

UMC Health System PCA 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

Communication

Notify Provider of VS Parameters (Notify Provider if VS)
 RR Less Than 10, Patient becomes unresponsive

Medication Management (Notify Nurse and Pharmacy)
 Start date T;N
 If respirations fall below 10 breaths per minute or patient becomes unresponsive, stop PCA pump.

IV Solutions

*****CAUTION*****
 Ordering a continuous rate (Basal Dose), should be reserved for opioid tolerant patients who require high dose therapy.

*****DOSING NOTES***:**

1. Initial doses are for opioid naive patients. Chronic pain patients may require higher doses.
2. Decrease initial starting dose by 25-30% in patients greater than 65 years of age, and/or patients with renal, hepatic, or pulmonary impairment.
3. Hydromorphone and fentanyl are recommended for patients with renal impairment and/or those who cannot tolerate morphine.

morphine (morphine 30 mg/30 mL PCA)
 Dose (mg) = 1, Lock-out Interval (min) = 10, 4-hour Limit (mg) = 20, Start date/time T;N
 Dose (mg) = 2, Lock-out Interval (min) = 10, 4-hour Limit (mg) = 40, Start date/time T;N

HYDROMorphone (HYDROMorphone 6 mg/30 mL PCA)
 Dose (mg) = 0.1, Lock-out Interval (min) = 10, 4-hour Limit (mg) = 2, Start date/time T;N
 Dose (mg) = 0.2, Lock-out Interval (min) = 10, 4-hour Limit (mg) = 4, Start date/time T;N
 Dose (mg) = 0.3, Lock-out Interval (min) = 10, 4-hour Limit (mg) = 6, Start date/time T;N

fentaNYL (fentaNYL 300 mcg/30 mL PCA)
 Dose (mcg) = 10, Lock-out Interval (min) = 10, 4-hour Limit (mcg) = 100, Start date/time T;N
 Dose (mcg) = 10, Lock-out Interval (min) = 10, 4-hour Limit (mcg) = 150, Start date/time T;N
 Dose (mcg) = 10, Lock-out Interval (min) = 10, 4-hour Limit (mcg) = 200, Start date/time T;N

If no IV Fluid is currently infusing, start 0.9% sodium chloride to keep vein open for duration of PCA

NS (Normal Saline)
 1,000 mL final vol, IV, 20 mL/hr

Medications

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

ACUTE MANAGEMENT OF RESPIRATORY DEPRESSION
 If respiratory rate is less than 10 breaths/min or patient is unresponsive

1. Stop PCA Pump
2. Administer naloxone (Narcan) as ordered until respiratory rate is greater than 10 breaths/min.
3. Notify Physician

naloxone
 0.1 mg, IVPush, inj, q2min, PRN bradypnea
 May give undiluted or dilute 0.4 mg into 9 mL of normal saline for a total volume of 10 mL to achieve a 0.04 mg/mL concentration (0.1 mg = 2.5 mL).

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TO Read Back

Scanned Powerchart

Scanned PharmScan

Order Taken by Signature: _____ Date _____ Time _____

Physician Signature: _____ Date _____ Time _____



UMC Health System

PCA MED PLAN

Patient Label Here

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

Respiratory

Continuous Pulse Oximetry

TO Read Back

Scanned Powerchart

Scanned PharmScan

Order Taken by Signature: _____ Date _____ Time _____

Physician Signature: _____ Date _____ Time _____

