UMC Health System NICU BEDSIDE SEDATION PLAN - Phase: Intra-Procedure Orders		Pat	ient Label Here		
	PHYSICIA	N ORDERS			
Diagnos	is				
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				
	Patient Care				
	Vital Signs T;N, Per Policy				
🗆 то	Read Back	Scanned Powerchart	Scanned PharmScan		
Order Taken by Signature:		Date	Time		
Physician	Signature:	Date	Time		

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NICU BEDSIDE SEDATION PLAN - Phase: Medication Documentation

	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						
	Communication					
	Procedural Sedation Medications Guidelin (Procedural Sedation Medications Guidelines)					
	Medications					
	Medication sentences are per dose. You will need to calculate a total daily Analgesics	dose if needed.				
	Recommended fentaNYL dosing for pediatrics is 0.5 mcg/kg - 1 mcg/kg.					
	fentaNYL					
	For Procedural Sedation Only. See INet for incremental dosing of this medication.					
	Recommended morphine dosing for pediatrics is 0.05 mg/kg - 0.1 mg/kg.					
	morphine mg, IVPush, inj, OCTOR					
	For Procedural Sedation Only. See INet for incremental dosing of this medic	ation.				
	Recommended ketamine dosing for pediatrics is 0.5 mg/kg - 1 mg/kg.					
	1 mg/kg, IVPush, inj, OCTOR For Procedural Sedation Only. See INet for incremental dosing of this medic.	ation				
	0.5 mg/kg, IVPush, inj, OCTOR					
	For Procedural Sedation Only. See INet for incremental dosing of this medic	ation.				
ļ	Sedatives					
	Recommended lorazePAM dosing for pediatrics is 0.05 mg/kg - 0.1 mg/kg.					
	LORazepam (LORazepam neonatal)					
	mg, IVPush, inj, OCTOR					
	For Procedural Sedation Only. See INet for incremental dosing of this medic	ation.				
	Recommended midazolam IV dosing for pediatrics is 0.05 mg/kg - 0.1 mg/kg.					
	Recommended midazolam intra-nasal dosing for pediatrics is 0.2 mg/kg.					
	midazolam mg, IVPush, inj, OCTOR					
	For Procedural Sedation Only. See INet for incremental dosing of this medic	ation.				
	🔲 0.2 mg/kg, intra-nasal, inj, OCTOR					
	For Procedural Sedation Only. See INet for incremental dosing of this medication.					
	Reversal Agent					
	Recommended naloxone dosing for pediatrics is 0.1 mg/kg.					
	naloxone					
	0.1 mg/kg, IVPush, inj, OCTOR					
	For Procedural Sedation Only. See INet for incremental dosing of this medication.					
🗆 то	D 🗌 Read Back 🔤 Scan	ned Powerchart	Scanned PharmScan			
Order Taken by Signature: Date Time		Time				
Physician S	n Signature:	Date	Time			



Patient Label Here

NICU BEDSIDE SEDATION PLAN - Phase: Post-Procedure Orders

	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	ER ORDER DETAILS			
	Patient Care			
	Convert IV to INT			
	Communication			
	Notify Provider of VS Parameters			
	Notify Nurse (DO NOT USE FOR MEDS)			
	Confirm Line Placement - Cleared for Use (Cleared for Use - CVL)			
	Notify Nurse (DO NOT USE FOR MEDS) T;N, Discontinue NICU Bedside Sedation Plan after procedure is completed.			
	Dietary			
	NPO Diet T;N, NPO			
	Infant Nutrition (NICU)			
	Infant Feeding			
	Diagnostic Tests			
	DX Chest Single View			
	DX Chest Special View T;N, Cross Table View			
	DX Pedi Chest/Abd (DX Pedi Chest/Abd (NICU))			
	DX Abdomen Portable (DX Abdomen Portable (NICU))			
	DX Abdomen 2+ vw			
	DX Abdomen 2 vw w/single chest			
🗆 то	TO Read Back Scanned Powerchart Scanned Pha	rmScan		
Order Take	Taken by Signature: Date Time			
Physician S				



UMC Health System		Pa	tient Label Here		
	CU BEDSIDE SEDATION PLAN				
- F	Phase: Pre-Procedures Orders				
	PHYSICIA	N ORDERS			
	Place an "X" in the Orders column to designate orders of choice AN	D an "x" in the specific orde	er detail box(es) where applicable.		
ORDER	ER ORDER DETAILS				
	Patient Care				
	Sedation History and Physical Update				
	Insert Peripheral Line Set Up for Biopsy				
	Set Up for Central Line Placement				
	Set Up for Chest Tube				
	Set Up for Incision and Drainage at Beds (Set Up for Incision at Beds	ainage at Bedside)			
	Set Up for Lumbar Puncture				
	Set Up for Paracentesis				
	Set Up for ROP Injections				
	Set Up for Surgical Procedure				
	Set Up for Thoracentesis				
	Communication				
Notify Nurse (DO NOT USE FOR MEDS) T;N, Ensure IV is patent Notify Nurse (DO NOT USE FOR MEDS) T;N, Ensure consents are on chart					
					Notify Nurse (DO NOT USE FOR MEDS) T;N, Please have LORazepam and fentaNYL available for procedure
	Dietary NPO Diet				
	IV Solutions				
	D10W 250 mL final vol, IV, mL/hr				
□ то	Read Back	Scanned Powerchart	Scanned PharmScan		
Order Take	en hy Signature	Date	Time		
Order Taken by Signature: Physician Signature:		Date	Time		

