



Physician Orders ADULT: LEB DTU Elaprase Infusion Plan

Initiate Orders Phase

Care Sets/Protocols/PowerPlans

- Initiate Powerplan Phase
Phase: LEB DTU Elaprase Infusion Phase, When to Initiate: When patient arrives to unit

LEB Elaprase Infusion Phase

Admission/Transfer/Discharge

- Patient Status Initial Outpatient
T;N Attending Physician:
Reason for Visit:
Bed Type: Specific Unit: DTU
Outpatient Status/Service: [ ] Ambulatory Surgery, [ ] OP Diagnostic Procedure [ ] OP OBSERVATION Services

Vital Signs

- Vital Signs Obtain baseline vital signs.
Vital Signs Routine Monitor and Record T,P,R,BP, q15min for first hour of infusion with each rate change until max running rate of 30mL/hr is reached, q1hr during infusion until infusion complete, and 30 min post infusion. (DEF)\*
Routine Monitor and Record T,P,R,BP, q15min for first hour of infusion with each rate change until max running rate of 40mL/hr is reached, q1hr during infusion until infusion complete, and 30 min post infusion

Activity

- Activity As Tolerated Up Ad Lib

Food/Nutrition

- Regular Pediatric Diet

Patient Care

- Height Routine, upon arrival to unit
Weight upon arrival to unit
INT Insert/Site Care LEB
PortACath Access Access and heparin lock port per hospital protocol (Heparin units/mL).
PortACath Deaccessing When patient is stable, de-access port, VS and discharge patient to family.
Discharge Instructions





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Followup Appointments: with \_\_\_\_\_ in \_\_\_\_\_ weeks.

Nursing Communication

- Checkboxes for Nursing Communication with instructions: 'Call pharmacy to mix medication, ONLY after port is accessed and determined patent.' and 'Discharge home after completion of therapy.'

Respiratory Care

EMERGENCY SET-UP: (NOTE)\*

- Checkboxes for O2-BNC and Suction Set Up with 'Special Instructions: Emergency Set-Up:'

Continuous Infusion

- Checkboxes for Sodium Chloride 0.9% (500 mL, IV, Routine, 30 mL/hr and 50 mL/hr) and Elaprase Infusion Pediatric (IVS)\* (100 mL, IV Piggyback, Routine) with detailed comments on infusion rates and vital signs.

idursulfase 0.5 mg/kg

Medications

- Medication order: R +1 Hours acetaminophen with checkboxes for 325 mg, 500 mg, 650 mg, 10 mg/kg, and 15 mg/kg, each with 'Comments: Give 30 minutes before infusion as premedication'





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*Comments: Give 30 minutes before infusion as premedication*

- R **+1 Hours** diphenhydrAMINE
  - 25 mg, Cap, PO, once, Routine, Administer at least 30 minutes prior to infusion of Elaprase (DEF)\*
  - 50 mg, Cap, PO, once, Routine, Administer at least 30 minutes prior to infusion of Elaprase
  - 1 mg/kg, Elixir, PO, once, Routine, Administer at least 30 minutes prior to infusion of Elaprase
- +1 Hours** Heparin 100 units/mL Flush (peds)
  - 5 mL, Injection, IV Push, prn, PRN Cath Clearance, Routine
  - Comments: For implanted port after med and blood administration and after blood withdrawal, then observe patient for 30 minutes*
- +1 Hours** diphenhydrAMINE
  - 1 mg/kg, Injection, IV, once
  - Comments: To be diluted with 10cc of normal saline, give max dose of 50 mg over 10-15 minutes, Special Instructions: Part of Emergency Anaphylactic Set-up*
- +1 Hours** methylPREDNISolone sodium succinate
  - 1 mg/kg, Injection, IV, once
  - Comments: Dilute with 10cc of normal saline give max dose of 80 mg over 3-15 minutes, Special Instructions: Part of Emergency Anaphylactic Set-up*
- +1 Hours** EPINEPHrine 0.1 mg/mL injectable solution
  - 0.15 mg, Ped Injectable, IM, prn, PRN, Routine, Max dose= 0.3mg (DEF)\*
  - Comments: For patients less than 30 kg. Can repeat every 5 minutes as needed Special Instructions: To remain at Bedside. Part of Emergency Anaphylactic Setup*
  - 0.3 mg, Ped Injectable, IM, prn, PRN, Routine, Max dose= 0.3mg
  - Comments: For patients greater than or equal to 30 kg. Special Instructions: To remain at Bedside. Part of Emergency Anaphylactic Setup*

**Consults/Notifications/Referrals**

- Notify Physician-Once
  - Notify: MD, Notify For: In case of infusion related reaction., Stop Elaprase, start 0.9%NS assess patient condition and notify MD immediately.*

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



*Attach patient label here*



**Physician Orders ADULT: LEB DTU Elaprase Infusion Plan**

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

