## IF YOU RECEIVED THIS FACSIMILE IN ERROR, PLEASE CALL 604-875-4077 IMMEDIATELY



VA: VGH / UBCH / GFS						
VC: BP / Purdy / GPC  ORDERS				ADDRESSOGRAPH		
	COMPLETE OR R	EVIEW ALL	ERGY STATU	IS PRIOR TO WRITI	ING ORDERS	
CARDIAC	SURGERY - PREVE			ERATIVE ATRIA ected to be ordered)	AL FIBRILLAT	(Page 1 of 1)
Date:	Time:					Time Processed
Reassess for POAF prophylaxis (beta-blocker and/or amiodarone) every 12 hours with goal of initiating beta blocker as soon as possible post-operatively.						RN/LPN Initials Comments
STEP 1: RISK S	TRATIFICATION					
Patient risk facto	ors	S	urgical risk fact	ors		
☐ Age 75 years or above		(2 points)	☐ Mitral / tri	cuspid valve surgery	(2 points)	
Age 65 to 74 years		(1 point)	☐ Bicaval ca	annulation	(1 point)	
<ul><li>☐ History of atrial fibrillation</li><li>☐ Renal impairment</li><li>(eGFR less than 15 mL/min)</li></ul>		(2 points) (1 point)		left atrium on pre-op TTE volume greater than 35 m	, , ,	
`	re (LVEF 30% or lower)	(1 point)	If not undergo	ing mitral valve surgery:		
COPD (on regular inhaled therapy)		(1 point)	☐ Mitra	al regurgitation derate or worse)	(2 points)	
				al stenosis derate or worse)	(2 points)	
TOTAL POINTS:	If total points score is les	s than 3 point	s, NORMAL risk	: proceed to STEP 2 on	ly	
	If total points score is 3 p	oints or great	er, ELEVATED r	isk: proceed to STEPS :	2 and 3*	
	*CSICU Director to conside	•		•		
STEP 2: BETA-E	BLOCKER					
Medication:	ocker should be started as so	on as talarated	and at dispration	of the CCICII director **	*	
	orker should be started as so ommendations and contraind					
	order for beta-blocker to be w			date)		
STEP 3: AMIODA	ARONE					
Monitoring:						
	, AST, GGT, alkaline phosph	atase, total and	direct bilirubin up	oon admission to CSICU		
Medication:	-			t - t-i -   Eli   - ti *OP:	<b>k</b> la a a	
	ot start amiodarone prophyla ontraindications listed on pag		oersistent/permar	ient atrial fibrillation "OR"	nas	
	odarone prophylaxis:					
	iodarone 150 mg IV over 30	minutes (start w	ithin the first 24 I	nours post-operatively), for	ollowed by	
	iodarone 1 mg/min IV for 6 h *AND*	•			·	
am	iodarone 200 mg PO/NG BIE					
	Start in morning on POD1 discharge, whicheve		(date) and	continue for 7 days or unt	til hospital	
Prescriber's Sig	nature	Printed Name	e 9.1125   Rev.MA\		ge ID	