Physician Orders
Care Set: Hypothermia Post Cardiac Arrest Protocol Critical Care Orders
[X or R] = will be ordered unless marked out.
T= Today; N = Now (date and time ordered)

Height: ___________ cm    Weight: __________ kg

Allergies:
[ ] No known allergies
[ ] Medication allergy(s):
[ ] Latex allergy
[ ] Other:

Inclusion criteria- must meet ALL of the following:

1. Witnessed Primary cardiac arrest V-tach/V-fib with return of spontaneous circulation (ROSC) within 60 minutes of the arrest. Non-shockable pulseless rhythms may be considered if the etiology is presumed cardiac or if pulmonary embolism is suspected.
2. Intubated with mechanical ventilation
3. Treatment initiated within 6 hours of arrest
4. Systolic BP greater than 90mmHg with or without vasopressors
5. GCS less than or equal to 8

Absolute Exclusion Criteria- excluded with ANY ONE of the following:
1. Intracranial hemorrhage
2. DNR
3. Coma due to cause other than cardiac arrest
4. Known bleeding or on going active bleeding
5. Temperature less than 30 degrees Celsius after cardiac arrest
6. Pregnancy

Relative Exclusion Criteria- Based on Physician discretion:

1. Uncontrolled pulseless arrhythmias after initial ROSC
2. Major surgery within 14 days
3. Terminal illness
4. Poor baseline functional status
5. Systemic infection/sepsis

Vital Signs

[R] Vital Signs Monitor and Record Resp Rate, Monitor and Record Blood Pressure, Monitor and Record Pulse, q15 min

[R] Vital Signs Monitor and Record Temp, q 30 min, Comment: Esophageal Temp

[R] CVP Monitoring q1 hour

VTE Medical Prophylaxis Orders

[R] Sedation Goal Per Riker Scale Goal: 2 (Very Sedated), Maintain sedation goal of 2 or less

[R] Induced Hypothermia Inclusion/Exclusion Form T,N

Note: Elevation of head of bed is contraindicated with spinal surgery within 14 days or severe skin breakdown.

[R] Elevate Head of Bed 30 degrees Head of Bed

[R] Central Line Insertion at Bedside Setup STAT

[R] Request Supply to Bedside T,N, STAT, Arterial Line at Bedside Setup

[R] IV Insert/Site Care STAT, q4day, large bore
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| [ ] Indwelling Urinary Catheter Insert - Follow Removal Protocol  
  Reason:  
  [ ] Continuous irrigation/Med instillation immobility  
  [ ] Urethral problems  
  [ ] Acute retention or neurogenic bladder  
  [ ] s/p GYN or genitourinary tract surgery  
  [ ] s/p urologic or colorectal surgery  
  [ ] s/p organ transplant  
  [ ] Vent & paralyzed, condom cath not option  
  [ ] Chronic indwelling or suprapubic cath  
  [ ] Sacral wound (Stage III or IV) w/incont  
  [ ] Post-op surgery less than 24 hours ago  
  [ ] 24hr urine collection and incontinence  
  [ ] Hospice or terminal care  
  T;N, Foley catheter with temp probe  
  [ ] Spinal/pelvic issue requires |
| [ ] Nasogastric Tube  
  T;N, Suction Strength: Low Intermittent  
  [ ] Oral Gastric Tube Insert  
  T;N, Special Instructions: Low Intermittent  
  [ ] Cold Apply  
  T;N, Apply to: axillae, sides of neck and groin with washcloth between ice packs and skin. Apply until cooling blankets started. |

### Nursing Communication

[R] Nursing Communication  
T;N, Hypothermia Post Cardiac Arrest Protocol Critical Care: Monitor and document skin q2 hours

[R] Nursing Communication  
T;N, Hypothermia Post Cardiac Arrest Protocol Critical Care: Measure cooling water temp q 30 min

[R] Nursing Communication  
T;N, Hypothermia Post Cardiac Arrest Protocol Critical Care: Sedation and Analgesia orders must be initiated prior to application of cooling wraps and/or administration of neuromuscular blockade agents

[R] Nursing Communication  
T;N, Hypothermia Post Cardiac Arrest Protocol Critical Care: Upon reaching goal temperature, place order for ISTAT Blood Gases to start in 6 hours and continue q 6h for 5 occurrences

[R] Nursing Communication  
T;N, Hypothermia Post Cardiac Arrest Protocol Critical Care: Upon reaching goal temperature, place order for Glucose Level and Troponin-I, Time Study to start in 6 hours and continue q6h for 5 occurrences

[R] Nursing Communication  
Hypothermia Post Cardiac Arrest Protocol Critical Care: Upon reaching goal temperature, place order for Potassium Level, Time Study, to start in 6 hours and continue q9h for 3 occurrences

[R] Nursing Communication  
Hypothermia Post Cardiac Arrest Protocol Critical Care: Upon reaching goal temperature, place order for CBC, BMP, PT/INR, and PTT to start in 24 hours and continue q6h for 2 occurrences

[R] Nursing Communication  
T;N, Hypothermia Post Cardiac Arrest Protocol Critical Care: Decrease room temperature to 60 degrees Fahrenheit.
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### Respiratory Care

| Respiratory Gencode (RT Communication) | T;N, Do not use heated ventilator circuit until rewarming process initiated |

| ISTAT Blood Gases (ABG-RT Collect) | T;N, STAT, once |

### Bolus Medications

| Sodium Chloride 0.9% Bolus | 1000mL, IV Piggyback, q30min, STAT, T;N, (for 2 dose),1000mL/hr Comment: Refrigerated Normal Saline infuse via peripheral or femoral line. |
| Sodium Chloride 0.9% Bolus | 500mL, IV Piggyback, N/A, PRN Other Specify in Comment, Routine, T;N, 1000mL/hr, Comment: for CVP less than 8 or PAOP less than 12. Notify MD if goal not achieved after second bolus. |

### Continuous Infusion

| Sodium Chloride 0.9% | 1000mL,IV,Routine,T;N, 75 mL/hr |

**To maintain MAP greater than 65, choose order below:**

| norepinephrine (norepinephrine 16 mg/250 mL- NaCl 0.9% injectable solution) | 16 mg / 250 mL, IV, Routine,T;N, titrate, Comment: begin at 2 mcg/min, titrate in increments of 2 mcg/min as often as every 5 min.to maintain a mean arterial pressure (MAP) greater than 65 mmHg. Max dose = 90 mcg/min |

### Medications

| Hypothermia Shivering Protocol Orders (see separate sheet) |
| Hypothermia Insulin Protocol Orders (see separate sheet) |
| ocular lubricant (Lacri-Lube S.O.P) | 1 application, Ophthalmic Oint, Both Eyes, q2h, Routine,T;N,Comment: apply to eyes while receiving paralytics |

### Stress Ulcer Prophylaxis Medications

| pantoprazole | 40mg, injection, IV Push, qDay, Routine,T;N |
| famotidine | 20mg, injection, IV Push, bid, Routine, T;N |

**If CrCl less than 50mL/min, place order below:**

| famotidine | 20mg, injection, IV Push, qDay, Routine, T;N |

### Sedation Medications

**Must order one of the following sedation medications below:**

| LORazepam | 2 mg, Injection, IV Push, q 30 minutes, PRN Other Specify in Comment, Routine,T;N, Comment: PRN to maintain SAS goal (Maximum of 12 mg in a 3 hr period). May give 1-2 mg, start with 1 mg. |
| midazolam (midazolam 1mg/mL/NS 50mL PreMix) | 50mg/50mL, IV, Routine, titrate, Comment: Initial Rate: 1mg/hr; Titration Parameters: 0.5 mg/hr as often as every 30 min to SAS goal per MD orders; Max Rate: 7 mg/hr; Conc: 1 mg/mL |

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CC Hypothermia Post Cardiac Arrest Protocol Critical Care Orders-20709-QM0612-Rev032018
Physician Orders

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**Sedation Medications continued**

- **propofol**: 1,000mg/100mL, IV, Routine, Comment: 10mcg/kg/min, maintain a rate of 10mcg/kg/min throughout induced hypothermia. DO NOT BOLUS. Discontinue and follow new orders if propofol initiated per Hypothermia Shivering Protocol.

**Analgesia Medications**

- **morPHINE**: 2 mg, Injection, IV Push, q1hr, PRN Other Specify in Comment, Routine, T;N, Comment: to maintain SAS goal
- **HYDROmorphone**: 0.5 mg, Injection, IV Push, q1hr, PRN Other Specify in Comment, Routine, T;N, Comment: to maintain SAS goal

**Laboratory**

If not previously done in ED place orders below:

- **CBC**: STAT, T;N, once, blood, Nurse Collect
- **CMP**: STAT, T;N, once, blood, Nurse Collect
- **Magnesium Level**: STAT, T;N, once, blood, Nurse Collect
- **Troponin-I**: STAT, T;N, once, blood, Nurse Collect
- **PT/INR**: STAT, T;N, once, blood, Nurse Collect
- **PTT**: STAT, T;N, once, blood, Nurse Collect
- **Phosphorus Level**: STAT, T;N, once, blood, Nurse Collect
- **CK Isoenzymes**: STAT, T;N, once, blood, Nurse Collect
- **Lactate Level**: STAT, T;N, once, blood, Nurse Collect

**Diagnostics**

If not previously done in ED place orders below:

- **CT Brain/Head WO Cont**: T;N, STAT, Reason for Exam: Other- cardiac arrest of unknown origin, stretcher
- **Chest 1VW Frontal**: T;N, STAT, Reason for Exam: Other- s/p Intubation, Portable
- **Electrocardiogram (EKG)**: Start at T;N, STAT, Reason for Exam: Other- Post cardiac arrest
- **Physician Group Consult**: T;N, Group: UT Neuro ICU, Reason for Consult: Hypothermia Protocol
- **Physician Group Consult**: T;N, Reason for Consult: Hypothermia Protocol admission to ICU, Who: UT Pulmonary,

Date | Time | Physician’s Signature | MD Number
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