

<p>UMC Health System</p> <p>NICU RAPID SEQUENCE INTUBATION PLAN</p>	<p>Patient Label Here</p>
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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

Patient Care

Set Up for Intubation
 T;N

Medications

Medication sentences are per dose. You will need to calculate a total daily dose if needed.

morphine (morphine neonatal)
 0.1 mg/kg, IVPush, inj, q5minX3, PRN

LORazepam (LORazepam neonatal)
 0.1 mg/kg, IVPush, inj, q5minX3, PRN sedation

vecuronium (vecuronium neonatal)
 0.1 mg/kg, IVPush, inj, ONE TIME

Diagnostic Tests

DX Chest Portable

Respiratory

PPV via Neopuff (NICU)

Ventilator Settings HFOV (HFOV Vent Settings)

Ventilator Settings (Vent Settings)

Arterial Blood Gas (ABG)

Capillary Blood Gas

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TO
 Read Back
 Scanned Powerchart
 Scanned PharmScan

Order Taken by Signature: _____ Date _____ Time _____
 Physician Signature: _____ Date _____ Time _____