

## PRESCRIBER ORDERS – PleurX® Abdominal Catheter for Cirrhotic Ascites

1. All orders must be completed and signed by the prescriber.
2. Orders may be deleted by stroking the order out and initialing the entry or by leaving prompts blank (boxes).

Date / Time	
	<input type="checkbox"/> HOME LIVING for follow-up care and drainage of PleurX® catheter and insertion site. Drain Insertion Scheduled on: <span style="background-color: yellow;">                    </span>
	<input type="checkbox"/> HOME LIVING professional staff to provide teaching to client/caregiver regarding routine care of PleurX® catheter, including reminder not to bath/submerge drain site under water
	<input type="checkbox"/> Client to have PleurX® catheter drained by HOME LIVING staff <span style="background-color: yellow;">1-3 times per week</span> <input type="checkbox"/> <b>PRN</b> <input type="checkbox"/> First home pleurX drainage procedure within 3 days of drain insertion (will have drained completely at time of insertion so will not likely require on first visit). <input type="checkbox"/> To prevent infection, please use either a vacuum bottle or a bag with one way valve (such as PeritX) <input type="checkbox"/> Maximum of <span style="background-color: yellow;">3000ml</span> to be drained at each drainage, based on patient comfort
	<input type="checkbox"/> If using vacuum bottles, please note they can cause discomfort when there is no more fluid in the abdomen. Ensure the client knows to inform staff during drainage if discomfort occurs, and stop drain procedure immediately.
	<input type="checkbox"/> Collect ascites fluid <span style="background-color: yellow;">weekly</span> for: Cell count and Diff (>10 ml from drainage bag or bottle in sterile container) <input type="checkbox"/> Specimen to be transported to lab asap ( no longer than 24hrs after collection) <input type="checkbox"/> Specimen to be stored at room temperature
	<input type="checkbox"/> Dressing to PleurX® catheter insertion site to be changed (suggest check all): <input type="checkbox"/> Day one post placement, then after each drainage <input type="checkbox"/> PRN if dressing saturated with fluid (advise client to notify) <input type="checkbox"/> minimum of weekly
	<input type="checkbox"/> Sutures can be removed 6 weeks post pleurX insertion if no significant leaking noted from the insertion site
	<input type="checkbox"/> Vital signs pre and post each drainage. Call ordering provider if: <ul style="list-style-type: none"> <li><input type="checkbox"/> Post procedure Systolic blood pressure decreases more than 20mmHg from pre procedure reading, or and Systolic blood pressure &lt; 80mmHg</li> <li><input type="checkbox"/> cognition change</li> <li><input type="checkbox"/> redness or purulent drainage at PleurX® insertion site</li> <li><input type="checkbox"/> cloudy or bloody ascites fluid</li> <li><input type="checkbox"/> T &gt; 37.8 Celsius</li> <li><input type="checkbox"/> leakage from drain site that is saturating dressing</li> <li><input type="checkbox"/> changes noted in drain area (bulge/hernia at drain site)</li> </ul>
<b>Prescriber Signature:</b>	