LEB HYDROmorphine PCA

**Vital Signs**

- Monitor and Record T,P,R,BP, q 30 minutes x 2; q 2 hrs x 8; then q 4 hours.

**Patient Care**

- **Nursing Communication**
  - Oxygen saturation and pain assessment score: q 30 minutes x 2; q 2 hrs x 8; then q 4 hours.
  - **If analgesia inadequate after one hour, call _________ on pager _________**
  - **If RR<12 breaths per minute, or oxygen saturation <92%, or patient is unresponsive:**
    - Discontinue PCA-Administer Naloxone
    - Apply supplemental oxygen
    - Page house officer STAT

- **O2 Sat Continuous Monitoring NSG**

**Continuous Infusion**

- **+1 Hours** D5 1/2NS
  - 250 mL, IV, For Medication Administration

**Medications**

For Use in Patients Greater than or equal to 45 kg only(NOTE)*

- Hydrodromorphine is a second-line medication for use in patients who are either allergic to morphine or have previously experienced inadequate response to morphine.(NOTE)*

- **+1 Hours** HYDROMorphine PCA 1 mg/mL inj
  - **PCA Dose: 0.2 mg, Lock-out: 15 min, 4hr Limit: 3 mg, Continuous Rate: None, PCA, PCA, Routine, (for 3 day )**

- **+1 Hours** HYDROMorphine PCA 1 mg/mL inj
  - **PCA Dose: 0.2 mg, Lock-out: 15 min, Continuous Rate: 0.2 mg/hr, PCA, PCA, Routine, (for 3 day )**

- **+1 Hours** naloxone
  - 0.02 mg/kg, Ped Injectable, IV Push, q2min, PRN Respiratory Depression, Routine
  - **Comments:** Give IV over 2 minutes. May repeat every 1-2 minutes until patient is responsive. **MAX dose = 0.4 mg**

- **+1 Hours** ondansetron
  - 0.15 mg/kg, Ped Injectable, IV Push, q8h, PRN Nausea/Vomiting, Routine, max dose = 8mg
  - **Comments:** May repeat every 1-2 minutes until the patient is responsive. **Max dose = 4 mg**

- **+1 Hours** diphenhydRAMINE
  - 0.5 mg/kg, Ped Injectable, IV Push, q4h, PRN Itching, Routine, Max dose = 50 mg
  - **Comments:** May give PO instead.

- **+1 Hours** diphenhydRAMINE
  - 0.5 mg/kg, PO, q4h, PRN Itching, Routine, Max dose = 50 mg
  - **Comments:** May give IV push instead.

- **+1 Hours** polyethylene glycol 3350
  - 17 g, Powder, PO, q24h, PRN Constipation, Routine
  - **Comments:** If not bowel movement AND patient is tolerating any diet.

**Consults/Notifications/Referrals**

- **Pharmacist Consult**
  - **Reason:** Discontinue narcotics., **Special Instructions:** Discontinue other narcotic orders when PCA starts.

- **Notify Physician-Continuing**
  - **Notify:** House Officer, **Notify For:** RR<12 breaths per minute; HR>130 BPM or <60 BPM; SBP <80mmHg; oxygen saturation < 92% or complaints of urinary retention while on PCA.
Physician Orders PEDIATRIC: LEB HYDROmorphone PCA Plan

*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