemaker																		
	• Settings: mode _____ rate _____																		
	A/V mA _____ A/V mV _____																		
	Lines/IV sites: #1 _____ #2 _____																		
	Respiratory																		
	No shortness of breath at rest																		
	Air Entry: Anterior:																		
	Posterior:																		
	Chest tube site: _____ dry & intact																		
	Chest tube site: _____ dry & intact																		
	Chest tube site: _____ dry & intact																		
	Chest tube(s) to 20cm H ₂ O suction																		
	Air leak: Yes <input type="checkbox"/> No <input type="checkbox"/> site _____																		
	Chest tube dressing: dry and intact																		
	Changed																		
	Gastrointestinal																		
	Abdomen soft / non tender / not distended																		
	No nausea or controlled nausea																		
Bowel sounds x 4 quadrants																			
Passing flatus																			
Bowel Movement																			
Genitourinary																			
Foley in situ or D/C @ _____																			
Urine output > 240 ml per 8 hours																			
Urine clear, amber																			
Denies dysuria/burning with voiding																			

Date: _____

Assessment Parameters

- Continuous cardiac monitoring (telemetry). Electrodes to be changed q24h and PRN. Record rhythm strip on transfer to ward, q8h with rhythm change or chest pain
- ST Monitoring (Lead II, V5) with suspected ischemia
- Vital signs on ward transfer, q4h x 4, then q6h: BP, HR, RR, temperature
- Assess/re-assess pain q1h & PRN
- Head to toe assessment on transfer, q4h x 24 post-op, then q8h
- Titrate oxygen to SpO₂ ≥ 92%. Discontinue oxygen when SpO₂ ≥ 92% on room air.

INTERVENTIONS/OUTCOMES		N	D	E
Carry over interventions/outcomes from Step 2 _____				
TESTS	<input checked="" type="checkbox"/> Blood & wound cultures, sputum, urine C&S if temp ≥ 38.5° C (CABG) or ≥ 38° C (valve).... <input type="checkbox"/> If on Warfarin: Daily INR..... <input type="checkbox"/> Glycemic Protocol.....			
	<input checked="" type="checkbox"/> Daily SpO ₂ on room air..... <input checked="" type="checkbox"/> Intake & Output <input checked="" type="checkbox"/> Weigh daily in am kg <input checked="" type="checkbox"/> Change sternal and leg dressing daily and PRN. Leave incision open to air if no drainage. Sternal incision <input type="checkbox"/> open to air..... <input type="checkbox"/> dressing dry and intact <input type="checkbox"/> dressing changed at Leg incision <input type="checkbox"/> open to air <input type="checkbox"/> dressing dry and intact <input type="checkbox"/> dressing changed at <input checked="" type="checkbox"/> Remove sternal dressing with chest tube removal..... <input checked="" type="checkbox"/> Chest tube dressing for 48 h post chest tube removal..... • Vital signs stable..... • Oxygen saturation ≥ 92%			
INTRAVENOUS/MEDICATIONS	<input checked="" type="checkbox"/> Reduce IV rate to keep the vein open or lock off once oral intake is adequate..... • IV Flushed <input checked="" type="checkbox"/> Check IV site & rate q 1 h..... • IV site patent, not reddened and infusing at ordered rate..... • IV discontinued at _____ with catheter intact			
NUTRITION	<input checked="" type="checkbox"/> Modified fat, 100 mmol sodium diet <input type="checkbox"/> Controlled carbohydrate diet <input type="checkbox"/> with HS Snack..... • Tolerates oral intake			
SAFETY / ACTIVITY	Nursing • Ambulate in hall 4-6 times; walked at • Hygiene <input type="checkbox"/> Self care <input type="checkbox"/> Assist..... • No/minimal discomfort with mobilization.....			
	Physiotherapy • Ambulates in room/hallway distance _____ RHR _____ EHR _____ Resting SpO ₂ _____ Ex. SpO ₂ _____ Independent _____ Assist/Gait aids _____ Auscultation _____ • Tolerates Step 3 Activities • Activity outcomes met but experiencing the following			
TEACHING	• Step 3 completed on Cardiac Sciences Inpatient Unit Discharge/Teaching Checklist			
PSYCHOSOCIAL	• Complete "Coping with a Cardiac Event" checklist with patient..... • Psychological referral criteria met <input type="checkbox"/> yes <input type="checkbox"/> no..... Referral to Clinical Psychologist <input type="checkbox"/> Declined <input type="checkbox"/> Accepted..... • If patient exhibits acute mental distress, physician/delegate informed to initiate an inpatient psychiatric consultation.....			
	PLAN REVIEWED • Plan reviewed (interventions completed, outcomes in shaded areas met)..... • Carry over interventions met <input type="checkbox"/> yes <input type="checkbox"/> no..... • Move to Step 4 <input type="checkbox"/> yes <input type="checkbox"/> no.....			

Cardiac Surgery Clinical Pathway
Post-Op Step 3

SIGNATURE (WRITE/PRINT)	SHIFT	CATEGORY	INITIAL	CULTURES:	DATE/TIME
1.				Sites	
2.				1.	
3.				2.	
4.				3.	
5.				4.	
6.				5.	
				6.	
TIME					
Rhythm					
Ectopics					
O ₂ Therapy					
SpO ₂					
Respiratory Rate					
Pain (0-10 scale)					
Temperature					
Heart Rate (R) Radial (A) Apical (S) Screen					
Blood Pressure					
INFUSIONS					
1. Initial					
2. Initial					
3. Initial					
OTHER					
Initial					



Cardiac Surgery Clinical Pathway Post-Op Step 4



Cardiac Surgery Clinical Pathway Post-Op Step 4

		TIME						EVENTS / INTERVENTIONS						EVENTS / INTERVENTIONS					
ASSESSMENT / ASSESSMENT OUTCOMES: To be completed q4h x 24 hours post-op, then q8h. If normal, initial only. If abnormal, describe in events/interventions section.	CRITERIA																		
	Central Nervous System																		
	Alert & oriented x 3 spheres																		
	Follows commands																		
	Moves all limbs																		
	Cardiovascular																		
	Skin color/warmth/circulation:																		
	Edema:																		
	Peripheral pulses palpable Rt ____ Lt ____																		
	Capillary refill < 3 sec																		
	Epicardial pacing wires A <input type="checkbox"/> V <input type="checkbox"/>																		
	• Intact & Insulated																		
	• Attached to pacemaker																		
	• Settings: mode _____ rate _____																		
	A/V mA _____ A/V mV _____																		
	Lines/IV sites: #1 _____ #2 _____																		
	Respiratory																		
	No shortness of breath at rest																		
	Air Entry: Anterior:																		
	Posterior:																		
	Chest tube site: _____ dry & intact																		
	Chest tube site: _____ dry & intact																		
	Chest tube site: _____ dry & intact																		
	Chest tube(s) to 20cm H ₂ O suction																		
	Air leak: Yes <input type="checkbox"/> No <input type="checkbox"/> site _____																		
	Chest tube dressing: dry and intact																		
	Changed																		
	Gastrointestinal																		
	Abdomen soft / non tender / not distended																		
	No nausea or controlled nausea																		
Bowel sounds x 4 quadrants																			
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Genitourinary																			
Foley in situ or D/C @ _____																			
Urine output > 240 ml per 8 hours																			
Urine clear, amber																			
Denies dysuria/burning with voiding																			

Date: _____

Assessment Parameters

- Continuous cardiac monitoring (telemetry). Record rhythm strip on transfer to ward, q8h with rhythm change or chest pain
- ST Monitoring (Lead II, V5) with suspected ischemia
- Vital signs q6h: BP, HR, RR, temperature
- Assess/re-assess pain q1h & PRN
- Head to toe assessment q8h
- Titrate oxygen to SpO₂ ≥ 92%. Discontinue oxygen when SpO₂ ≥ 92% on room air.

INTERVENTIONS/OUTCOMES		N	D	E
Carry over interventions/outcomes from Step 3 _____				
TESTS	<input checked="" type="checkbox"/> Blood & wound cultures, sputum & urine C&S if temp ≥ 38.5° C (CABG) or ≥ 38° C (valve) <input type="checkbox"/> If on Warfarin: Daily INR..... <input type="checkbox"/> Glycemic Protocol.....	.....	.....	.....
TREATMENTS	<input checked="" type="checkbox"/> Daily SpO ₂ on room air _____ <input checked="" type="checkbox"/> Weigh daily in am _____ kg..... <input checked="" type="checkbox"/> Change sternal and leg dressing daily and PRN. Leave incision open to air if no drainage. <input checked="" type="checkbox"/> Sternal incision <input type="checkbox"/> open to air <input type="checkbox"/> dressing dry and intact <input type="checkbox"/> dressing changed at _____ <input checked="" type="checkbox"/> Leg incision <input type="checkbox"/> open to air <input type="checkbox"/> dressing dry and intact <input type="checkbox"/> dressing changed at _____ <input checked="" type="checkbox"/> Remove sternal dressing with chest tube removal..... <input checked="" type="checkbox"/> Chest tube dressing for 48 h post chest tube removal..... <input checked="" type="checkbox"/> Telemetry discontinued at _____ <input checked="" type="checkbox"/> Vital signs stable..... <input checked="" type="checkbox"/> Oxygen saturation ≥ 92% .....	.....	.....	.....
IV/MEDICATIONS	<input checked="" type="checkbox"/> Discontinue IV prior to discharge..... <input checked="" type="checkbox"/> IV discontinued at _____ with catheter intact .....	.....	.....	.....
NUTRITION	<input checked="" type="checkbox"/> Modified fat, 100 mmol sodium diet <input type="checkbox"/> Controlled carbohydrate diet <input type="checkbox"/> with HS Snack..... <input checked="" type="checkbox"/> Tolerates oral intake .....	.....	.....	.....
SAFETY / ACTIVITY	Nursing <ul style="list-style-type: none"> • Ambulate in hall 4-6 times; walked at _____ • Hygiene <input type="checkbox"/> Self care <input type="checkbox"/> Assist..... • No/minimal discomfort with mobilization..... Physiotherapy <ul style="list-style-type: none"> • Ambulates in room/hallway distance _____ RHR _____ EHR _____ Resting SpO₂ _____ Ex. SpO₂ _____ Independent _____ Assist/Gait aids _____ Auscultation _____ • Climbs _____ steps RHR _____ EHR _____ Resting SpO₂ _____ Ex. SpO₂ _____ Independent _____ Assist/Gait aids _____ • Tolerates Step 4 Activities • Activity outcomes met but experiencing the following _____	.....	.....	.....
TEACHING	<ul style="list-style-type: none"> • Step 4 completed on Cardiac Sciences Inpatient Unit Discharge/Teaching Checklist .....	.....	.....	.....
DISCHARGE PLANNING	<ul style="list-style-type: none"> • Discharge when Step 4 outcomes are met • Patient received a discharge prescription • Review follow up appointments: <input type="checkbox"/> Surgeon/Physician <input type="checkbox"/> Cardiac Clinic <input type="checkbox"/> Other • Discharged at _____ hours, accompanied by _____	.....	.....	.....
PLAN REVIEWED	<ul style="list-style-type: none"> • Plan reviewed (interventions completed, outcomes in shaded areas met)..... • Carry over interventions met <input type="checkbox"/> yes <input type="checkbox"/> no..... • Continue with Step 4 <input type="checkbox"/> yes <input type="checkbox"/> no..... • Move to non-clinical Pathway Documentation <input type="checkbox"/> yes <input type="checkbox"/> no.....	.....	.....	.....

Cardiac Surgery Clinical Pathway Post-Op Step 4

SIGNATURE (WRITE/PRINT)	SHIFT	CATEGORY	INITIAL	CULTURES:	DATE/TIME
1.				Sites	
2.				1.	
3.				2.	
4.				3.	
5.				4.	
6.				5.	
				6.	
TIME					
Rhythm					
Ectopics					
O ₂ Therapy					
SpO ₂					
Respiratory Rate					
Pain (0-10 scale)					
Temperature					
Heart Rate (R) Radial (A) Apical (S) Screen					
Blood Pressure					
INFUSIONS					
1.					
Initial					
2.					
Initial					
3.					
Initial					
OTHER					
Initial					