

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

PCA - HYDROmorphone 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 in Score

R Pain Score

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

Nursing Communication

R Nursing Communication

HYDROmorphone 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

HYDROmorphone PCA Protocol Plan(Adult): Place pulse oximeter on patient for oxygen saturation monitoring and documentation

R Nursing Communication

HYDROmorphone PCA Protocol Plan(Adult): PCA Titration Band, document once per shift via lview>>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 HYDROmorphone 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 HYDROmorphone 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 HYDROmorphone 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 than12.

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





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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

