

Date	Adult Patient Controlled Analgesia Orders							
Time	(All orders with a <input type="checkbox"/> must be checked to activate. All orders with a <input checked="" type="checkbox"/> are activated.)							
1. PCA Orders:								
<ul style="list-style-type: none"> • Select agent and complete information below. • These orders will supersede any previous standing orders for agents selected below. • No IM, IV, or PO analgesics or sedatives unless otherwise indicated by prescriber / service ordering PCA. • Notify prescriber / service if the maximum dose is reached prior to the 4-hour time limit and pain persists. • If "Continuous / Basal Rate" is initiated with PCA, must indicate "around-the-clock" or "nightly" as outlined below. • All orders with a <input type="checkbox"/> must be checked to be activated. 								
Parameters	<input type="checkbox"/> Morphine (concentration = 1 mg/mL)		<input type="checkbox"/> Hydromorphone (DILAUDID) (concentration = 0.2 mg/mL)		<input type="checkbox"/> Fentanyl (concentration = 10 mcg/mL)		<input type="checkbox"/> Other**: (concentration = _____)	
	Reference Range	PCA Orders	Reference Range	PCA Orders	Reference Range	PCA Orders	Reference Range	PCA Orders
Initial Loading Dose / Bolus	0.1 - 10 mg		0.2 - 0.8 mg		20 - 40 mcg (average = 25 mcg)			
PCA Dose	0.5 - 2 mg		0.1 - 0.3 mg		5 - 20 mcg			
Lockout Interval	5 - 10 min		5 - 10 min		4 - 8 min			
One-Hour Limit	5 - 15 mg		0.5 - 3 mg		50 -150 mcg			
Continuous / Basal Rate*	0.1 - 5 mg/hr (usual "initial" = 0.5 mg/hr)		0.1 - 1 mg/hr (usual "initial" = 0.2 mg/hr)		10 - 50 mcg/hr (usual "initial" = 10 mcg/hr)			
	<input type="checkbox"/> Initiate "continuous/basal rate" infusion: <input type="checkbox"/> around-the-clock or <input type="checkbox"/> nightly from 10 pm to 6 am (must check to activate "basal" order)							
Breakthrough Pain	2 - 5 mg IV q2hr PRN		1 - 2 mg IV q2hr PRN		10 - 25 mcg IV q2hr PRN			
<p>** Higher PCA concentrations may be used in patients with very high opioid requirements. Contact pharmacy for more information.</p> <p>* If a basal rate is ordered, start at the following "initial" settings: morphine = 0.5 mg/hr, hydromorphone = 0.2 mg/hr, fentanyl = 10 mcg/hr, unless otherwise specified.</p> <p>NOTE: Metabolites of morphine and hydromorphone may accumulate in patients with renal dysfunction. Dosing adjustments are often necessary in these patients. Contact pharmacy for dosing assistance if needed.</p>								
3. Patient Monitoring:								
<ul style="list-style-type: none"> • check these parameters (vital signs, pain scale, sedation scale, and oxygen saturation) at the following schedule: upon initiation of PCA, q2hr x 2 after PCA initiation, then q4hr for the duration of therapy. • Pulse oximetry monitoring is required for PCA with basal infusion of any opioids. 								
4. Supplemental Medications: NOTE: "Sedative" effects of these PRN medications may be additive								
<input checked="" type="checkbox"/> If respiratory rate less than 8, stop PCA: mix naloxone (NARCAN) 0.4 mg in 10 mL of NS in a syringe. Give 0.02 mg (0.5 mL) IV slowly over 2 minutes. If no response within 1 - 2 minutes, repeat dose (to a total of 0.8 mg or 20 mL). Monitor oxygen saturation. Notify physician.								
<input checked="" type="checkbox"/> If nausea and / or vomiting occur:								
<input type="checkbox"/> Give promethazine (PHENERGAN) 6.25 - 12.5 mg PO or IV q6hr PRN.								
<input type="checkbox"/> Other:								
<input type="checkbox"/> If pruritis occurs, give diphenhydramine (BENADRYL) 25 mg PO or IV q6hr PRN.								
5. Supplemental Analgesia:								
<input type="checkbox"/> ketorolac (TORADOL) 15 mg IM/IV q6hr for 48 hours PRN pain (for patient 65 years and over), or for patients with renal insufficiency, maximum = 60 mg in 24 hours).								
<input type="checkbox"/> Other:								
MD Signature _____					MD # _____			

Pharmacy Use Only:
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Shands
at
the University of Florida
Gainesville, Florida 32610



RX0001

Patient Name: _____

Patient Identification #: _____

Physician's Orders
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Distribution: Medical Record – Be sure to fax to Pharmacy.

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