

UMC Health System PEDIATRIC BURN 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

Patient Care

Vital Signs
 Per Unit Standards q8h, For hours of 10 pm to 7 am

Daily Weight

Strict Intake and Output
 Per Unit Standards q1h

Perform Neurovascular Checks
 q1h q2h
 q4h

Patient Activity
 Bedrest Up Ad Lib/Activity as Tolerated | Assist as Needed

Ambulate Patient

Bladder Pressure Monitoring
 q4h, for 72h

Insert Peripheral Line

Insert Gastric Tube
 Nasogastric - NG, To: Low Intermittent Suction Nasogastric - NG, for feeding access
 Dobhoff Tube

Place Device at Bedside (Place Bronchoscope at Bedside)

POC Blood Sugar Check
 q4h q6h
 q12h

Communication

Notify Provider (Misc)
 T;N, Reason: Intake/output. For 2 years of age or less (regardles of kg): 1.5ml/kg/hr. Greater than 2 years of age and <30kg: 1ml/kg/hr. Greater than 2 years of age and >30kg: 0.5ml/kg/hr

Notify Provider of VS Parameters

Notify Provider (Misc)

Notify Nurse (DO NOT USE FOR MEDS)
 T;N, Give patient ___ ounces of prune juice daily

Dietary

NPO Diet
 NPO, Except Meds

Oral Diet
 Advance as tolerated to High Prot/High Cal

Infant Feeding

IV Solutions

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ORDER	ORDER DETAILS
	D5 1/2 NS + 20 mEq KCl/L <input type="checkbox"/> IV, mL/hr
	LR <input type="checkbox"/> LESS than or equal to 2 years old: titrate LR to maintain urine output of 1.5 mL/kg/hr <input type="checkbox"/> Greater than 2 years old AND LESS than 30 kg: titrate LR to maintain urine output of 1 mL/kg/hr <input type="checkbox"/> Greater than 2 years old AND GREATER than 30 kg: titrate LR to maintain urine output of 0.5 mL/kg/hr
Urine Output Maintenance	
	Order "LR" below for rate titration based on urine output LR <input type="checkbox"/> IV, for 2 years of age or less (regardless of kg): 1.5ml/kg/hr. Greater than 2 years of age and <30kg: 1ml/kg/hr. Greater than 2 years of age and >30kg: 0.5ml/kg/hr
Medications	
Medication sentences are per dose. You will need to calculate a total daily dose if needed.	
	ascorbic acid <input type="checkbox"/> 250 mg, PO, liq, BID <input type="checkbox"/> 250 mg, PO, tab, BID
	multivitamin <input type="checkbox"/> 1 mL, PO, liq, Daily For patients 2 years of age and under.
	multivitamin (multivitamin pediatric chewtab) <input type="checkbox"/> 1 tab, PO, tab chew, Daily
	zinc sulfate <input type="checkbox"/> 55 mg, PO, liq, Daily, (2 years of age and under) <input type="checkbox"/> 110 mg, PO, liq, Daily
	diphenhydrAMINE (diphenhydrAMINE pediatric) <input type="checkbox"/> 1 mg/kg, PO, liq, q6h, PRN itching Recommended maximum dose is 50 mg <input type="checkbox"/> 1 mg/kg, PO, liq, Nightly, PRN insomnia Recommended maximum dose is 50 mg
	hydrOXYzine <input type="checkbox"/> 0.5 mg/kg, PO, liq, q6h, PRN itching Recommended maximum dose is 25 mg <input type="checkbox"/> 12.5 mg, PO, liq, q6h, PRN itching <input type="checkbox"/> 25 mg, PO, liq, q6h, PRN itching
	famotidine (famotidine pediatric) <input type="checkbox"/> 0.25 mg/kg, PO, liq, BID Recommended maximum of 40 mg per day. <input type="checkbox"/> 0.5 mg/kg, IVPush, inj, q12h Recommended maximum of 40 mg per day.
	pantoprazole <input type="checkbox"/> 0.6 mg/kg, PO, liq, q24h Recommended maximum is 40 mg per day.
	glycerin (glycerin neonatal) <input type="checkbox"/> 0.25 supp, rectally, supp, q24h, PRN constipation

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ORDER	ORDER DETAILS
	glycerin (glycerin pediatric rectal suppository) <input type="checkbox"/> 1 supp, rectally, supp, Daily, PRN constipation
	probiotic, multistrain <input type="checkbox"/> 1 cap, PO, cap, Daily
Burn Care Treatment	
	emollients, topical (Aquaphor topical ointment) <input type="checkbox"/> 1 app, topical, bulk topical, Daily, PRN burn care
	emollients, topical (Nivea topical cream) <input type="checkbox"/> 1 app, topical, cream, as needed, PRN burn care
	emollients, topical (Nivea topical lotion) <input type="checkbox"/> 1 app, topical, lotion, as needed, PRN burn care
Laboratory	
	CBC with Differential
	Basic Metabolic Panel
	Comprehensive Metabolic Panel
	Magnesium Level
	Copper Level and Procalcitonin Level are required for all burns 30% or greater and all NSTI's. Copper Level <input type="checkbox"/> Routine, T;N
	Copper Level <input type="checkbox"/> Routine, T;N, Every Monday
	Procalcitonin Level <input type="checkbox"/> Routine, T;N
	Procalcitonin Level <input type="checkbox"/> Routine, T;N, Every Monday
	Amylase Level
	Lipase Level
	Renal Function Panel
	Fibrinogen Level
	Platelet Count
	Prothrombin Time with INR
	PTT
	Urinalysis
	Respiratory Viral Panel by PCR
	Culture Throat Beta Strep A
	Order "Myoglobin" below for greater than 20% TBSA patients

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ORDER	ORDER DETAILS
	Myoglobin <input type="checkbox"/> q4h for 72 hr
Diagnostic Tests	
	DX Chest PA & Lateral
Respiratory	
	Oxygen (O2) Therapy <input type="checkbox"/> Via: Nasal cannula <input type="checkbox"/> Via: Venturi mask <div style="float: right;"> <input type="checkbox"/> Via: Simple mask <input type="checkbox"/> Via: Trach collar </div>
	Continuous Pulse Oximetry
	Arterial Blood Gas <input type="checkbox"/> STAT
	Arterial Blood Gas <input type="checkbox"/> Routine, Daily, In AM <div style="float: right;"><input type="checkbox"/> Routine, q8h</div>
Physical Medicine and Rehab	
	Wound Evaluation and Treatment by PT Bur (Wound Evaluation and Treatment by PT Burn Wound/Skin Care Services)
	Consult PT Mobility for Eval & Treat
	Consult Speech Therapy for Eval & Treat
	Consult Occ Therapy for Eval & Treat
Consults/Referrals	
	Consult Dietitian
	For Child Psychology Consult Notify Nurse (DO NOT USE FOR MEDS) <input type="checkbox"/> Consult Child Psychology in AM
	For Child Life Consult Notify Nurse (DO NOT USE FOR MEDS) <input type="checkbox"/> Consult Child Life in AM

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PEDIATRIC BURN WOUND PAIN AND ANXIOLYSIS PLAN

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

Background Pain/Neuropathic Pain

The following scheduled orders will alternate every 3 hours.

acetaminophen (acetaminophen pediatric)

- 15 mg/kg, PO, liq, q6h, To be alternated with ibuprofen every 3 hours.
Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours. Max of 5 doses in 24 hours.
- 40 mg, PO, liq, q6h, To be alternated with ibuprofen every 3 hours.
Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours. Max of 5 doses in 24 hours.
- 80 mg, PO, liq, q6h, To be alternated with ibuprofen every 3 hours.
Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours. Max of 5 doses in 24 hours.
- 120 mg, PO, liq, q6h, To be alternated with ibuprofen every 3 hours.
Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours. Max of 5 doses in 24 hours.
- 160 mg, PO, liq, q6h, To be alternated with ibuprofen every 3 hours.
Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours. Max of 5 doses in 24 hours.
- 240 mg, PO, liq, q6h, To be alternated with ibuprofen every 3 hours.
Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours. Max of 5 doses in 24 hours.
- 320 mg, PO, liq, q6h, To be alternated with ibuprofen every 3 hours.
Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours. Max of 5 doses in 24 hours.
- 400 mg, PO, liq, q6h, To be alternated with ibuprofen every 3 hours.
Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours. Max of 5 doses in 24 hours.
- 500 mg, PO, liq, q6h, To be alternated with ibuprofen every 3 hours.
Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours. Max of 5 doses in 24 hours.
- 325 mg, PO, tab, q6h, To be alternated with ibuprofen every 3 hours.
Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours. Max of 5 doses in 24 hours.
- 500 mg, PO, tab, q6h, To be alternated with ibuprofen every 3 hours.
Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours. Max of 5 doses in 24 hours.

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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												
	<p>ibuprofen (ibuprofen pediatric)</p> <p><input type="checkbox"/> 10 mg/kg, PO, liq, q6h, To be alternated with acetaminophen every 3 hours.</p> <p><input type="checkbox"/> 50 mg, PO, liq, q6h, To be alternated with acetaminophen every 3 hours.</p> <p><input type="checkbox"/> 80 mg, PO, liq, q6h, To be alternated with acetaminophen every 3 hours.</p> <p><input type="checkbox"/> 100 mg, PO, liq, q6h, To be alternated with acetaminophen every 3 hours.</p> <p><input type="checkbox"/> 150 mg, PO, liq, q6h, To be alternated with acetaminophen every 3 hours.</p> <p><input type="checkbox"/> 200 mg, PO, liq, q6h, To be alternated with acetaminophen every 3 hours.</p> <p><input type="checkbox"/> 200 mg, PO, tab, q6h, To be alternated with acetaminophen every 3 hours.</p> <p><input type="checkbox"/> 250 mg, PO, liq, q6h, To be alternated with acetaminophen every 3 hours.</p> <p><input type="checkbox"/> 300 mg, PO, liq, q6h, To be alternated with acetaminophen every 3 hours.</p> <p><input type="checkbox"/> 400 mg, PO, tab, q6h, To be alternated with acetaminophen every 3 hours.</p> <p><input type="checkbox"/> 600 mg, PO, tab, q6h, To be alternated with acetaminophen every 3 hours.</p>												
	<p>Gabapentin frequency increases over a two day period.</p> <p>gabapentin</p> <p><input type="checkbox"/> 2.5 mg/kg, PO, liq, BID Recommended MAX dose of 15 mg/kg/day.</p>												
	<p>gabapentin</p> <p><input type="checkbox"/> 2.5 mg/kg, PO, liq, TID Recommended MAX dose of 15 mg/kg/day.</p>												
Breakthrough Pain													
	<p>The PRN acetaminophen and ibuprofen orders below should NOT be used if these medications have been ordered to be given on a scheduled basis above.</p> <p>acetaminophen (acetaminophen pediatric)</p> <table border="0"> <tr> <td><input type="checkbox"/> 15 mg/kg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> <td><input type="checkbox"/> 40 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> </tr> <tr> <td><input type="checkbox"/> 80 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> <td><input type="checkbox"/> 120 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> </tr> <tr> <td><input type="checkbox"/> 160 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> <td><input type="checkbox"/> 240 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> </tr> <tr> <td><input type="checkbox"/> 320 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> <td><input type="checkbox"/> 400 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> </tr> <tr> <td><input type="checkbox"/> 500 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</td> <td><input type="checkbox"/> 325 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)</td> </tr> <tr> <td><input type="checkbox"/> 500 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)</td> <td></td> </tr> </table>	<input type="checkbox"/> 15 mg/kg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 40 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 80 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 120 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 160 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 240 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 320 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 400 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 500 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 325 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 500 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)	
<input type="checkbox"/> 15 mg/kg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 40 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)												
<input type="checkbox"/> 80 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 120 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)												
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<input type="checkbox"/> 320 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 400 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)												
<input type="checkbox"/> 500 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)	<input type="checkbox"/> 325 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)												
<input type="checkbox"/> 500 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)													

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ORDER	ORDER DETAILS
	<p>ibuprofen (ibuprofen pediatric)</p> <p><input type="checkbox"/> 10 mg/kg, PO, liq, q6h, PRN pain-mild (scale 1-3)</p> <p><input type="checkbox"/> 80 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</p> <p><input type="checkbox"/> 150 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</p> <p><input type="checkbox"/> 200 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)</p> <p><input type="checkbox"/> 300 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)</p> <p><input type="checkbox"/> 600 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)</p> <p><input type="checkbox"/> 50 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</p> <p><input type="checkbox"/> 100 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</p> <p><input type="checkbox"/> 200 mg, PO, liq, q6h, PRN pain-mild (scale 1-3)</p> <p><input type="checkbox"/> 250 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)</p> <p><input type="checkbox"/> 400 mg, PO, tab, q6h, PRN pain-mild (scale 1-3)</p>
	<p>HYDROcodone-acetaminophen (HYDROcodone-acetaminophen (Norco) 7.5 mg-325 mg/15 mL oral solution)</p> <p><input type="checkbox"/> 0.2 mL/kg, PO, soln, q8h, PRN pain-moderate/severe (scale 4-10) ***Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours.***Max of 5 doses in 24 hours.</p> <p><input type="checkbox"/> 5 mL, PO, soln, q8h, PRN pain-moderate/severe (scale 4-10) ***Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours.***Max of 5 doses in 24 hours.</p> <p><input type="checkbox"/> 7.5 mL, PO, soln, q8h, PRN pain-moderate/severe (scale 4-10) ***Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours.***Max of 5 doses in 24 hours.</p> <p><input type="checkbox"/> 10 mL, PO, soln, q8h, PRN pain-moderate/severe (scale 4-10) ***Do not exceed 75mg/kg of acetaminophen from all sources in 24 hours if under the age of 12 years. For all others, do not exceed 4,000mg of acetaminophen from all sources in 24 hours.***Max of 5 doses in 24 hours.</p>
Wound Care Pain Control and Anxiolysis	
	<p>Oral Burn Care Analgesics/Anxiolysis</p> <p>morphine (morphine pediatric)</p> <p><input type="checkbox"/> 0.1 mg/kg, PO, liq, q24h, PRN burn care Maximum recommended dose is 10 mg. Do NOT give if IV lidocaine is ordered for Burn Care</p> <p><input type="checkbox"/> 10 mg, PO, liq, q24h, burn care Maximum recommended dose is 10 mg. Do NOT give if IV lidocaine is ordered for Burn Care</p>
	<p>HYDROcodone-acetaminophen (HYDROcodone-acetaminophen (Norco) 7.5 mg-325 mg/15 mL oral solution)</p> <p><input type="checkbox"/> 0.2 mL/kg, PO, soln, q24h, PRN burn care</p> <p><input type="checkbox"/> 7.5 mL, PO, soln, q24h, PRN burn care</p> <p><input type="checkbox"/> 5 mL, PO, soln, q24h, PRN burn care</p> <p><input type="checkbox"/> 10 mL, PO, soln, q24h, PRN burn care</p>
	<p>midazolam (midazolam pediatric)</p> <p><input type="checkbox"/> 0.1 mg/kg, PO, liq, q24h, PRN burn care Maximum recommended dose is 5 mg.</p> <p><input type="checkbox"/> 5 mg, PO, liq, q24h, PRN burn care Maximum recommended dose is 5 mg.</p>
	<p>ketamine</p> <p><input type="checkbox"/> 2.5 mg/kg, PO, inj, q24h, PRN burn care, FOR BURN CARE ONLY Give 20 minutes prior to burn care, mix in 30 mL of orange juice ***Lidocaine should be the only IV wound care medication ordered***</p> <p>Continued on next page....</p>

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	<p>IV Burn Care Analgesics/Anxiolysis</p> <p>Lidocaine NOT to be used with any cardiac history or electrolyte abnormality. Decrease dose by 50% with eGFR less than 30 mL/min. ***For patients 2 years of age or GREATER. ECG/Telemetry prior to using lidocaine should be performed***</p> <p>lidocaine (lidocaine 2,000 mg/500 mL (IVPB for Burn Care)) <input type="checkbox"/> 200 mg, IVPB syr, ivpb, q24h, PRN burn care, Infuse over 0 hr Give a 1.5 mg/kg bolus over 5 minutes 30 minutes prior to wound care. When wound care is initiated start the lidocaine drip at 1mg/kg/hr continuous until wound care is completed. Discontinue drip when procedure is complete.</p>

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