



Physician Orders Pediatric: LEB ED Asthma Plan

LEB ED Triage Standing SOB/Wheeze Asthma

Non Categorized

Criteria: Patients greater than 2 years of age with a history of asthma or airway active disease or two or more previous illnesses treated with albuterol/levalbuterol with wheezing heard by occultation during triage.(NOTE)*

Choose medications based on weight based protocol.(NOTE)*

Vital Signs

- ☒ Vital Signs
Monitor and Record T,P,R,BP, Per ED policy

Patient Care

- ☒ O2 Sat Monitoring NSG
Stat, q2h(std)
- ☒ Cardiopulmonary Monitor
T;N Stat, Monitor Type: O2 Monitor

Respiratory Care

- ☒ Oxygen Delivery
Special Instructions: titrate to keep O2 Sat at 90% or greater.
- ☒ Initiate ED Ped Asthma
T;N, Stat

Asthma Phase 1A

Non Categorized

R Powerplan Open

Patient Care

- ☐ IV Insert/Site Care LEB
Stat, q2h(std)
- ☐ Nursing Communication
Deep nasal suction for patients less than one year, PRN for congestion

Respiratory Care

- ☐ ISTAT POC (RT Collect)
- ☐ *T;N Stat once, Test Select Venous Blood Gas (DEF)**
- ☐ *T;N Stat once, Test Select Arterial Blood Gas*
- ☐ Heliox

Medications

Mild Pathway RCS (1 to 4)

- ☐ albuterol (MDI)
4 puff, MDI, INH, once, STAT, (360 mcg = 4 puff)
Comments: Administer via spacer/mask DISPENSE FOR EDUCATION/DISCHARGE





Physician Orders Pediatric: LEB ED Asthma Plan

TEACHING. FOR ED USE ONLY.

- ☐ dexamethasone
 - ☐ 4 mg, Tab, PO, once, STAT [7 - 10.9 kg] (DEF)*
 - ☐ 8 mg, Tab, PO, once, STAT [11 - 14.9 kg]
 - ☐ 12 mg, Tab, PO, once, STAT [15 - 24.9 kg]
 - ☐ 16 mg, Tab, PO, once, STAT [Greater Than or Equal To 25 kg]

Moderate Pathway RCS (5 to 8)

- ☐ albuterol 0.5% inhalation solution
 - ☐ 2.5 mg, Inh Soln, NEB, once, STAT, (0.5 mL = 2.5 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Less Than 20 kg] (DEF)*
Comments: FOR PATIENTS LESS THAN 20 KG
 - ☐ 5 mg, Inh Soln, NEB, once, STAT, (1 mL = 5 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Greater Than or Equal To 20 kg]
Comments: FOR PATIENTS GREATER THAN 20 KG
- ☐ dexamethasone
 - ☐ 4 mg, Tab, PO, once, STAT [7 - 10.9 kg] (DEF)*
 - ☐ 8 mg, Tab, PO, once, STAT [11 - 14.9 kg]
 - ☐ 12 mg, Tab, PO, once, STAT [15 - 24.9 kg]
 - ☐ 16 mg, Tab, PO, once, STAT [Greater Than or Equal To 25 kg]
- ☐ ipratropium
 - 0.5 mg, Inh Soln, NEB, once, STAT, (2.5 mL = 0.5 mg)

Severe Pathway RCS (9 to 12)

- ☐ albuterol 0.5% inhalation solution
 - ☐ 5 mg, Inh Soln, NEB, q15min, STAT, (for 2 dose), (1 mL = 5 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Less Than 20 kg] (DEF)*
Comments: FOR PATIENTS LESS THAN 20 KG
 - ☐ 10 mg, Inh Soln, NEB, q15min, STAT, (for 2 dose), (2 mL = 10 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Greater Than or Equal To 20 kg]
Comments: FOR PATIENTS GREATER THAN 20 KG
- ☐ ipratropium
 - 0.5 mg, Inh Soln, NEB, N/A, STAT, (for 2 dose), (2.5 mL = 0.5 mg)
- ☐ Nursing Communication
 - Contact Physician now and request an order for Fluids AND/OR Magnesium per the Asthma Protocol.
 - Comments: IF NOT ALREADY GIVEN.





Physician Orders Pediatric: LEB ED Asthma Plan

Laboratory

If possibility of pregnancy, place order below:(NOTE)*

- ☐ Pregnancy Screen Serum
STAT, T;N, once, Type: Blood
- ☐ Pregnancy Screen Urine Point of Care
Stat

Consults/Notifications/Referrals

- ☒ CHAMP Referral
T;N
- ☐ Notify Physician-Continuing
Notify For: Respiratory Clinical Score (RCS) greater than or equal to 9.

Asthma Phase 1A (MD ONLY)

Medications

This section is to be utilized by the MD only.(NOTE)*

- ☐ methylPREDNISolone
 - ☐ 2 mg/kg, Ped Injectable, IV Push, once, STAT, Max dose = 80 mg (DEF)*
 - ☐ 2 mg/kg, Ped Injectable, IM, once, STAT, Max dose = 80 mg
- ☐ Sodium Chloride 0.9% Bolus
20 mL/kg, Injection, IV, once, STAT, (infuse over 15 min), Bolus
- ☐ D5 1/2 NS KCl 20 mEq/L
1,000 mL, IV, STAT, mL/hr
- DOSING RANGE FOR MAGNESIUM SULFATE: 25 TO 75 MG/KG, MAX DOSE = 2 GRAMS(NOTE)*
- ☐ magnesium sulfate
 - ☐ 50 mg/kg, Ped Injectable, IV Piggyback, once, STAT, (infuse over 20 min), Max dose = 2 grams [Less Than 40 kg] (DEF)*
 - ☐ 2,000 mg, Ped Injectable, IV Piggyback, once, STAT, (infuse over 20 min), Max dose = 2 grams [Greater Than or Equal To 40 kg]

To Be Ordered by Physician When Needed (NOTE)*

- ☐ terbutaline
10 mcg/kg, Ped Injectable, IV, once, STAT, Loading Dose
- ☐ terbutaline
10 mcg/kg, Ped Injectable, Subcutaneous, once, STAT, Loading Dose, Max dose = 0.3 mg
- ☐ Terbutaline Drip (Pediatric) (IVS)*
Diluent volume
30 mL, IV, STAT, Reference Range: 0.1 to 5 mcg/kg/min; Continuous infusion
terbutaline (additive)
30 mg, mcg/kg/min





Physician Orders Pediatric: LEB ED Asthma Plan

- ☐ EPINEPHrine Injection
0.01 mg/kg, Ped Injectable, IM, once, STAT, Max dose = 0.3mg

Asthma Phase 1B

Medications

Mild Pathway RCS (1 to 4)

- ☐ albuterol (MDI)
4 puff, MDI, INH, once, STAT, (360 mcg = 4 puff); Administer via spacer/mask
Comments: administer via spacer/mask DISPENSE FOR EDUCATION/DISCHARGE TEACHING. FOR ED USE ONLY.

Moderate Pathway RCS (5 to 8)

- ☐ albuterol 0.5% inhalation solution
- ☐ *2.5 mg, Inh Soln, NEB, once, STAT, (0.5 mL = 2.5 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Less Than 20 kg] (DEF)**
Comments: FOR PATIENTS LESS THAN 20 KG
 - ☐ *5 mg, Inh Soln, NEB, once, STAT, (1 mL = 5 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Greater Than or Equal To 20 kg]*
Comments: FOR PATIENTS GREATER THAN 20 KG
- ☐ ipratropium
0.5 mg, Inh Soln, NEB, once, STAT, (2.5 mL = 0.5 mg)

Severe Pathway RCS (9 to 12)

- ☐ albuterol 0.5% inhalation solution
- ☐ *5 mg, Inh Soln, NEB, q15min, STAT, (for 2 dose), (1 mL = 5 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Less Than 20 kg] (DEF)**
Comments: FOR PATIENTS LESS THAN 20 KG
 - ☐ *10 mg, Inh Soln, NEB, q15min, STAT, (for 2 dose), (2 mL = 10 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Greater Than or Equal To 20 kg]*
Comments: FOR PATIENTS LESS THAN 20 KG
- ☐ Albuterol CONTINUOUS Neb PEDS (IVS)*
Sodium Chloride 0.9%
40 mL, NEB, Routine, For Patients Less than 20 kg
albuterol (cont neb additive)
100 mg, 15 mg/hr
- ☐ Albuterol CONTINUOUS Neb PEDS (IVS)*
Sodium Chloride 0.9%
40 mL, NEB, Routine, For Patients Greater than or equal to 20 kg
albuterol (cont neb additive)
100 mg, 30 mg/hr





Physician Orders Pediatric: LEB ED Asthma Plan

- ☐ Nursing Communication
*Contact Physician now and request an order for Magnesium Sulfate per the Asthma Protocol.
Comments: IF NOT ALREADY GIVEN.*

- ☐ ipratropium
0.5 mg, Inh Soln, NEB, once, STAT, (2.5 mL = 0.5 mg)

Asthma Phase 1B (MD ONLY)

Medications

This section is to be utilized by the MD Only.(NOTE)*

- ☐ Sodium Chloride 0.9% Bolus
20 mL/kg, Injection, IV, once, STAT, (infuse over 15 min), IF NOT PREVIOUSLY GIVEN
- ☐ D5 1/2 NS KCl 20 mEq/L
1,000 mL, IV, Routine, mL/hr, IF NOT PREVIOUSLY GIVEN
- DOSING RANGE FOR MAGNESIUM SULFATE: 25 TO 75 MG/KG, MAX DOSE = 2 GRAMS(NOTE)*
- ☐ magnesium sulfate
- ☐ *50 mg/kg, Ped Injectable, IV Piggyback, once, STAT, (infuse over 20 min), Max dose = 2 grams
[Less Than 40 kg] (DEF)**
 - ☐ *2,000 mg, Ped Injectable, IV Piggyback, once, STAT, (infuse over 20 min), Max dose = 2 grams
[Greater Than or Equal To 40 kg]*
- To Be Ordered by Physician When Needed:(NOTE)*
- ☐ terbutaline
10 mcg/kg, Ped Injectable, IV, once, STAT, Loading Dose
- ☐ terbutaline
10 mcg/kg, Ped Injectable, Subcutaneous, once, STAT, Max dose: 0.3 mg, Loading Dose
- ☐ Terbutaline Drip (Pediatric) (IVS)*
Diluent volume
30 mL, IV, STAT, Reference Range: 0.1 to 5 mcg/kg/min, Continuous infusion
terbutaline (additive)
30 mg, mcg/kg/min
- ☐ EPINEPHrine Injection
0.01 mg/kg, Ped Injectable, IM, once, STAT, Max dose = 0.3mg

Asthma Phase 1C

Medications

Mild Pathway RCS (1 to 4)

- ☐ albuterol (MDI)
*4 puff, MDI, INH, once, STAT, (360 mcg = 4 puff); Administer via spacer/mask
Comments: administer via spacer/mask DISPENSE FOR EDUCATION/DISCHARGE
TEACHING. FOR ED USE ONLY.*

Moderate Pathway RCS (5 to 8)





Physician Orders Pediatric: LEB ED Asthma Plan

- ☐ albuterol 0.5% inhalation solution
 - ☐ 2.5 mg, Inh Soln, NEB, once, STAT, (0.5 mL = 2.5 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Less Than 20 kg] (DEF)*
Comments: FOR PATIENTS LESS THAN 20 KG
 - ☐ 5 mg, Inh Soln, NEB, once, STAT, (1 mL = 5 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Greater Than or Equal To 20 kg]
Comments: FOR PATIENTS GREATER THAN 20 KG
- ☐ ipratropium
0.5 mg, Inh Soln, NEB, once, STAT, (2.5 mL = 0.5 mg)
- ☐ Nursing Communication
Contact Physician now and request an order for Fluids AND/OR Magnesium Sulfate per the Asthma Protocol,

Severe Pathway RCS (9 to 12)

- ☐ albuterol 0.5% inhalation solution
 - ☐ 5 mg, Inh Soln, NEB, q15min, STAT, (for 2 dose), (1 mL = 5 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Less Than 20 kg] (DEF)*
Comments: FOR PATIENTS LESS THAN 20 KG
 - ☐ 10 mg, Inh Soln, NEB, q15min, STAT, (for 2 dose), (2 mL = 10 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Greater Than or Equal To 20 kg]
Comments: FOR PATIENTS GREATER THAN 20 KG
- ☐ Albuterol CONTINUOUS Neb PEDS (IVS)*
Sodium Chloride 0.9%
40 mL, NEB, Routine, For Patients Less than 20 kg
albuterol (cont neb additive)
100 mg, 15 mg/hr
- ☐ Albuterol CONTINUOUS Neb PEDS (IVS)*
Sodium Chloride 0.9%
40 mL, NEB, Routine, For Patients Greater than or equal to 20 kg
albuterol (cont neb additive)
100 mg, 30 mg/hr
- ☐ Nursing Communication
Contact Physician now and request an order for Magnesium Sulfate per the Asthma Protocol.
Comments: IF NOT ALREADY GIVEN.
- ☐ ipratropium
0.5 mg, Inh Soln, NEB, once, STAT, (2.5 mL = 0.5 mg)

Asthma Phase 1C (MD ONLY)

Medications





Physician Orders Pediatric: LEB ED Asthma Plan

This section is to be utilized by the MD Only.(NOTE)*

- ☐ Sodium Chloride 0.9% Bolus
20 mL/kg, Injection, IV, once, STAT, (infuse over 15 min), IF NOT PREVIOUSLY GIVEN
- ☐ D5 1/2 NS KCl 20 mEq/L
1,000 mL, IV, Routine, mL/hr, IF NOT PREVIOUSLY GIVEN
- DOSING RANGE FOR MAGNESIUM SULFATE: 25 TO 75 MG/KG, MAX DOSE = 2 GRAMS IF NOT PREVIOUSLY GIVEN(NOTE)*
- ☐ magnesium sulfate
 - ☐ 50 mg/kg, Ped Injectable, IV Piggyback, once, STAT, (infuse over 20 min), Max dose = 2 grams [Less Than 40 kg] (DEF)*
 - ☐ 2,000 mg, Ped Injectable, IV Piggyback, once, STAT, (infuse over 20 min), Max dose = 2 grams [Greater Than or Equal To 40 kg]
- To Be Ordered by Physician When Needed:(NOTE)*
- ☐ terbutaline
10 mcg/kg, Ped Injectable, IV, once, STAT, Loading Dose
- ☐ terbutaline
10 mcg/kg, Ped Injectable, Subcutaneous, once, STAT, Max dose: 0.3 mg, Loading Dose
- ☐ Terbutaline Drip (Pediatric) (IVS)*
Diluent volume
30 mL, IV, STAT, Reference Range: 0.1 to 5 mcg/kg/min, Continuous infusion
terbutaline (additive)
30 mg, mcg/kg/min
- ☐ EPINEPHrine Injection
0.01 mg/kg, Ped Injectable, IM, once, STAT, Max dose = 0.3mg

Asthma Phase 1D

Medications

Mild Pathway RCS (1 to 4)

- ☐ albuterol (MDI)
4 puff, MDI, INH, once, STAT, (360 mcg = 4 puff); Administer via spacer/mask
Comments: administer via spacer/mask DISPENSE FOR EDUCATION/DISCHARGE TEACHING. FOR ED USE ONLY.

Moderate Pathway RCS (5 to 8)

- ☐ albuterol 0.5% inhalation solution
 - ☐ 5 mg, Inh Soln, NEB, q15min, STAT, (for 2 dose), (1 mL = 5 mg) 0.5% soln; FOR BAN USE PER PROTOCOL [Less Than 20 kg] (DEF)*
Comments: FOR PATIENTS LESS THAN 20 KG
 - ☐ 10 mg, Inh Soln, NEB, q15min, STAT, (for 2 dose), (2 mL = 10 mg) 0.5% soln; FOR BAN USE





Physician Orders Pediatric: LEB ED Asthma Plan

PER PROTOCOL [Greater Than or Equal To 20 kg]

Comments: FOR PATIENTS GREATER THAN 20 KG

- ☐ Nursing Communication
Contact Physician now and request an Admit order per Asthma Protocol.
- ☐ Nursing Communication
Contact Physician now and request an order for Magnesium Sulfate per the Asthma Protocol.
Comments: IF NOT ALREADY GIVEN.

Severe Pathway RCS (9 to 12)

- ☐ Albuterol CONTINUOUS Neb PEDS (IVS)*
Sodium Chloride 0.9%
40 mL, NEB, Routine, For Patients Less than 20 kg
albuterol (cont neb additive)
100 mg, 15 mg/hr
- ☐ Albuterol CONTINUOUS Neb PEDS (IVS)*
Sodium Chloride 0.9%
40 mL, NEB, Routine, For Patients Greater than or equal to 20 kg
albuterol (cont neb additive)
100 mg, 30 mg/hr

Asthma Phase 1D (MD ONLY)

Medications

This section is to be utilized by the MD only.(NOTE)*

- ☐ Sodium Chloride 0.9% Bolus
20 mL/kg, Injection, IV, once, STAT, (infuse over 15 min), IF NOT PREVIOUSLY GIVEN
- ☐ D5 1/2 NS KCl 20 mEq/L
1,000 mL, IV, Routine, mL/hr, IF NOT PREVIOUSLY GIVEN
DOSING RANGE FOR MAGNESIUM SULFATE: 25 TO 75 MG/KG, MAX DOSE = 2 GRAMS IF NOT PREVIOUSLY GIVEN(NOTE)*
- ☐ magnesium sulfate
 - ☐ *50 mg/kg, Ped Injectable, IV Piggyback, once, STAT, (infuse over 20 min), Max dose = 2 grams [Less Than 40 kg] (DEF)**
 - ☐ *2,000 mg, Ped Injectable, IV Piggyback, once, STAT, (infuse over 20 min), Max dose = 2 grams [Greater Than or Equal To 40 kg]*
- To Be Ordered by Physician When Needed:(NOTE)*
- ☐ terbutaline
10 mcg/kg, Ped Injectable, IV, once, STAT, Loading Dose
- ☐ terbutaline
10 mcg/kg, Ped Injectable, Subcutaneous, once, STAT, Max dose: 0.3 mg, Loading Dose
- ☐ Terbutaline Drip (Pediatric) (IVS)*





Physician Orders Pediatric: LEB ED Asthma Plan

Diluent volume

30 mL, IV, STAT, Reference Range: 0.1 to 5 mcg/kg/min, Continuous infusion

terbutaline (additive)

30 mg, mcg/kg/min

☐ EPINEPHrine Injection

0.01 mg/kg, Ped Injectable, IM, once, STAT, Max dose = 0.3mg

Discharge Planning Phase

Nursing Communication

Criteria: Patient can be discharged when RS is less than or equal to 4, SpO2 is greater than 92% on room air while awake, clinically hydrated, completion of asthma education, follow up is available, and no medical non-adherence concerns.(NOTE)*

☐ Nursing Communication

Contact Physician for a discharge order when patient meets the above criteria.

Date

Time

Physician's Signature

MD Number

***Report Legend:**

DEF - This order sentence is the default for the selected order

GOAL - This component is a goal

IND - This component is an indicator

INT - This component is an intervention

IVS - This component is an IV Set

NOTE - This component is a note

Rx - This component is a prescription

SUB - This component is a sub phase, see separate sheet

R-Required order

