

UMC Health System CONCENTRATED INFUSIONS MED PLAN	Patient Label Here
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PHYSICIAN ORDERS

Diagnosis _____

Weight _____ **Allergies** _____

Place an "X" in the Orders column to designate orders of choice AND an "x" in the specific order detail box(es) where applicable.

ORDER ORDER DETAILS

IV Solutions

	<p>It is RECOMMENDED that ALL concentrated infusions be administered via a central line</p> <p>The following are two (2) times the normal concentration:</p> <p>DOBUTamine 500 mg/250 mL D5W - Titratabl (DOBUTamine 500 mg/250 mL D5W - Titratable)</p> <p><input type="checkbox"/> IV, Max dose: 20 mcg/kg/min TWO TIMES standard concentration Final concentration = 2 mg/mL (2,000 mcg/mL)</p> <p><input type="checkbox"/> Start at rate: _____ mcg/kg/min</p>
	<p>DOBUTamine 500 mg/250 mL D5W - Fixed Rat (DOBUTamine 500 mg/250 mL D5W - Fixed Rate)</p> <p><input type="checkbox"/> IV TWO TIMES standard concentration Final concentration = 2 mg/mL (2,000 mcg/mL) Provider order is required for ALL rate changes</p> <p><input type="checkbox"/> Start at rate: _____ mcg/kg/min</p>
	<p>isoproterenol 2 mg/250 mL D5W - Titratab (isoproterenol 2 mg/250 mL D5W - Titratable)</p> <p><input type="checkbox"/> IV, Max dose: 20 mcg/min TWO TIMES standard concentration. Final concentration = 0.008 mg/mL (8 mcg/mL).</p> <p><input type="checkbox"/> Start at rate: _____ mcg/min</p>
	<p>isoproterenol 2 mg/250 mL D5W - Fixed Ra (isoproterenol 2 mg/250 mL D5W - Fixed Rate)</p> <p><input type="checkbox"/> IV TWO TIMES standard concentration Final Concentration = 0.008 mg/mL (8 mcg/mL) Provider order is required for ALL rate changes</p> <p><input type="checkbox"/> Start at rate: _____ mcg/min</p>
	<p>niCARDipine 50 mg/250 mL - Titratable</p> <p><input type="checkbox"/> IV, Maximum titration: 2.5 Titration units: mg/hr every 5 minutes, Max dose: 15 mg/hr</p> <p><input type="checkbox"/> Start at rate: _____ mg/hr</p>
	<p>niCARDipine 50 mg/250 mL NS - Fixed Rate</p> <p><input type="checkbox"/> IV TWO TIMES standard concentration Final Concentration = 0.2 mg/mL (200 mcg/mL) Provider order is required for ALL rate changes</p> <p>Continued on next page....</p>

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Order Taken by Signature: _____ Date _____ Time _____

Physician Signature: _____ Date _____ Time _____



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PHYSICIAN ORDERS

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ORDER	ORDER DETAILS
	<input type="checkbox"/> Start at rate: _____ mg/hr
	procainamide 2000 mg/250 mL D5W - Fixed (procainamide 2000 mg/250 mL D5W - Fixed Rate) <input type="checkbox"/> Start at rate: _____ mg/min <input type="checkbox"/> IV
	DOPamine 800 mg/250 mL D5W - Titratable <input type="checkbox"/> IV, Max dose: 50 mcg/kg/min TWO TIMES standard concentration Final concentration = 3.2 mg/mL (3,200 mcg/mL) <input type="checkbox"/> Start at rate: _____ mcg/kg/min
	DOPamine 800 mg/250 mL D5W - Fixed Rate <input type="checkbox"/> IV TWO TIMES standard concentration Final concentration = 3.2 mg/mL (3,200 mcg/mL) Provider order is required for ALL rate changes <input type="checkbox"/> Start at rate: _____ mcg/kg/min
	<p>The following are four (4) times the normal concentration:</p> DOBUTamine 1,000 mg/250 mL D5W - Titrata (DOBUTamine 1,000 mg/250 mL D5W - Titratable) <input type="checkbox"/> IV, Max dose: 20 mcg/kg/min FOUR TIMES standard concentration Final Concentration = 4 mg/mL (4,000 mcg/mL) <input type="checkbox"/> Start at rate: _____ mcg/kg/min
	DOBUTamine 1,000 mg/250 mL D5W - Fixed R (DOBUTamine 1,000 mg/250 mL D5W - Fixed Rate) <input type="checkbox"/> IV FOUR TIMES standard concentration Final Concentration = 4 mg/mL (4,000 mcg/mL) Provider order is required for ALL rate changes <input type="checkbox"/> Start at rate: _____ mcg/kg/min
	norepinephrine 16 mg/250 mL NS - Titrata (norepinephrine 16 mg/250 mL NS - Titratable) <input type="checkbox"/> IV, Max dose: 60 mcg/min FOUR TIMES standard concentration Final concentration = 0.064 mg/mL (64 mcg/mL) <input type="checkbox"/> Start at rate: _____ mcg/min
	norepinephrine 16 mg/250 mL NS - Fixed R (norepinephrine 16 mg/250 mL NS - Fixed Rate) <input type="checkbox"/> IV FOUR TIMES standard concentration Final concentration = 0.064 mg/mL (64 mcg/mL) Provider order is required for ALL rate changes Continued on next page....

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PHYSICIAN ORDERS

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ORDER	ORDER DETAILS
	<input type="checkbox"/> Start at rate: _____ mcg/min
	nitroPRUSSIDE 200 mg/250 mL D5W - Titrat (nitroPRUSSIDE 200 mg/250 mL D5W - Titratable) <input type="checkbox"/> IV, Max dose: 10 mcg/kg/min FOUR TIMES standard concentration Final concentration = 0.8 mg/mL (800 mcg/mL) <input type="checkbox"/> Start at rate: _____ mcg/kg/min
	nitroPRUSSIDE 200 mg/250 mL D5W - Fixed (nitroPRUSSIDE 200 mg/250 mL D5W - Fixed Rate) <input type="checkbox"/> IV FOUR TIMES standard concentration Final concentration = 0.8 mg/mL (800 mcg/mL) Provider order is required for ALL rate changes <input type="checkbox"/> Start at rate: _____ mcg/kg/min
	<p>The following are six (6) times the normal concentration:</p> phenylephrine 60 mg/250 mL NS - Titratab (phenylephrine 60 mg/250 mL NS - Titratable) <input type="checkbox"/> IV, Max dose: 180 mcg/min SIX TIMES standard concentration Final concentration = 0.24 mg/mL (240 mcg/mL) <input type="checkbox"/> Start at rate: _____ mcg/min
	phenylephrine 60 mg/250 mL NS - Fixed Ra (phenylephrine 60 mg/250 mL NS - Fixed Rate) <input type="checkbox"/> IV SIX TIMES standard concentration Final concentration = 0.24 mg/mL (240 mcg/mL) Provider order is required for ALL rate changes <input type="checkbox"/> Start at rate: _____ mcg/min
	<p>The following infusions are double size (same concentration as the standard infusions) and can be used if the standard size infusion is not adequate:</p> lidocaine 2000 mg/500 mL D5W - Fixed Rat (lidocaine 2000 mg/500 mL D5W - Fixed Rate) <input type="checkbox"/> Start at rate: _____ mg/min <input type="checkbox"/> IV
	LORazepam 80 mg/500 mL D5W - Titratable <input type="checkbox"/> IV, Max titration: 1 mg/hr 10 mins, Max dose: 8 mg/hr Final concentration = 0.16 mg/mL (160 mcg/mL) ***Sedative medications should only be given after pain is adequately controlled*** <input type="checkbox"/> Start at rate: _____ mg/hr
	LORazepam 80 mg/500 mL D5W - Fixed Rate <input type="checkbox"/> IV Final Concentration = 0.16 mg/mL (160 mcg/mL). Provider order is required for ALL rate changes. ***Sedative medications should only be given after pain is adequately controlled.*** Continued on next page....

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 Physician Signature: _____ Date _____ Time _____

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PHYSICIAN ORDERS

Place an "X" in the Orders column to designate orders of choice AND an "x" in the specific order detail box(es) where applicable.

ORDER	ORDER DETAILS
	<input type="checkbox"/> Start at rate: _____ mg/hr

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 Physician Signature: _____ Date _____ Time _____