Physician Orders ADULT: PCA - HYDROmorphine Protocol Plan (Adult)

Vital Signs
R Vital Signs
Routine Monitor and Record Pulse | Resp Rate | Blood Pressure, Quality of Respirations, Oxygen Saturation; q30min x2, q1h x1, then q4h until PCA is Discontinued per hospital policy., T;N

Patient Care
R Instruct/Educate
Instruct: patient and family, Method: Demonstrate, Topic: Proper administration and use of PCA

Pain Score
HYDROmorphine PCA Protocol Plan(Adult): q30min x2; q1h x1; then q4h per hospital policy. T;N

Nursing Communication
R Nursing Communication
HYDROmorphine PCA Protocol Plan(Adult): If no IV Fluids are ordered, enter an order for NS to infuse at TKO rate while on PCA therapy.

R Nursing Communication
HYDROmorphine PCA Protocol Plan(Adult): Place pulse oximeter on patient for oxygen saturation monitoring and documentation

R Nursing Communication
HYDROmorphine PCA Protocol Plan(Adult): PCA Titration Band, document once per shift via Iview>>Blood Admin and Titrations>>IV drips>> locate section for PCA. Document all components; DO NOT clear the PCA until after you have documented this information.

Medications
Changes to the protocol are not permitted. If you deviate from the protocol you must specify all parameters of PCA Orders (concentration, loading dose, bolus dose, lockout, basal rate and 1 hour limit).(NOTE)*

Use standard concentration PCA medications for opioid naive patients and patients with normal dosage requirements.(NOTE)*

For patients with severe pain who have very high PCA requirements (greater than or equal to HYDROmorphine 50 mg IV per shift, order the Maximally Concentrated PCA Orders for Adults.(NOTE)*

To order "per protocol" select one of the orders below and leave it UNCHANGED. The FIRST order is without a basal rate. The SECOND order includes a standard basal rate.(NOTE)*

Select one of the following orders below:(NOTE)*

+1 Hours HYDROmorphine PCA - 1 mg/mL

PCA Dose: 0.2 mg, Lock-out: 10 min, 1hr Limit: 1.2 mg, Basal Rate: No Basal Rate, PCA, PCA

+1 Hours HYDROmorphine PCA - 1 mg/mL

PCA Dose: 0.2 mg, Lock-out: 10 min, 1hr Limit: 1.4 mg, Basal Rate: 0.2 mg/hr, PCA, PCA

Note: All active opioid orders will be discontinued by the reviewing pharmacist upon receiving an order for PCA. Orders for breakthrough pain should be ordered with PCA.(NOTE)*

- naloxone
  0.4 mg, Injection, IV Push, q5min, PRN Respiratory Depression, Routine
  Comments: Respiratory Rate less than 12.

- ondansetron
  4 mg, Orally Disintegrating Tab, PO, q6h, PRN Nausea/Vomiting, Routine

- ondansetron
  4 mg, Injection, IV Push, q6h, PRN Nausea/Vomiting, Routine
  Comments: May have IV if unable to tolerate PO

- diphenhydrAMINE
  25 mg, Cap, PO, q4h, PRN Itching, Routine

- diphenhydrAMINE
  12.5 mg, Injection, IV Push, q4h, PRN Itching, Routine
  Comments: May have IV if unable to tolerate PO.

- docusate
  100 mg, Cap, PO, bid, Routine

- senna
  8.6 mg, Tab, PO, bid, PRN Constipation, Routine
Physician Orders ADULT: PCA - HYDROMorphone Protocol Plan (Adult)

Comments: Once tolerating diet or PO meds.

- bisacodyl
  10 mg, Tab, PO, QDay, PRN Constipation

- polyethylene glycol 3350
  17 g, Powder, PO, q24h, PRN Constipation, Routine

Date          Time          Physician’s Signature          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