Physician Orders PEDIATRIC: LEB DTU Pamidronate Infusion Day 2 of 2 Plan

Initiate Orders Phase
Care Sets/Protocols/PowerPlans
- Initiate Powerplan Phase
  Phase: LEB DTU Pamidronate Infusion Day 2 Phase, When to Initiate:________________

LEB DTU Pamidronate Infusion Day 2 Phase
Admission/Transfer/Discharge
- Patient Status Initial Outpatient
  T;N, Reason for Visit: Treatment of Metabolic Bone disease.
- Discharge Instructions
  Other Instructions: Instruct patient to take calcium supplement as ordered: 45 to 65 mg/kg/day divided into 4 doses for for 2 weeks following the last infusion on Day 2.
  Comments: Max dose is 500mg elemental Calcium (1250 mg calcium salt)

Vital Signs
- Vital Signs
  Monitor and Record Pulse | Resp Rate, Monitor heart rate and resp rate: Baseline at (0min) and q15min for first hour and then q1h until infusion is completed. No routine blood pressure measurements due to risk of fracture unless otherwise notified.
- Vital Signs
  Monitor and Record Temp, Baseline (at 0 min) and when infusion is complete (60 min). No routine blood pressure measurements due to risk of fracture unless otherwise notified

Patient Care
- INT Insert/Site Care LEB
  Routine
  Weight
  Height
- INT Discontinue
  Discontinue after infusion is complete.

Nursing Communication
- Nursing Communication
  IV Site check q15 mins for the first hour and then q1h until the infusion is complete.
- Nursing Communication
  Observe patient for Potential Side effects: Hypocalcemia, fever, itching, and anaphylaxis.
- Nursing Communication
  Discharge home 1 hour after infusion is complete, MD has reviewed post-infusion calcium level, patient feels well, no adverse reaction and vital signs are stable.

Medications
- +1 Hours pamidronate
  0.5 mg/kg, Injection, IV, OnCall, Routine, (for 1 dose), (infuse over 4 hr), Max dose: 60mg/day [Less Than 2 year]
  Comments: Repeat infusion every 2 months. Concentration of the solution should NOT exceed 0.1 mg/ml of Pamidronate.
- +1 Hours pamidronate
  0.75 mg/kg, Injection, IV, OnCall, Routine, (for 1 dose), (infuse over 4 hr), Max dose: 60mg/day [2 - 3 year]
  Comments: Repeat Infusion every 3 months. Concentration of the solution should NOT exceed 0.1 mg/ml of Pamidronate.
- +1 Hours pamidronate
  1 mg/kg, Injection, IV, OnCall, Routine, (for 1 dose), (infuse over 4 hr), Max dose: 60mg/day [Greater Than or Equal to 3 year]
  Comments: Repeat infusion every 4 months. Concentration of the solution should NOT exceed 0.1 mg/ml of Pamidronate.

Laboratory
- Calcium Level
  STAT, T;N, once, Type: Blood, Nurse Collect
  Comments: To be collected at baseline (0 min) prior to infusion
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☐ Calcium Level
   STAT, T:N+1, once, Type: Blood, Nurse Collect
   Comments: Collect at the end of the infusion (at 240 min) and notify MD at 901-418-8531 or 901-418-0329 of calcium level results

Consults/Notifications/Referrals
☒ Notify Physician For Vital Signs Of
   Celsius Temp > 38.3, Heart Rate > 120/min, Resp Rate > 35/min, and other acute changes in patient status.

Date          Time          ___________________________          MD Number

*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