



**Physician Orders PEDIATRIC: LEB Ammonul + Arginine (Patients less than or equal to 20kg) Plan**

**Initiate Orders Phase**

**Care Sets/Protocols/PowerPlans**

- Initiate Powerplan Phase  
*Phase: LEB Ammonul + Arginine Patients <= 20kg Phase, When to Initiate: \_\_\_\_\_*

**LEB Ammonul + Arginine Patients <= 20kg**

**Continuous Infusion**

Choose one of the following Bolus/Loading Doses (NOTE)\*

D10W: Enter volume to be 25 mL/kg. Pharmacy to adjust the total volume to equal 25 mL/kg when the order is verified. (NOTE)\*

- Ammonul-Arginine (NAGS,CPS,OTC) < 20 Kg (IVS)\*  
Dextrose 10% in Water  
*25 mL/kg, IV, Routine, ( infuse over 2 hr )*  
*Comments: Pharmacy will adjust TOTAL volume to equal 25 mL/kg when the order is verified. Infuse via central line only.*

sodium benz-sodium phenylacet (additive)

*2.5 mL/kg*

arginine (additive)

*2 mL/kg*

- Ammonul-Arginine (AS, AL or unknown def.) < 20 Kg (IVS)\*  
Dextrose 10% in Water  
*25 mL/kg, IV, Routine, ( infuse over 2 hr )*  
*Comments: Pharmacy will adjust TOTAL volume to equal 25 mL/kg when the order is verified. Infuse via central line only.*

sodium benz-sodium phenylacet (additive)

*2.5 mL/kg*

arginine (additive)

*6 mL/kg*

Choose one of the following maintenance Doses:(NOTE)\*

D10W: Enter volume to be 25 mL/kg. Pharmacy to adjust the total volume to equal 25 mL/kg when the order is verified.(NOTE)\*

- Ammonul-Arginine (NAGS,CPS,OTC) < 20 Kg (IVS)\*  
Dextrose 10% in Water  
*25 mL/kg, IV, Routine, ( infuse over 24 hr )*  
*Comments: Pharmacy will adjust TOTAL volume to equal 25 mL/kg when the order is verified. Infuse via central line only.*

sodium benz-sodium phenylacet (additive)

*2.5 mL/kg*

arginine (additive)

*2 mL/kg*

- Ammonul-Arginine (AS, AL or unknown def.) < 20 Kg (IVS)\*  
Dextrose 10% in Water





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25 mL/kg, IV, Routine, ( infuse over 24 hr )

Comments: Pharmacy will adjust TOTAL volume to equal 25 mL/kg when the order is verified. Infuse via central line only.

sodium benz-sodium phenylacet (additive)

2.5 mL/kg

arginine (additive)

6 mL/kg

**Medications**

- ondansetron  
0.15 mg/kg, Injection, IV, N/A, Max dose: 4 mg

**Laboratory**

- Ammonia Level  
STAT, T;N, once, Type: Blood, Collection Comment: on ice
- Ammonia Level  
Time Study, T;N, q4h, Type: Blood, Collection Comment: on ice
- Amino Acids Quantitative Blood  
STAT, T;N, once, Type: Blood, Collection Comment: Send Specimen on ICE

Date	Time	Physician's Signature	MD Number
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**\*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

