



Physician Orders ADULT: Adult Refractory Status Epilepticus Plan

Initiate Orders Phase

Care Sets/Protocols/PowerPlans

- Initiate Powerplan Phase
Phase: Emergency Control Phase, When to Initiate:
Initiate Powerplan Phase
Phase: Urgent Control Phase, When to Initiate:
Initiate Powerplan Phase
Phase: Continuous Infusions (MD Only) Phase, When to Initiate:

Emergency Control Phase

Admission/Transfer/Discharge

- Transfer Pt within current facility
To Neuro, Telemetry: Telemetry

Vital Signs

- Vital Signs
Monitor and Record T,P,R,BP, q30min, For 1 hr, Following resolution of status, then every 1 hour.

Patient Care

- Neurochecks
Routine, q30min For 1 hr, Following resolution of status, then every 1 hour.

Respiratory Care

- ABG- RT Collect

Medications

Please select one or more of the following BOLUS options.(NOTE)\*

- levETIRAcetam
3,000 mg, IV Piggyback, IV Piggyback, once, STAT
Comments: Infuse over 10 minutes.
fosphenytoin
20 mg/kg, IV Piggyback, IV Piggyback, once, STAT
Comments: Round dose to the nearest 250mg. Do not infuse faster than 150mg/min.
lacosamide
400 mg, Injection, IV Push, once, STAT
Comments: Do not infuse faster than 80mg/min.
valproic acid
40 mg/kg, IV Piggyback, IV Piggyback, once, STAT
Comments: Round to the nearest 250mg. Infuse over 10 minutes.
PHENobarbital
20 mg/kg, IV Piggyback, IV Piggyback, once, STAT
Comments: Round to the nearest vial size. Do not infuse faster than 50mg/min.

Please select one or more of the following MAINTENANCE options.(NOTE)\*

- +12 Hours levETIRAcetam
1,000 mg, IV Piggyback, IV Piggyback, q12h, Routine
Comments: Infuse over 10 minutes.





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- +8 Hours** fosphenytoin  
100 mg, Injection, IV Push, q8h, Routine  
Comments: Do not infuse faster than 150 mg/min.
- +12 Hours** lacosamide  
200 mg, Injection, IV Push, q12h, Routine  
Comments: Do not infuse faster than 80mg/min.
- +8 Hours** valproic acid  
5 mg/kg, IV Piggyback, IV Piggyback, q8h, Routine  
Comments: Round to the nearest 250mg. Infuse over 10 minutes.
- +12 Hours** PHENobarbital  
92.4 mg, Tab, NG, q12h, Routine
- +1 Hours** topiramate  
200 mg, Tab, NG, q12h, Routine

**Diagnostic Tests**

- EKG  
Priority: Stat
- CT Brain/Head W/WO Cont Plan(SUB)\*
- Chest 1 VW  
Stat
- Transthoracic Echo Adult  
Priority: Routine
- MRI Brain & Stem W/WO Cont Plan(SUB)\*
- MRI Brain & Stem WO Cont  
Stat
- EEG  
Reason: Seizures, Stat

**Consults/Notifications/Referrals**

- Notify Physician-Once

**Urgent Control Phase**

**Medications**

Please select one or more of the following BOLUS options.(NOTE)\*

- levETIRAcetam  
3,000 mg, IV Piggyback, IV Piggyback, once, STAT  
Comments: Infuse over 10 minutes.
- fosphenytoin  
20 mg/kg, IV Piggyback, IV Piggyback, once, STAT  
Comments: Round dose to the nearest 250mg. Do not infuse faster than 150mg/min.
- lacosamide  
400 mg, Injection, IV Push, once, STAT, ( infuse over 5 min )  
Comments: Do not infuse faster than 80mg/min.





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- valproic acid  
40 mg/kg, IV Piggyback, IV Piggyback, once, STAT  
Comments: Round to the nearest 250mg. Infuse over 10 minutes.
- PHENobarbital  
20 mg/kg, IV Piggyback, IV Piggyback, once, STAT  
Comments: Round to the nearest vial size. Do not infuse faster than 50mg/min.  
Please select one or more of the following MAINTENANCE options.(NOTE)\*
- +12 Hours** levETIRAcetam  
1,000 mg, IV Piggyback, IV Piggyback, q12h, Routine  
Comments: Infuse over 10 minutes.
- +8 Hours** fosphenytoin  
100 mg, Injection, IV Push, q8h, Routine  
Comments: Do not infuse faster than 150 mg/min.
- +12 Hours** lacosamide  
200 mg, Injection, IV Push, q12h, Routine  
Comments: Do not infuse faster than 80 mg/min.
- +8 Hours** valproic acid  
5 mg/kg, IV Piggyback, IV Piggyback, q8h, Routine  
Comments: Round to the nearest 250mg. Infuse over 10 minutes.
- +12 Hours** PHENobarbital  
92.4 mg, Tab, NG, q12h, Routine
- +1 Hours** topiramate  
200 mg, Tab, NG, q12h, Routine

**Continuous Infusions (MD Only) Phase**

**Continuous Infusion**

- midazolam  
0.2 mg/kg, Inj, IV Push, q5min, PRN Seizure Activity, Routine  
Comments: Round to the nearest 2 mg.
- midazolam 1mg/mL/NS 50 mL PreMix  
50 mg / 50 mL, IV, Routine, See Order Comments  
Comments: Final Concentration: 1 mg/mL; 0.2 mg/kg loading dose MUST be given prior to initiation of infusion; Initiate infusion at 0.1 mg/kg/hr; Patients experiencing breakthrough seizures may receive an additional 0.2 mg/kg bolus and the continuous infusion rate should be increased by 0.1 mg/kg/hr every 3 hours as ordered by MD if seizures persist; Maximum rate = 2 mg/kg/hr Titrated by MD order to clinical seizure suppression or burst suppression on continuous EEG
- propofol infusion  
1,000 mg / 100 mL, IV, Routine, See Order Comments  
Comments: Final Concentration 10 mg/mL; Initiate infusion at 20 mcg/kg/min; Continuous infusion rate should be increased by 10 mcg/kg/min every 5 minutes as ordered by MD if seizures persist. Maximum rate 200 mcg/kg/min; Titrated by MD order to burst suppression on continuous EEG





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- Ketamine infusion (IVS)\*  
 Sodium Chloride 0.9%  
 500 mL, IVC, Routine, See Order Comments  
*Comments: Final Concentration: 1mg/mL; Initiate infusion at 10 mcg/kg/min; increase by 10 mcg/kg/min as frequently as every 1 hour as ordered by MD if seizures persist; maximum dose 60 mcg/kg/min*  
 ketamine (additive)  
 500 mg
- PENTobarbital  
 10 mg/kg, IV Piggyback, IV Piggyback, once, STAT  
*Comments: Infuse over 1 hour.*
- pentobarbital infusion (IVS)\*  
 NS  
 250 mL, IV, Routine, See Order Comments  
*Comments: Final Concentration: 8 mg/mL; 10 mg/kg loading dose MUST be given prior to initiation of infusion; Initiate infusion at 1 mg/kg/hr; Continuous infusion rate should be increased by 1 mg/kg/hr every 12 hours as ordered by MD if seizures persist; Titrated by MD order to burst suppression on continuous EEG; Maximum rate 5 mg/kg/hr.*  
 PENTobarbital (additive)  
 2,000 mg
- norepinephrine 16 mg/250 mL- NaCl 0.9% injectable solution  
 16 mg / 250 mL, IV, Routine, See Order Comments  
*Comments: Initial Rate: 2 mcg/min; Titration Parameters: 2 mcg/min every 2 min to MAP of 65 mmHg or SBP of 90 mmHg; Max Rate: 200 mcg/min; Conc: 64 mcg/mL*

**Laboratory**

- Triglyceride  
 Routine, T;N, q72h, Type: Blood

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

