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
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 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 = 0.3 mg

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