



Physician Orders ADULT: Anesthesia Low Dose Ketamine for Post Op Pain Plan

Initiate Orders Phase

Care Sets/Protocols/PowerPlans



Initiate Powerplan Phase

Phase: Anesthesia Low Dose Ketamine for Post-Operative Pain Phase, When to Initiate: _____

Anes/Low Dose Ketamine PostOp Pain Phase

Admission/Transfer/Discharge

Contraindications to ketamine use: This medication is contraindicated in patients with the following diagnoses: head trauma, intracranial mass/bleeding, stroke, MI, cerebral aneurysm, or any patient in whom a significant elevation of blood pressure would constitute a serious hazard, schizophrenia or psychosis.(NOTE)*



Transfer Pt within current facility

Level of Care: Critical Care, Telemetry: Telemetry



Transfer Pt within current facility

Level of Care: Stepdown, Telemetry: Telemetry



Transfer Pt within current facility

To Level of Care: PACU, Telemetry: Telemetry

Germantown ONLY, select below for patient transferring to the 4 West unit.(NOTE)*



Transfer Pt within current facility

Level of Care: Med-Surg, To 4 West- Germantown, Telemetry: Telemetry

R

Notify Physician-Once

Notify For: Notify of room number upon arrival to unit

Vital Signs

R

Vital Signs

Monitor and Record Temp, once, Temperature on admission to unit.

R

Vital Signs

Monitor and Record Temp, q4h(std), For 24 hr, Temperature every 4 hours x 24 hours.

R

Vital Signs

Monitor and Record Resp Rate | Blood Pressure, Heart Rate, pain assessment and sedation rating per Riker's scale. Every 30 minutes x 2, T;N+30

R

O2 Sat Monitoring NSG

Prior to ketamine infusion initiation: Baseline

R

Vital Signs

Monitor and Record Resp Rate | Blood Pressure, heart rate, pain assessment and sedation rating per Riker's scale. Prior to ketamine infusion initiation: Baseline.

R

O2 Sat Monitoring NSG

q30min For 2 occurrence, T;N+30

R

Vital Signs

Monitor and Record Resp Rate | Blood Pressure, Heart Rate, pain assessment and sedation rating per Riker's scale. every hour x 2, T;N+120

R

O2 Sat Monitoring NSG





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- q1h(std) For 2 occurrence, every hour x 2, T;N+120*
- R Vital Signs
Monitor and Record Resp Rate | Blood Pressure, Heart Rate, Pain Assessment and sedation rating per Riker's scale, every 4 hours x 24 hours, T;N+240
- R O2 Sat Monitoring NSG
q4h(std) For 24 hr, every 4 hours x 24 hours, T;N+240
- R Vital Signs
Monitor and Record Resp Rate | Blood Pressure, Heart Rate, Pain assessment and sedation rating per Riker's scale, every 4 hours until infusion is discontinued, T+1;N
- R O2 Sat Monitoring NSG
q4h(std), every 4 hours until infusion is discontinued. T+1;N
- R Vital Signs
Monitor and Record Resp Rate | Blood Pressure, Heart Rate, Pain Assessment, and sedation rating per Riker's scale, every hour x 2. With each change in rate, restart monitoring with every 1 hour monitoring. T;N+60
- R O2 Sat Monitoring NSG
q1h(std) For 2 occurrence, every hour x 2. With each change in rate, restart monitoring with every 1 hour monitoring. T;N+60

Patient Care

- R Notify Physician-Continuing
Notify: Anesthesia, Notify For: See Order Comments
Comments: Riker Score less than 3, hallucinations, vivid dreams, aggressive behavior
Sustained hypertension (greater than 20% increase in blood pressure from time of initiation of ketamine x 1 hour) Depressed respiratory status Respiratory rate less than 10 breaths/minute
Oxygen saturation less than 90% Increased secretions
Increased pain level or unrelieved pain Tachycardia (greater than 20% increase in heart rate from time of initiation of ketamine) catatonia
- R Nursing Communication
No narcotics, CNS depressants, or sedatives are to be ordered except by anesthesiology.

Medications

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- R Ketamine infusion (IVS)*
Sodium Chloride 0.9%
500 mL, IV, Routine, SEE ORDER COMMENTS
Comments: Max initial rate of 2.5 mcg/kg/min. MD to start infusion. Dose to be adjusted by MD as often as every 2 hours to a max of 5 mcg/kg/min Ideal Body Weight. Use portless IV tubing for ketamine infusion. Concentration: 1 mg/mL.
- ketamine (additive)
500 mg





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- ☐ LORazepam
0.5 mg, Injection, IV Push, q3h, PRN Other, specify in Comment, Routine
Comments: give for mental changes (delusions, mild delirium)

Consults/Notifications/Referrals

R Physician Group Consult

_____	_____	_____	_____
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

