UCH Neuromuscular Blockade Agent - Adult ICU [3040100093]

Refer to Sedation Management for the Mechanically Ventilated Patient in the ICU order set for additional sedation orders.

Analgesia and Sedation must be addressed prior to administration of NMBA.

General

Nursing Assessments

☑ A documented RASS of at least -4 is required prior to initiating neuromuscular blockade to ensure adequate depth of sedation. [NUR185]

☑ Do not decrease sedatives or analgesics once desired RASS achieved [NUR185]

☑ Follow UCH policy "Neuromuscular Blocking Agents in Adult Special Care Units" [NUR185]

☑ NMBA Therapy - Document Train of Four (TOF) reading [NUR2024]

☑ NMBA Therapy - Assess and document NMBA effect at least every two hours [NUR17]

☑ NMBA Therapy - Assess and document ventilatory effect at least every hour [NUR17]

☑ NMBA Therapy - Discuss continued need for NMBA every 24 hours [NUR185]

☑ Refer to UCH policy "Eye Care in the Intensive Care Unit" [NUR185]

Reason for Initiation and Desired Level of Alertness (RASS Score) [179727]

☑ Indication for sedatives: [NUR185]

Routine, UNTIL DISCONTINUED, Starting today

Routine, UNTIL DISCONTINUED, Starting today

Routine, UNTIL DISCONTINUED, Starting today

Routine, UNTIL DISCONTINUED, Starting today Obtain and document initial TOF reading prior to induction of therapy if able

Routine, EVERY 2 HOURS

Routine, EVERY HOUR

Routine, UNTIL DISCONTINUED, Starting today

Routine, UNTIL DISCONTINUED, Starting today Apply 1" strip of lacrilube to each eye every six hours.

Medications

Sedation Medications (Single Response) (Selection Required) [180075]

Order sufficient range or starting dosages to ensure a RASS goal of -4.

☐ propofol (DIPRIVAN) infusion 10 mg/mL [180070] "And" Linked Panel

propofol (DIPRIVAN) infusion 10 mg/mL [40840026] 5-50 mcg/kg/min, Intravenous, CONTINUOUS

Start at 5 mcg/kg/minute IV. Titrate by 5 mcg/kg/minute every 5 minutes PRN to achieve the RASS goal of -4. Notify MD if propofol infusion reaches 50 mcg/kg/minute. Attempt to minimize analgesic and agitation medication dosing to obtain ordered RASS goal.

Routine, EVERY THIRD DAY

Triglycerides [LAB134]

Routine, EVERY THIRD DAY

Ionized Calcium Whole Blood [LAB54] "And" Linked Panel

midazolam bolus from bag and infusion [10431]

midazolam (VERSED) injection bolus from bag [408488] 1-5 mg, Intravenous, BOLUS FROM BAG PRN, Anxiety, RASS score equal to or greater than +2

Consider 1-5 mg for initial bolus. Bolus dose for breakthrough, give bolus 1/2 current infusion rate PRN every 15 minutes. If 3 or more boluses are given in 2 hours, increase infusion to achieve RASS goal of -4.

Intravenous, CONTINUOUS

Start at *** mg/hr and titrate by *** mg/hr every 15 minutes to reach a RASS goal of -4.

Do not decrease sedatives or analgesic once desired RASS achieved.
Lorazepam bolus from bag and infusion [181131]  "And" Linked Panel
Lorazepam (ATIVAN) injection bolus from bag [407274]  1-4 mg, Intravenous, BOLUS FROM BAG PRN, Withdrawal
Consider 1-4 mg for initial bolus.

LORazepam (ATIVAN) infusion [440023]  
Bolus dose for breakthrough, give bolus 1/2 current infusion rate PRN every 15 minutes. If 3 or more boluses are given in 2 hours, increase infusion to achieve RASS goal of -4.
Intravenous, CONTINUOUS
Start at *** mg/hr and titrate by ***mg/hr every 15 minutes to achieve RASS goal of -4.
Notify MD if Lorazepam infusion reaches 6 mg/hour.

Do not decrease sedatives or analgesic once desired RASS achieved.

Pain Medications (AMC) (Single Response) (Selection Required) [180077]

FentaNYL bolus from bag and infusion [181134]  "And" Linked Panel

FentaNYL (SUBLIMAZE) 50 mcg/mL injection bolus from bag [406027]  25-50 mcg, Intravenous, BOLUS FROM BAG PRN, Pain
Consider 25-50 mcg for initial bolus. Bolus dose for breakthrough, give bolus 1/2 current infusion rate PRN every 15 minutes. If 3 or more boluses are given in 2 hours, increase infusion by 25 mcg/hour to achieve RASS goal of -4.
Intravenous, CONTINUOUS
Start at *** mcg/hr and titrate by *** mcg/hr every 15 minutes to achieve RASS goal of -4

Do not decrease sedatives or analgesic once desired RASS achieved.

HYDROmorphine bolus from bag and infusion [21070]  "And" Linked Panel

HYDROmorphine (DILAUDID) injection bolus from bag 1 mg/mL [406301]  0.2 mg, Intravenous, BOLUS FROM BAG PRN, Pain, (CPOT Score equal to or greater than 2 points or has increased by 2 points since last assessment)
May repeat every 10 minutes as needed.

Call MD to increase bolus dose (not continuous infusion dose) for uncontrolled symptoms. Attempt to minimize analgesic and agitation medication dosing to obtain goals.

HYDROmorphine in NS infusion 50 mg/50 mL (1 mg/mL) [406457]  Intravenous, CONTINUOUS
Start at *** mg/hr. Titrate by *** mg/hr every 15 minutes to achieve goal CPOT of 0 to 2.

Neuromuscular Blocker Agents (Single Response) [21373]

Vecuronium bolus from bag and infusion [10408]  "And" Linked Panel

Vecuronium (NORCURON) bolus from bag [407285]  0.1 mg/kg, Intravenous, BOLUS FROM BAG ONCE, For 1 Doses
Bolus dose.

A documented RASS of at least -4 is required prior to initiating neuromuscular blockade to ensure adequate depth of sedation.

Vecuronium (NORCURON) 100 mg in NS 250 mL infusion [400229]  0.5-2 mcg/kg/min, Intravenous, CONTINUOUS

CisATRAcurium bolus from bag and infusion [896552]  "And" Linked Panel
- cisATRACurium (NIMBEX) bolus from bag [407265] 0.1 mg/kg, Intravenous, BOLUS FROM BAG ONCE, For 1 Doses Bolus Dose.

- cisATRACurium (NIMBEX) 200 mg/100 mL infusion [508136]

- Rocuronium bolus from bag and infusion [896553] "And" Linked Panel

- Rocuronium injection bolus from bag 1 mg/mL [407283] 0.1 mg/kg, Intravenous, BOLUS FROM BAG ONCE Bolus Dose.

- Rocuronium infusion [400217] A documented RASS of at least -4 is required prior to initiating neuromuscular blockade to ensure adequate depth of sedation, 1-10 mcg/kg/min, Intravenous, CONTINUOUS

- **Ophthalmic Medications [26679]**

- **White petrolatum-mineral oil ophthalmic ointment** [408644] 0.25 inch, Both Eyes, EVERY 6 HOURS