UMC Health System

DOFETILIDE INITIATION ORDERS

Patient Label Here

	PUVOICIA	N ODDERO				
PHYSICIAN ORDERS						
Diagnosis						
Weight	Allergies 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	D an X in the specific order de	tali box(es) where applicable.			
OKDEK	Patient Care					
	Patient Care Patient must remain in the hospital and be monitored for 72 hours after staring dofetilide or 12 hours after electrical or pharmacologic conversion to normal sinus rhythm, whichever is longer.					
	Patient must be admitted to ICCU or ICU for dofetilide administration.					
	Continuous Telemetry (Intermediate Care)					
	Dofetilide (Tikosyn) Monitoring Guidelin (Dofetilide (Tikosyn) Monitoring Guidelines)					
	Communication					
	Notify Provider (Misc) T;N, Reason: If baseline QTc is greater than 440 msec, or 500 msec for patients with ventricular conduction abnormalities.					
	Notify Provider (Misc) T;N, Reason: If QTc following dofetilide first dose increased by more than 15%					
	Notify Provider (Misc) T;N, Reason: If QTc is greater than 500 msec (or 550 msec for patients with ventricular conduction abnormalities) following any dose					
	Notify Provider (Misc) ☐ T;N, Reason: If patient develops ventricular arrhythmias (torsades de	pointes or sustained ventricular tac	chycardia).			
	Medications	al della dece Marcadad				
	Medication sentences are per dose. You will need to calculate a total daily dose if needed. If patient has previously been on antiarrhythmics, ensure the therapy has been discontinued for the duration as defined below: 1. Amiodarone has been held for 3 months prior to initiation of dofetilide or blood concentration of amiodarone is less					
	than 0.3 mcg/mL. 2. The following medications have been held for at least 3 half-lives (half-life in parentheses): quinidine (24hrs), procainamide (24hrs), disopyramide (30hrs), moricizine (24hrs), flecainide (72hrs), propafenone (72hrs), sotalol (36hrs), ibutilide (24hrs)					
	The following medications are CONTRAINDICATED while on dofetilide: cimetidine, hydrochlorothiazide, ketoconazole, megestrol, prochlorperazine, trimethoprim, trimethoprim/sulfamethoxazole, verapamil and itraconazole.					
	dofetilide ☐ 500 mcg, PO, cap, q12h, for CrCl greater than 60 mL/min Hold dofetilide and notify physician if baseline QTc is greater than 440msec (500msec in patients with ventricular conduction abnormalities) OR if QTc increases to greater than 500 msec (550 msec in patients with ventricular conduction abnormalities) once therapy has been initiated. Continued on next page					
□ то	☐ Read Back	Scanned Powerchart	Scanned PharmScan			
Order Taken by Signature:		Date	Time			
Physician Signature:		Date	Time			

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	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					
	□ 250 mcg, PO, cap, q12h, for CrCl 40-60 mL/min Hold dofetilide and notify physician if baseline QTc is greater than 440msec (500msec in patients with ventricular conduction abnormalities) OR if QTc increases to greater than 500 msec (550 msec in patients with ventricular conduction abnormalities) once therapy has been initiated. □ 125 mcg, PO, cap, q12h, for CrCl 20-39 mL/min Hold dofetilide and notify physician if baseline QTc is greater than 440msec (500msec in patients with ventricular conduction abnormalities) OR if QTc increases to greater than 500 msec (550 msec in patients with ventricular conduction abnormalities) once therapy has been initiated.					
	Electrolytes					
	IF potassium is LESS than 4 mEq/L, it must be corrected prior to initiation of dofetilide. IF magnesium is LESS than 2 mEq/L, it must be corrected prior to initiation of dofetilide.					
	IV POTASSIUM REPLACEMENT - Replacement doses for potassium levels less than or equal to 3.9 mMol/L:					
	potassium chloride 20 mEq, IVPB, ivpb, as needed, PRN hypokalemia, Infuse over 2 hr, K+ level 3.6 - 3.9 mMol/L If K+ level 3.6 - 3.9 mMol/L - Administer 20 mEq KCl ivpb Administer at 10 mEq/hr. Repeat serum potassium level 2 hours after total replacement is completed.					
	potassium chloride 40 mEq, IVPB, ivpb, as needed, PRN hypokalemia, Infuse over 4 hr, K+ level 3.1 - 3.5 mMol/L If K+ level 3.1 - 3.5 mMol/L - Administer 40 mEq KCl ivpb Administer at 10 mEq/hr. Repeat serum potassium level 2 hours after total replacement is completed.					
	potassium chloride 60 mEq, IVPB, ivpb, as needed, PRN hypokalemia, Infuse over 6 hr, K+ level less than 3.1 mMol/L If K+ level less than 3.1 mMol/L -Administer 60 mEq KCl ivpb, and contact provider Administer at 10 mEq/hr. Repeat serum potassium level 2 hours after total replacement is completed.					
	IV MAGNESIUM REPLACEMENT - Repalcement doses for magnesium levles less than or equal to 1.9 mg/dL					
	magnesium sulfate 2 g, IVPB, ivpb, as needed, PRN hypomagnesemia, Infuse over 2 hr If Magnesium level is 1.6 - 19. mg/dL, administer 2 g magnesium sulfate. Administer at rate of 1 g/hr. Repeat serum magnesium level 2 hours after the infusion is completed.					
(magnesium sulfate ☐ 4 g, IVPB, ivpb, as needed, PRN hypomagnesemia, Infuse over 4 hr If Magnesium level is less than 1.6 mg/dL, administer 4 g magnesium sulfate. Administer at rate of 1 g/hr. Notify provider if magnesium level is less than 1 mg/dL. Repeat serum magnesium level 2 hours after the infusion is completed. Continued on next page					
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Physician S	Signature: Date Time					

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ORDER	ORDER DETAILS				
	Laboration				
	Laboratory Serum creatinine, potassium and magnesium required prior to the initiation of dofetilide. Place order below if not completed in past 24 hours.				
	Basic Metabolic Panel (BMP) ☐ STAT, T;N				
	Comprehensive Metabolic Panel (CMP) ☐ STAT, T;N				
	Magnesium Level ☐ STAT, T;N				
	Diagnostic Tests				
	Baseline QTc from EKG 12-lead REQUIRED. Use QT if HR less than 60. Use lead with longest QTc interval (usually lead II) for baseline calculations and the same lead for all subsequent calculations.				
	Obtain QTc from EKG 12-lead 2 hours after each dose and document on dofetilide monitoring form. Follow instructions on form and contact provider if dose change needed.				
	EKG-12 Lead ☐ T;N, STAT, Baseline EKG				
	EKG-12 Lead ☐ T;N, Routine, q12h				
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Physician Signature:		Date	Time		

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