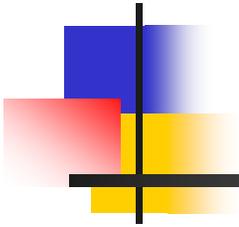
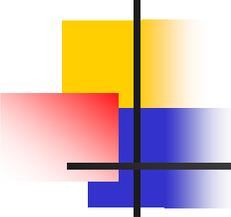


Comfort Care Order Set VISN 11 Dissemination Project BEACON PROJECT

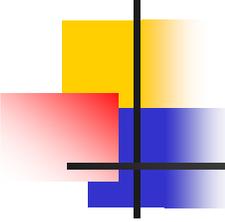


Amos Bailey MD
Co-PI for BEACON
Director, Palliative Care
Birmingham VA



Comfort Care Order Sets

- Helpful guide to care for Veterans in the hospital who have severe and life limiting illness to improve
 - Allows the physicians to order admission, transfer to new unit in hospital or start order set in less than 10 minutes
 - Comprehensive so fewer calls for new prn medications or cross cover issues
 - Symptom control of pain and other symptoms
 - Improve patient and family satisfaction



Comfort Care Order Set

- Safe and Easy to use orders for pain medications, medications for delirium and agitation and other symptoms
- Prewritten nursing text orders for comfort measures that you don't have to type in.
- By using the entire order set less likely to forget to place and order that results in call back, cross cover issues or poor symptom control.

Writing Delayed Transfer Order

Use Admit: if patient is newly admitted to the hospital or nursing home.
Use Transfer: if inpatient will move from one ward or treating team to another.

Release new orders immediately OK

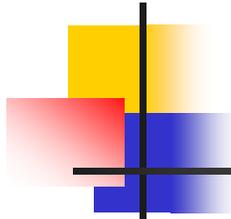
Delay release of new order(s) until Cancel

Event Delay List:

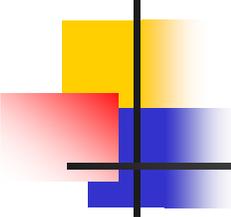
- Transfer to Blind Rehab
- Transfer to Cardiovascular Surgery
- Transfer to E.N.T.
- Transfer to General Medicine
- Transfer to General Surgery
- Transfer to Gynecology
- Transfer to Head & Neck Surgery
- Transfer to Hospice for Acute Care
- Transfer to Medical ICU/CCU
- Transfer to Neurology
- Transfer to Neurosurgery
- Transfer to Ophthalmology
- Transfer to Oral Surgery
- Transfer to Orthopedic Surgery
- Transfer to Plastic Surgery
- Transfer to SICU/CVICU
- Transfer to Thoracic Surgery
- Transfer to Urology (GU)
- Transfer to Vascular

- Admit to Blind Rehab
- Admit to Cardiac Surgery
- Admit to Cardiovascular Surgery
- Admit to E.N.T.
- Admit to General Medicine
- Admit to General Surgery
- Admit to Gynecology
- Admit to Head & Neck Surgery
- Admit to Hospice for Acute Care
- Admit to Medical I.C.U./C.C.U.

Locating the Comfort Care Order Set



View Orders		Active Orders (includes Pending & Recent Activity) - ALL SEP	
Active Orders (includes Pending)		Service	Order
		A/D/T	>> Diagnosis : Pain Crisis
			>> Condition : POOR .
Write Delayed Orders			
Write Orders			>> Admit to Hospice for Acute Care Specialty: HOSPICE FOR ACUTE CARE Attending: LEIGH_ALEXANDRA E Primary: LEIGH_ALEXANDRA E
Admission Orders Set		Activity	>> OOB to chair BID and preferably outside
Allergies			>> Open curtain during day.
Transfer Orders Set		Nursing	>> Nursing Care: please order Pegasus air mattress .
Pre and Post Op Orders			>> INITIATE COMFORT CARE ORDER SET
Pre Discharge Orders Set			>> Oxygen Nasal Cannula at flow rate of 2 L/m and tritrate to comfort
Discharge Orders Set			>> ADMIT TO AND INITIATE COMFORT CARE Approximate Admission date: 7/28/10@16:00 . specialty/team: HOSPICE FOR ACUTE CARE .
Amb Care Orders			>> INITIATE COMFORT CARE ORDER SET
Anesthesia Orders			>> Do Not Intubate this patient. Please mark cha
VBECS Blood Bank			>> DNR DO NOT ATTEMPT RESUSCITATION
Bronchoscopy Orders			>> Routine Vital Signs Q8hrs
Cath Lab Orders			>> Notifu MD if >2 days since last bowel moveme
Comfort Care Order Menu			
Consult Quick Orders			
DNR Orders			
Diet / Nutrition Orders			
ER Order Sets			
Extubation Clinical Pathway			
GI Lab Orders			
Heart Station			
Hemodialysis Order Sets			
Isolation Precaution Orders			
Lab Menu			
Pharmacy Menu			
PRIMARY CARE ORDER MENU			
Non VA//OTC/Herbal Meds			
Nursing: Patient Restraint Orders			
Nursing Orders			
Nursing Care Text Orders			
Procedure			
RADIOLOGY/IMAGING ORDER SET			
Respiratory Therapy Quick Order			
Telemetry Monitoring			
Treatment Protocol			



Comfort Care Order Set

Comfort Care Order Menu		Done
Comfort Care Orders Menu		
1	Admit and initiate Comfort Care Order Set	
2	Transfer and initiate Comfort Care Order Set	
3	DNI DNR	
4	Diet Orders	
5	Nursing	
6	Vital Signs	
7	Activity Orders	
8	IV Considerations	
9	Respiratory Orders	
10	Pain & Dyspnea (Opioids)	
11	Nausea & Delirium (Phenothines)	
12	Anxiety and Seizure (Benzodiazepines)	
13	Pain Dyspnea Anorexia Asthenia and Depression (Corticosteroids)	
14	Constipation	
15	Death Rattle Orders	
16	Additional Comfort Medications	
17	Consults	

Admit with CCOS

Admit Patient: ✖

Admit Patient to: 1ST FLR

Treating Specialty/Team: HOSPICE FOR ACUTE CARE

Attending Physician: SPENCER, JESSIE M

Admission Date: Oct 13, 2009 ...

Diagnosis: dementia and renal failure

Condition: Poor

Order: Initiate Comfort Care

Admit Patient ↑ Accept Order

Admit Patient to: 1ST FLR ↓

Treating Specialty/Team: HOSPICE FOR ACUTE CARE Quit

Transfer with CCOS

 **Transfer Patient:** 

Transfer Patient to: 1ST FLR

Change Treating Speciality to: HOSPICE FOR ACUTE CARE

Attending Physician: SPENCER, JESSIE M

Transfer Date: Oct 13, 2009 ...

Diagnosis: Dementia and renal failure

Condition: Floor

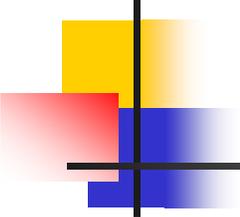
Order: Initiate Comfort Care

Transfer:
Transfer Patient to: 1ST FLR
Change Treating Speciality to: HOSPICE FOR ACUTE CARE

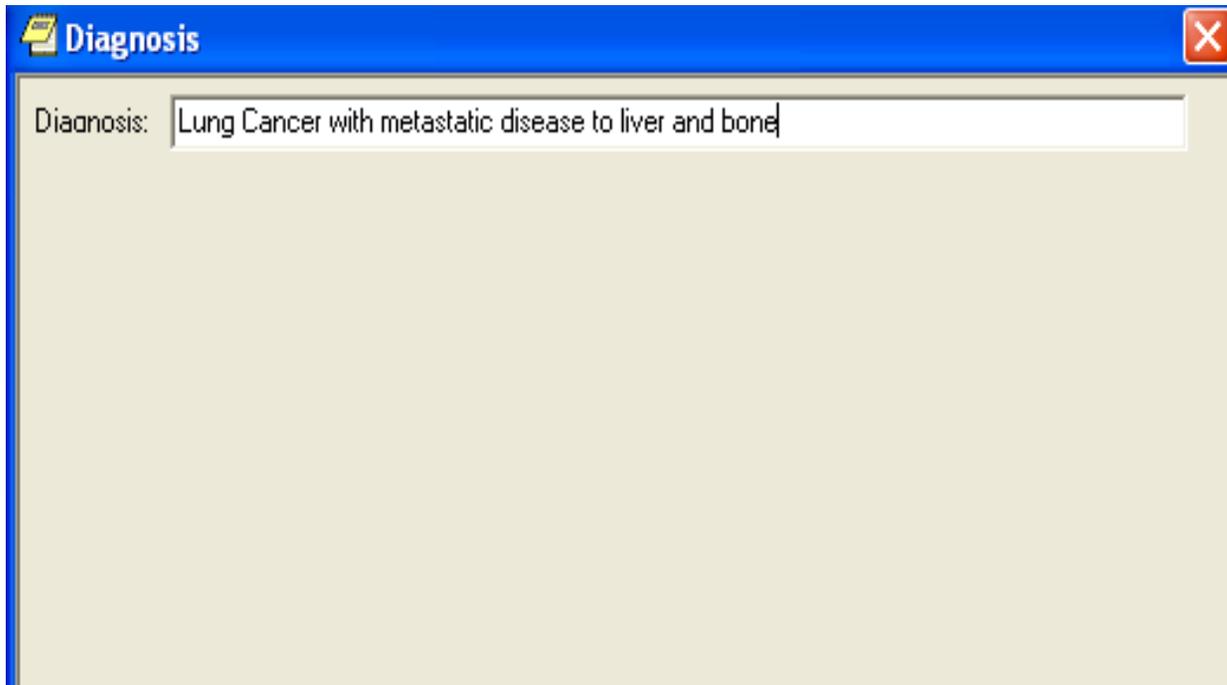
 

Accept Order

Quit



Diagnosis



Diagnosis ✕

Diagnosis:

Condition

Patient's Condition

Order:

Enter condition:

Start:

Stop:

CRITICAL
FAIR
GOOD
POOR
SERIOUSLY ILL
GRAVE

CONDITION :

Accept Order

Quit

Designation of Resuscitation Status

DNR Orders Next

Per Policy Resident DNR/DNI order active X 24hr after discussing with Attending

- DNI X 24 HOURS (RESIDENT ORDER)
- DNI ATTENDING ORDER
- DNR X 24 HRS (RESIDENT ORDER)
- DNR ATTENDING ORDER
- REMOVE DNI (REMOVES DNI POSTING FROM COVER SHEET)
- REMOVE DNR (REMOVES DNR POSTING FROM COVER SHEET)

Patient Care Order X

Patient Care

DNR

Instructions

DO NOT ATTEMPT RESUSCITATION

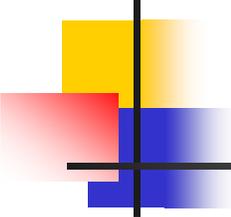
Start Date/Time Stop Date/Time

NOW

DNR
DO NOT ATTEMPT RESUSCITATION

Accept Order

Quit



Full Liquid Diet instead of NPO

◀ ▶ **Diet Orders** Next

DIET

Order a diet. Patient may improve and desire to taste food.
Order Full Liquid diet instead of clear liquids. More palatable.
Easier to swallow. Less likely to cause aspiration. Advance as tolerated.
May have food brought in by family. Allow patient to sit and eat. Assist to eat.

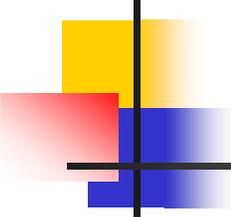
[Full Liquid Diet](#)
[May have food brought in by family](#)
[Allow patient to sit up for meals. Assist to eat.](#)

[Other Diet Orders](#)

Full Liquid Diet: Rather than NPO

New Order

Diet: FULL LIQUID
Effective date/time: NOW (10/13/09@11:32)
Expiration date/time: 21 DAYS FROM TODAY (11/3/09)
Delivery: TRAY
Special Instructions: Comfort Care Order
Service Connected: NO
Treatment Factors: <none>



Nursing Orders

Comfort Care Nursing Orders Done

NURSING:

TIPS FOR COMFORT/SAFETY:
Comforting measures. Reposition. Massage. Speak to patient.
Soft music. Avoid sensory overload (TV).

- 1 Please weigh on admission to Safe Harbor and weekly on Mondays thereafter
- 2 For CHF please weigh daily
- 3 May discontinue lab tests and daily wts and SCD's and subq Heparin and discontinue telemetry
- 4 RN may change form of medicine and route of administration. No IM meds
- 5 Keep hearing aid and dentures and glasses on pt.
- 6 Audiology consult: obtain amplifier for HOH patient
- 7 If actively dying please turn only for comfort
- 8 Please designate the patient HOSPICE FOR ACUTE CARE

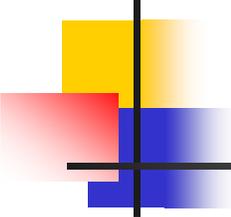
ACTIVITY: AVOID RESTRAINTS. Patient may need one on one sitter.

Begin environment modifications:

- 9 OOB to chair BID and preferably outside
- 10 Open curtain during day.
- 11 Decrease unnecessary noise (turn off TV)
- 12 Redirect ~ Reposition ~ Speak quietly
- 13 Provide nightlight when sleeping.
- 14 Please allow family to stay with patient in room

ASSISTING FAMILY:
Advise family about alerting their family members as to gravity of pt status. Arrange family visits of military relatives by contacting Red Cross and of incarcerated relatives by contacting warden. SW may assist.

- 15 Please give family "Preparing For Your Loved One's Loss"



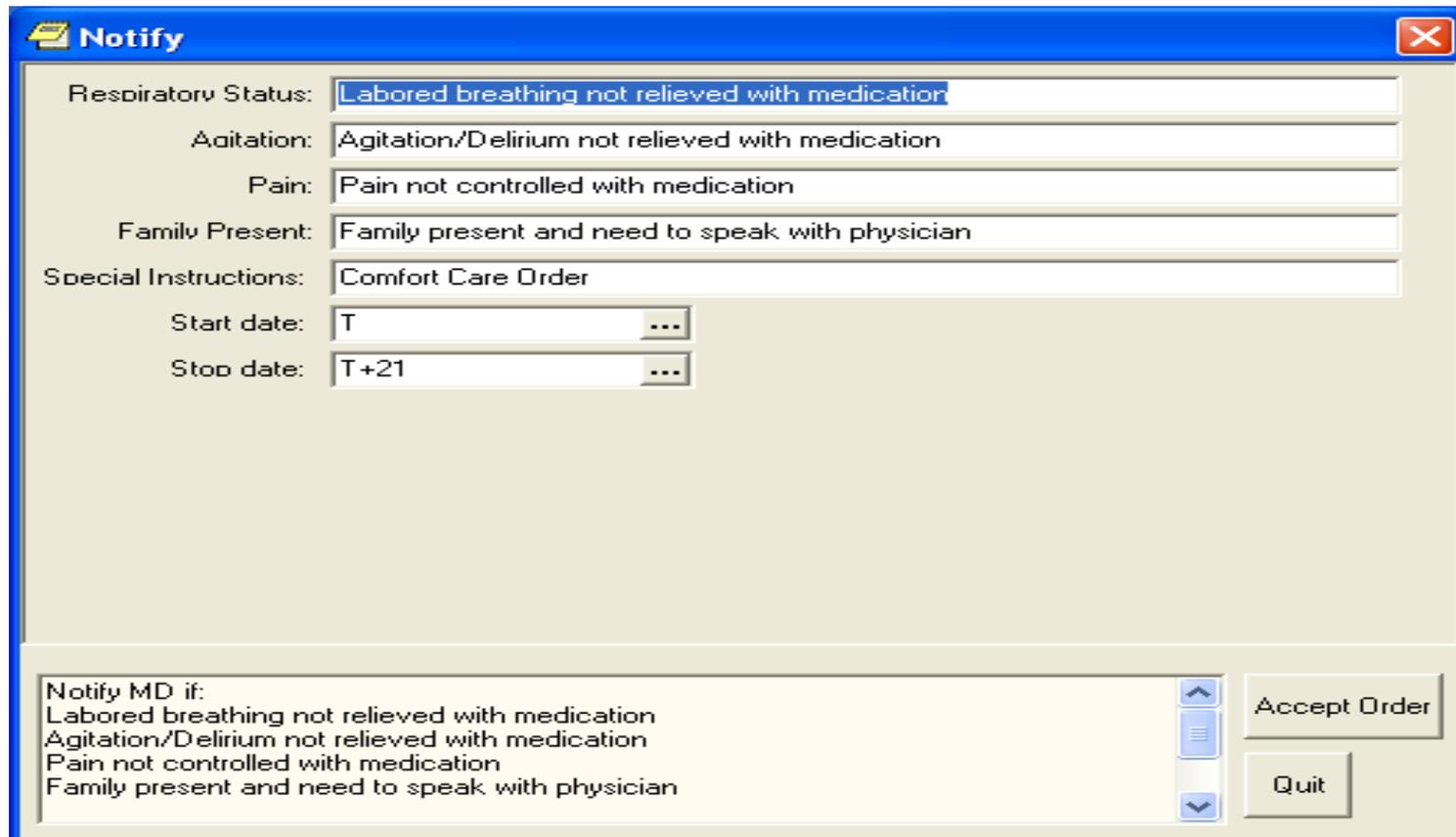
Vital Signs

Comfort Care Vitals Orders Done

VITAL SIGNS: Minimal frequency allowed by policy.
Limit notification orders to those necessary.
Frequent monitors can distract staff/family from patient.

- 1 Routine Vital Signs Q8hrs
- 2 Notify Attending for Palliative Care Patient
- 3 If greater than 2 days since last BM please check for impaction
place 2 bisacodyl supp If no results notify MD

Suggested Notifications



The screenshot shows a software window titled "Notify" with a blue header bar and a close button in the top right corner. The window contains several text input fields for patient status and instructions, and a summary section at the bottom.

Respiratory Status:

Agitation:

Pain:

Family Present:

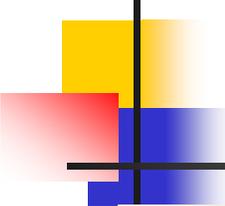
Special Instructions:

Start date: ...

Stop date: ...

Notify MD if:
Labored breathing not relieved with medication
Agitation/Delirium not relieved with medication
Pain not controlled with medication
Family present and need to speak with physician

Buttons: Accept Order, Quit



SQ Lines, IV and Fluids

IV Considerations Next

IV Placement often difficult & painful without patient benefit
Presence of edema indicates that patient is not dehydrated
Many patients have fluid overload edema and pulmonary congestion
If IV fluids used suggest limited time trial of D5 1/2NS 1000 ml over 6 hours
Suggest oral hydration as a reasonable compromise or

[D5 1/2NS 1000cc IV over 6 hours](#)
Other IV Fluid Orders

Subcutaneous Line: Small IV (22 gauge) needle inserted directly under skin (often on the abdomen or thigh) Avoids burden of finding/maintaining IV access. For injecting small volumes of many medicines when oral route unavailable

Subcutaneous (SQ) Line

Hypodermoclysis (subcutaneous infusion)

D5 1/2NS 1000cc SQ over 24 hours

Subcutaneous Line Placement

Subcutaneous (SQ) Line

Order:

Special Instructions:

Start Date: ...

Stop Date: ...

Insert small gauge IV needle for SQ access
directly under the skin (abdomen or thigh)
For injecting small volumes of medications when oral route unavailable
Comfort Care Order
Start Date: Now
Stop Date: T+21

Accept Order

Quit

IV Fluids Bolus: Review

Infusion Order

Solutions	Additives	Solution/Additive*	Volume/Strength*
		DEXTROSE 5% IN 0.45% SALINE INJ,SOLN	1000 ML

Comments: Give over six hours: Comfort Care Order

Route*: (Expanded Med Route List) Type*: (IV Type Help) Schedule*: PRN Infusion Rate (ml/hr)*: 150

Priority*: ROUTINE Duration or Total Volume (Optional): 1000 ml

* Indicates a Required Field

DEXTROSE 5% IN 0.45% SALINE INJ,SOLN 1000 ml 150 ml/hr with total volume 1000ml

Give over six hours: Comfort Care Order

Accept Order

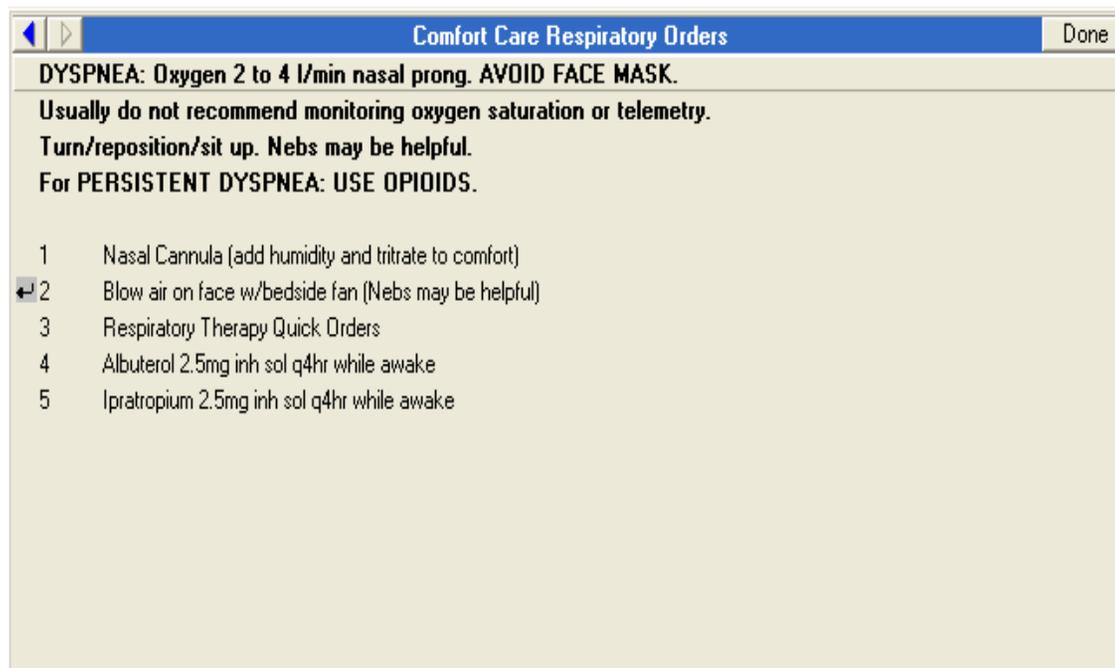
Quit

May Choose Different Fluids

The screenshot shows a software window titled "Infusion Order" with a blue border and a close button in the top right corner. The window is divided into several sections:

- Solutions/Additives List:** A list of fluids is shown on the left, including "1/2 NORMAL SALINE", "1/2 NS", "1/2NS", "AA", "ALBUMIN 25% INJ", "ALBUMIN 5% INJ", "ALCOHOL 5%/DEXTROSE 5% INJ,S", "AMINO ACIDS 10% INJ", and "AMINO ACIDS 10% PLUS STND LY1". Each item has a small arrow next to it, indicating it can be selected.
- Solution/Additive* and Volume/Strength*:** Two empty text input fields for specifying the fluid and its concentration.
- Comments:** A text area for notes, with a "Remove" button to its right.
- Route*:** A dropdown menu currently showing an empty field.
- Type* (IV Type Help):** A dropdown menu currently showing an empty field.
- Schedule*:** A dropdown menu currently showing an empty field.
- PRN:** A checkbox that is currently unchecked.
- Infusion Rate (ml/hr)*:** A text input field with a dropdown arrow on the right.
- Priority*:** A dropdown menu currently showing "ROUTINE".
- Duration or Total Volume (Optional):** Two text input fields for specifying the duration or volume.
- * Indicates a Required Field:** A note at the bottom left.
- Buttons:** "Accept Order" and "Quit" buttons are located at the bottom right.

Oxygen and Respiratory Therapy



Comfort Care Respiratory Orders Done

DYSPNEA: Oxygen 2 to 4 l/min nasal prong. AVOID FACE MASK.

Usually do not recommend monitoring oxygen saturation or telemetry.

Turn/reposition/sit up. Nebes may be helpful.

For PERSISTENT DYSPNEA: USE OPIOIDS.

- 1 Nasal Cannula (add humidity and tritrate to comfort)
- 2 Blow air on face w/bedside fan (Nebes may be helpful)
- 3 Respiratory Therapy Quick Orders
- 4 Albuterol 2.5mg inh sol q4hr while awake
- 5 Ipratropium 2.5mg inh sol q4hr while awake

Oxygen Nasal Cannula Default

Nasal Oxygen

Order:

Special Instructions:

Special Instructions:

Start Date:

Stop Date:

NASAL OXYGEN 2-4L/M - Nasal Cannula
For patient comfort avoid face mask
Comfort Care Order
Start Date: Now
Stop Date: T+7

Accept Order

Quit

Neb Therapy: If Improves Comfort

Medication Order [X]

ALBUTEROL SOLN,INHL [Change]

If for PRN use enter an Indication for Use in the *Comments* field [Insert Row] [Remove Row]

Complex	Dosage	Route	Schedule	Duration (opt)	Admin. Times	then/and
	1 VIAL (3ML) - 0.083%	INHALATIO	RESP-Q6H	3 DAYS	03-09-15-21	

Comments: for respiratory hand-held nebulizer treatments

Give additional dose now

Priority: ROUTINE

Expected First Dose: TODAY (Oct 13, 09) at 15:00

ALBUTEROL SOLN,INHL 0.083%
1 VIAL (3ML) INHL RESP-Q6H FOR 3 DAYS for respiratory hand-held nebulizer treatments

[Accept Order] [Quit]

Bed Side Fan for Air Flow

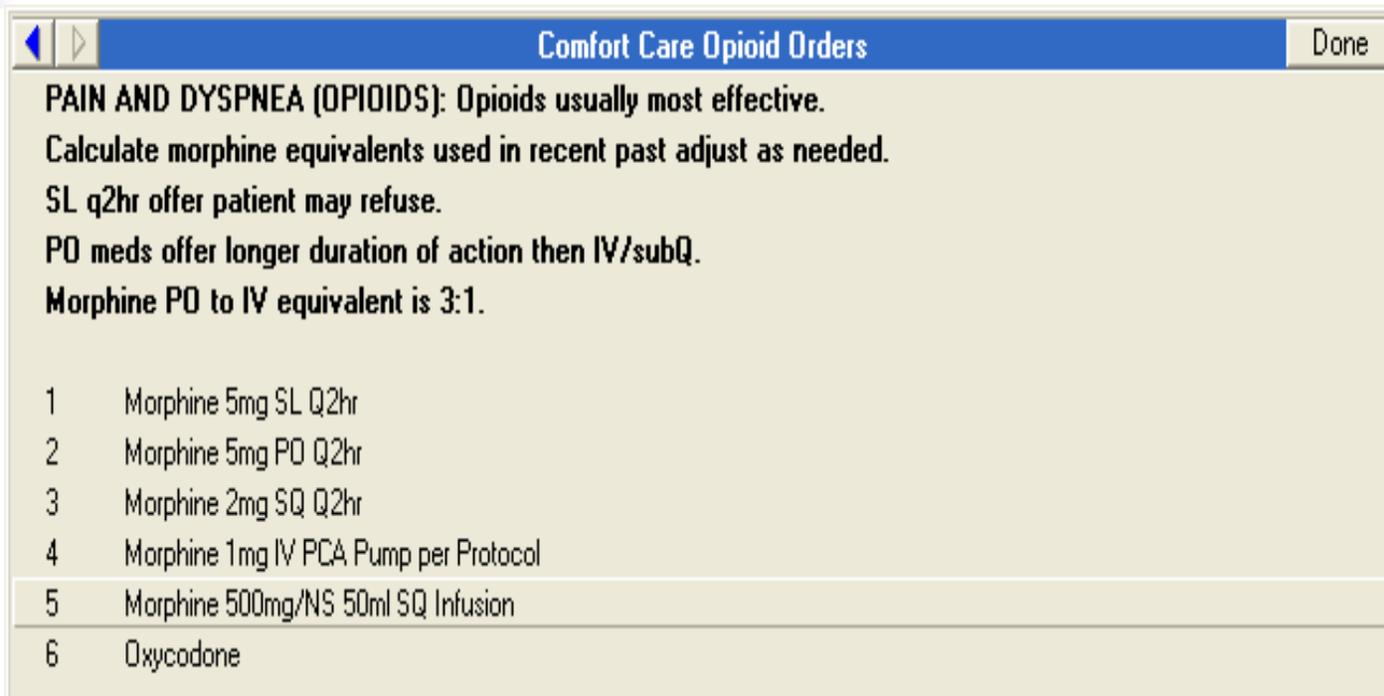
The screenshot shows a software window titled "Fan for patient room" with a blue title bar and a close button in the top right corner. The main area contains the following fields:

- Special Instructions:
- Order Start: ...
- Order Stop: ...

At the bottom of the window, there is a summary section with a scrollable text area on the left and two buttons on the right:

- Summary text: Blow air on face with bedside Fan
Comfort Care Order
Order Start: N
Order Stop: T+21
- Buttons: Accept Order, Quit

Most Patients at Life's End have Pain or Dyspnea and Need an Opioid



Comfort Care Opioid Orders Done

PAIN AND DYSPNEA (OPIOIDS): Opioids usually most effective.
Calculate morphine equivalents used in recent past adjust as needed.
SL q2hr offer patient may refuse.
PO meds offer longer duration of action then IV/subQ.
Morphine PO to IV equivalent is 3:1.

- 1 Morphine 5mg SL Q2hr
- 2 Morphine 5mg PO Q2hr
- 3 Morphine 2mg SQ Q2hr
- 4 Morphine 1mg IV PCA Pump per Protocol
- 5 Morphine 500mg/NS 50ml SQ Infusion
- 6 Oxycodone

Oral Morphine Solution

Example of Offer May Refuse

Medication Order [X]

MORPHINE SULFATE CONCENTRATED SOLN,CONC [Change]

**** CONCENTRATED ****

Dosage	Complex	Route	Schedule (Day-Of-Week)	PRN
5MG/0.25ML		SUBLINGUAL	Q2HR	<input type="checkbox"/>
5MG/0.25ML	0.030075	NG TUBE/ORAL	PC	
10MG/0.5ML	0.06015	TOPICAL	PC&HS	
20MG/1ML	0.1203	ORAL	Q MONTH	
30MG/1.5ML	0.18045	SUBLINGUAL	Q10MIN	
40MG/2ML	0.2406		Q12HR	
			Q15MIN	
			Q18H	
			Q1HR	
			Q24HR	
			Q2HR	
			Q-2WEEKS	
			Q30 MINS	
			Q3D	
			Q3HR	
			Q-3WEEKS	
			Q48HR	
			Q4HR	

Comments: Offer-patient may refuse; for pain or dyspnea or RR >20.

Give additional dose now

Admin Time: 0200-0400-0600-0800-1000-1200-1400-1600-1800-2000-2200-2400

Expected First Dose: TODAY (Aug 07, 10) at 14:00

Enter exact dose/freq; no range orders permitted

MORPHINE SULFATE CONCENTRATED SOLN,CONC

5MG/0.25ML SL Q2HR Offer-patient may refuse; for pain or dyspnea or RR >20.

Priority: ROUTINE

Accept Order [Quit]

Patient May Need Parental Medication if Problem Swallowing

Medication Order [X]

MORPHINE INJ [Change]

If for PRN use enter an Indication for Use in the "Comments" field

Dosage / Rate	Complex	Route	Schedule (Day-Of-Week)	PRN
2MG/0.5ML		INTRAVENOUS	Q2H	<input type="checkbox"/>
1MG/0.25ML	0.173	INTRAVENOUS	PC&HS	
2MG/0.5ML	0.346	INTRAMUSCULAR	PM	
3MG/0.75ML	0.519	IRRIGATION	PRN	
4MG/1ML	0.692	SUBCUTANEOUS	Q12H	
5MG/0.5ML	0.3875	INTRARTICULAR	Q12H PRN	
6MG/0.6ML	0.465		Q18H	
7MG/0.7ML	0.5425		Q1H	
8MG/0.8ML	0.62		Q1H PRN	
10MG/1ML	0.775		Q24H	
15MG/1ML	0.537		Q2H	
15MG/1ML	5.51		Q2H PRN	
30MG/2ML	11.02		Q2WEEKS	
			Q36H	
			Q3H	
			Q3H PRN	
			Q3MIN PRN	
			Q3-MINX3 PRN/CP	
			Q3WEEKS	
			Q48H	
			Q4H	
			Q4H PRN	
			Q4WEEKS	
			Q5MIN PRN	
			Q6H	

Comments: Comfort Care Order: Offer - Patient may refuse: for pain or dyspnea or RR>20.

Give additional dose now

Admin Time: 01-03-05-07-09-11-13-15-17-19-21-23

Expected First Dose: TODAY (Oct 14, 09) at 13:00

MORPHINE INJ
2MG/0.5ML IV Q2H Comfort Care Order: Offer - Patient may refuse: for pain or dyspnea or RR>20.

Priority: ROUTINE

Accept Order [Quit]

Pain Pump Continuous Rate: NO PCA if Unable to Push Button

Medication Order [Close]

MORPHINE SULFATE PCA INJ [Change]

Dosage	Complex	Route	Schedule (Day-Of-Week)
1MG/1ML		SUBCUTANEOUS	5XD PRN
1MG/1ML	4.7616	INTRAVENOUS	AC
2MG/2ML	9.5232	INTRAMUSCULAR	AC&HS
5MG/1ML	5.921	NASAL	BID
10MG/2ML	11.842	SUBCUTANEOUS	BID (0800-1200)
			BID (ANTI-DIABETIC)
			BID (NITRATES)
			BID (WITH-MEALS)
			DAILY
			EVERY OTHER DAY
			FR
			HS
			MO
			MO-FR
			MO-TU-WE
			MO-WE-FR
			NOW
			...

Comments: Offer-patient may refuse; for pain or dyspnea or RR >20. Give 1mg Q15min
IV via PCA Pump.
Basal rate: _____ mg/hr
PCA: _____ mg/_____ min

Give additional dose now

Priority: ROUTINE

Enter exact dose/freq; no range orders permitted

MORPHINE SULFATE PCA INJ
1MG/1ML SC PRN Offer-patient may refuse; for pain or dyspnea or RR >20. Give 1mg Q15min
IV via PCA Pump.

[Accept Order] [Quit]

Haloperidol is helpful for: Delirium and Nausea/Vomiting

NAUSEA and DELIRIUM

~~~~~ **Up to 65 years old** ~~~~~

- 1 Haloperidol 2mg PO Q2H x3 THEN Q6H PRN
- 2 Haloperidol 1mg SQ Q2H x3 THEN Q6H PRN

~~~~~ **Greater than 65 years old** ~~~~~

- 3 Haloperidol 1mg PO Q2H x3 THEN Q6H PRN
- 4 Haloperidol 0.5mg SQ Q2H x3 THEN Q6H PRN

Click on done to exit
Click on the blue arrow to return to the previous menu.
Click here to continue to the Anxiety/Seizure Orders

Linking Laxative Therapy to Opioid Therapy

Comfort Care Opioid Orders

PAIN AND DYSPNEA (OPIOIDS): Opioids usually most effective.
Calculate morphine equivalents used in recent past adjust as needed.
SL q2hr offer patient may refuse.
PO meds offer longer duration of action then IV/subQ.
Morphine PO to IV equivalent is 3:1.

- 1 Morphine 5mg SL Q2hr
- 2 Morphine 5mg PO Q2hr
- 3 Morphine 2mg SQ Q2hr
- 4 Morphine 1mg IV PCA Pump per Protocol
- 5 Morphine 500mg/NS 50ml SQ Infusion
- 6 Oxycodone

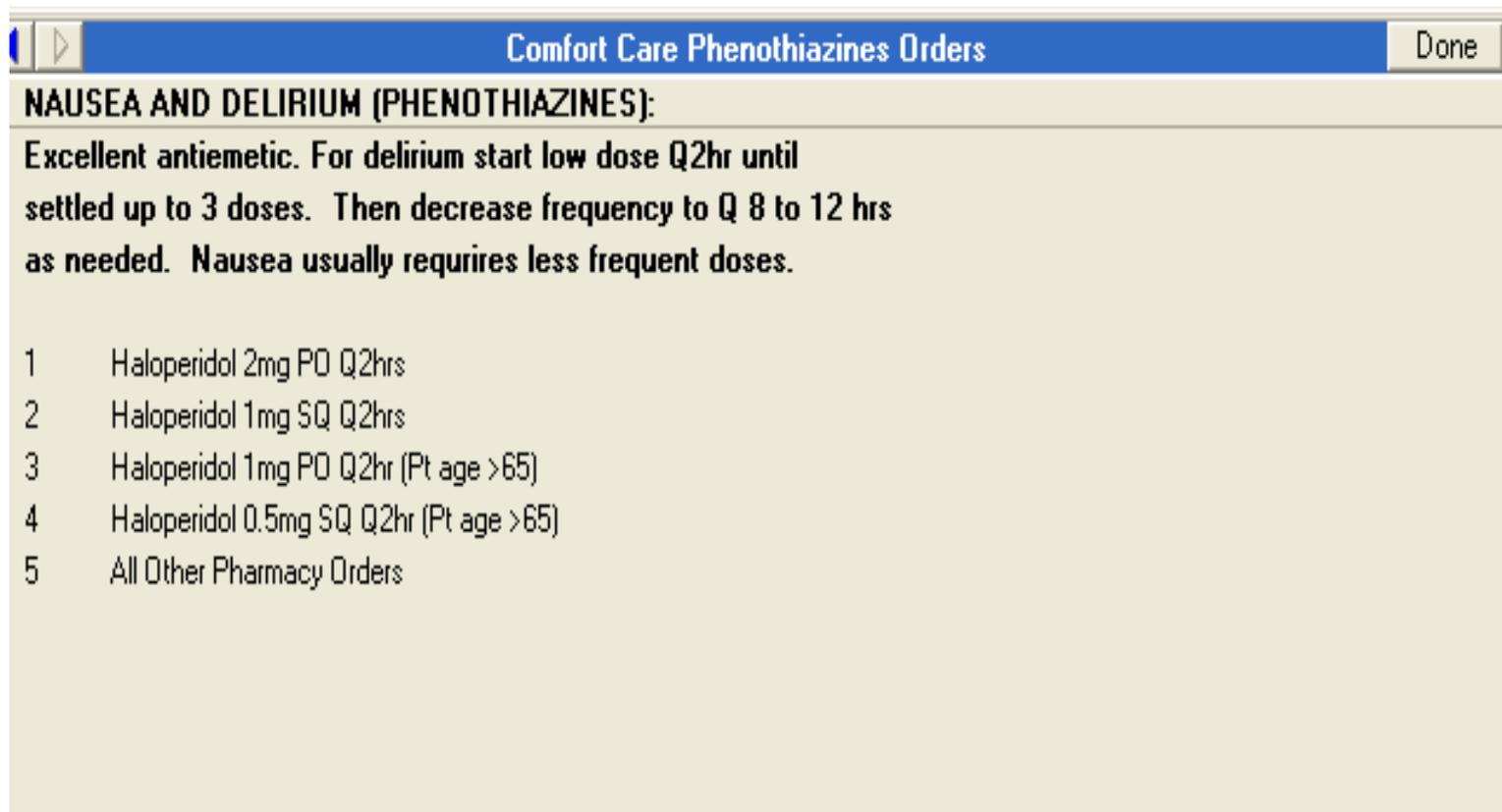
CONSTIPATION: Initiate if on opioids or no BM x 2 days.

- 7 Please check for impaction
- 8 Bisacodyl 5mg PO BID
- 9 Sennosides 17.2mg PO BID (may crush)
- 10 Docusate 250mg PO BID
- 11 MOM 30ml PO DAILY PRN constipation
- 12 Lactulose 30gm/45ml DAILY
- 13 Bisacodyl SUPP 10MG PR DAILY PRN
- 14 FLeets enema PR DAILY PRN

CONSTIPATION: Initiate if on opioids or no BM x 2 days.

- 7 Please check for impaction
- 8 Bisacodyl 5mg PO BID
- 9 Sennosides 17.2mg PO BID (may crush)
- 10 Docusate 250mg PO BID
- 11 MOM 30ml PO DAILY PRN constipation
- 12 Lactulose 30gm/45ml DAILY
- 13 Bisacodyl SUPP 10MG PR DAILY PRN
- 14 FLeets enema PR DAILY PRN

Different Routes and Doses Depending on Age and Patient



Comfort Care Phenothiazines Orders Done

NAUSEA AND DELIRIUM (PHENOTHIAZINES):

Excellent antiemetic. For delirium start low dose Q2hr until settled up to 3 doses. Then decrease frequency to Q 8 to 12 hrs as needed. Nausea usually requires less frequent doses.

- 1 Haloperidol 2mg PO Q2hrs
- 2 Haloperidol 1mg SQ Q2hrs
- 3 Haloperidol 1mg PO Q2hr (Pt age >65)
- 4 Haloperidol 0.5mg SQ Q2hr (Pt age >65)
- 5 All Other Pharmacy Orders

Haloperidol is helpful for: Delirium and Nausea/Vomiting

Medication Order [Close]

HALOPERIDOL INJ.SOLN [Change]

If for PRN use enter an Indication for Use in the "Comments" field [Insert Row] [Remove Row]
(Day-Of-Week)

| Dosage | Complex | Route | Schedule | Duration (opt) | Admin. Times | then/and |
|-----------|---------|-----------|----------|----------------|-------------------|----------|
| 1MG/0.2ML | | INTRA VEN | Q2H | 6 HOURS | 01-03-05-07-09-11 | THEN |
| 1MG/0.2ML | | INTRA VEN | Q6H PRN | | | |

Comments: Up to 3 doses total or until settled then Q6H PRN for nausea/delirium. Not to exceed 3 doses (3mg) in 24 hours without notifying provider (Comfort Care Order)

Give additional dose now

Priority: ROUTINE

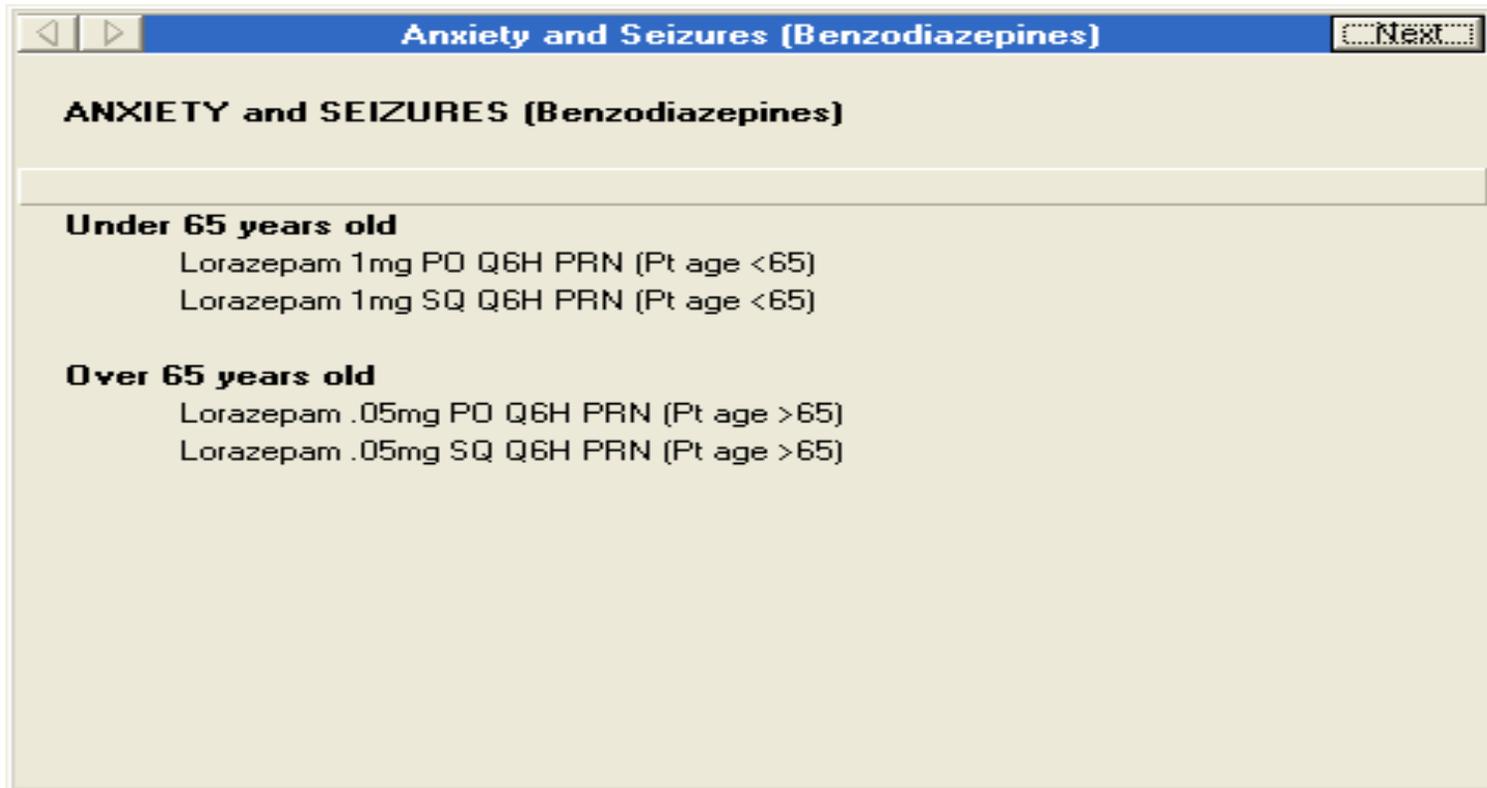
Expected First Dose: TODAY (Oct 14, 09) at 13:00

HALOPERIDOL INJ.SOLN
1MG/0.2ML IV Q2H FOR 6 HOURS THEN 1MG/0.2ML IV Q6H PRN Up to 3 doses total or until settled then Q6H PRN for

[Accept Order] [Quit]

Lorazepam for Anxiety and Seizure

Note Different Routes/Doses for Ages



The screenshot shows a software window with a blue title bar containing the text "Anxiety and Seizures (Benzodiazepines)" and a "Next" button. Below the title bar, the main content area has a header "ANXIETY and SEIZURES (Benzodiazepines)". The content is organized into two sections: "Under 65 years old" and "Over 65 years old". Each section lists two dosing regimens for Lorazepam: one for oral (PO) and one for sublingual (SQ) administration, both at a frequency of Q6H PRN.

ANXIETY and SEIZURES (Benzodiazepines)

Under 65 years old

- Lorazepam 1mg PO Q6H PRN (Pt age <65)
- Lorazepam 1mg SQ Q6H PRN (Pt age <65)

Over 65 years old

- Lorazepam .05mg PO Q6H PRN (Pt age >65)
- Lorazepam .05mg SQ Q6H PRN (Pt age >65)

Lorazepam orders

SQ; PRN; Delirium Warning

Medication Order [Close]

LORAZEPAM INJ [Change]

Display Restrictions/Guidelines

| Dosage | Complex | Route | Schedule (Day-Of-Week) |
|--------------|---------|-----------------|--------------------------------------|
| 1MG/0.5ML | | INTRAVENOUS | Q6H PRN <input type="checkbox"/> PRN |
| 0.5MG/0.25ML | 0.39825 | INTRAMUSCULAR | Q3MIN PRN |
| 1MG/0.5ML | 0.7965 | INTRAVENOUS | Q3-MINX3 PRN/CP |
| 2MG/0.5ML | 1.1795 | IRRIGATION | Q3WEEKS |
| 4MG/1ML | 2.359 | SUBCUTANEOUS | Q48H |
| | | INTRA-ARTICULAR | Q4H |
| | | | Q4H PRN |
| | | | Q4WEEKS |
| | | | Q5MIN PRN |
| | | | Q6H |
| | | | Q6H PRN |
| | | | Q72H |
| | | | Q8H |
| | | | Q8H PRN |
| | | | Q96H |
| | | | QAM |
| | | | QAM INSULIN |
| | | | QHS |
| | | | QHS PRN |
| | | | QID |
| | | | QID PRN |
| | | | QPM |
| | | | QPM INSULIN |
| | | | RESP-BID |
| | | | RESP-Q6H |
| | | | RESP-Q6H PRN |
| | | | RESP-QID |

Comments: For anxiety or seizure (Comfort Care Order)
Note: Delirium may be mistaken for anxiety. If delirium suspected, see Haloperidol orders.

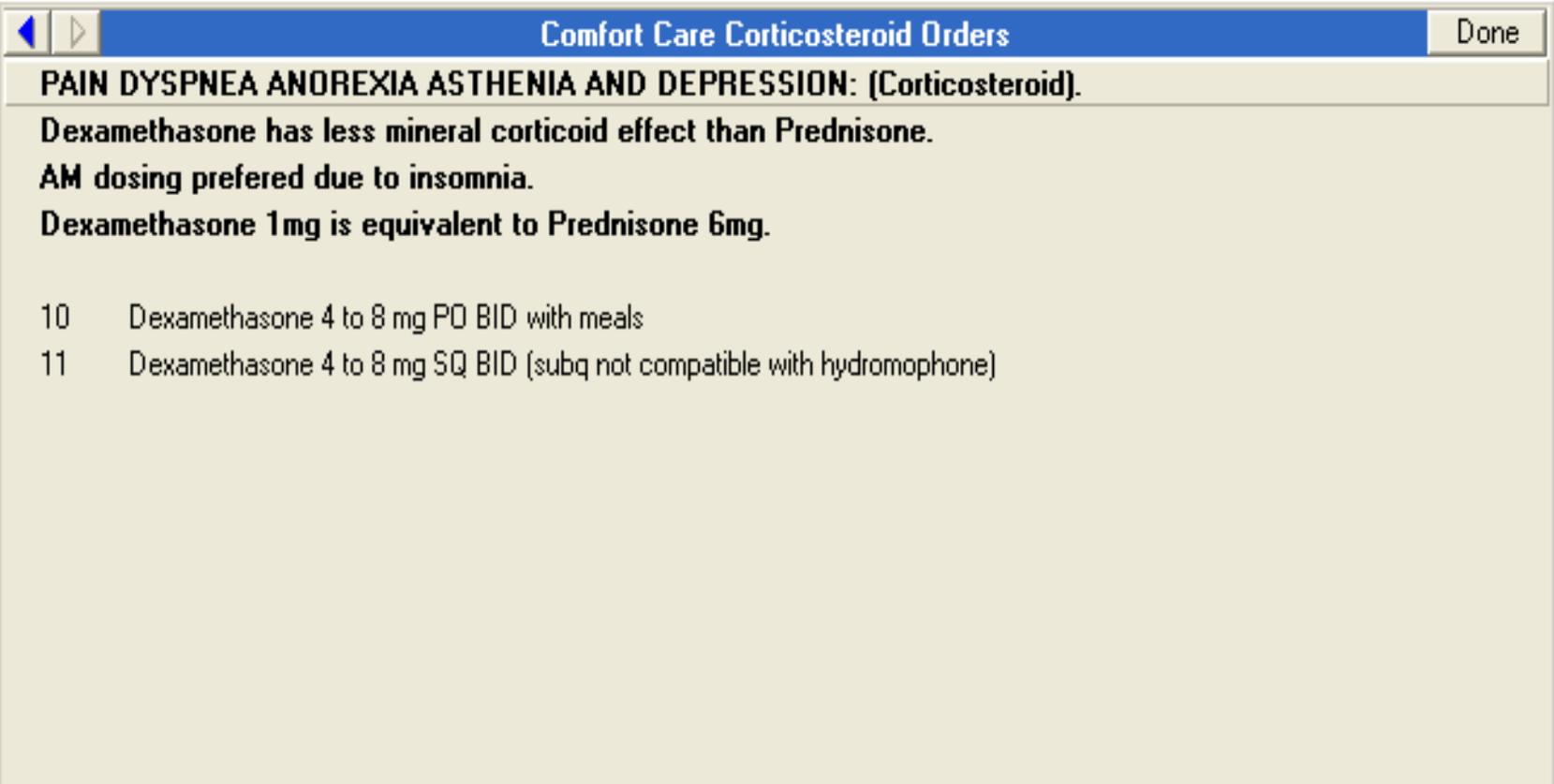
Give additional dose now

Priority: ROUTINE

LORAZEPAM INJ
1MG/0.5ML IV Q6H PRN For anxiety or seizure (Comfort Care Order)
Note: Delirium may be mistaken for anxiety. If delirium suspected, see

Accept Order [Quit]

Corticosteroids Often Help Multiple Symptoms



PAIN DYSPNEA ANOREXIA ASTHENIA AND DEPRESSION: (Corticosteroid).

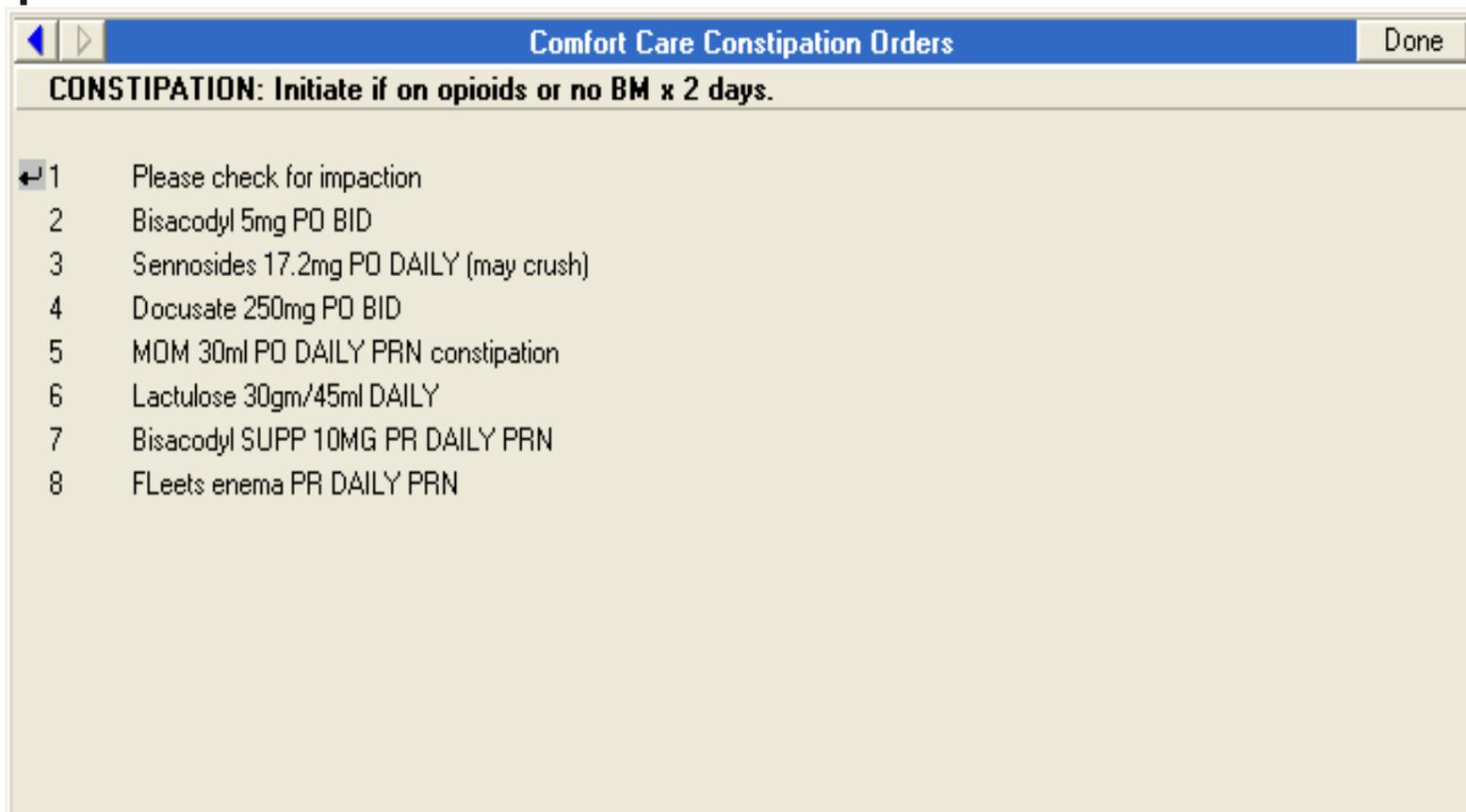
Dexamethasone has less mineral corticoid effect than Prednisone.

AM dosing preferred due to insomnia.

Dexamethasone 1mg is equivalent to Prednisone 6mg.

- 10 Dexamethasone 4 to 8 mg PO BID with meals
- 11 Dexamethasone 4 to 8 mg SQ BID (subq not compatible with hydromophone)

Constipation

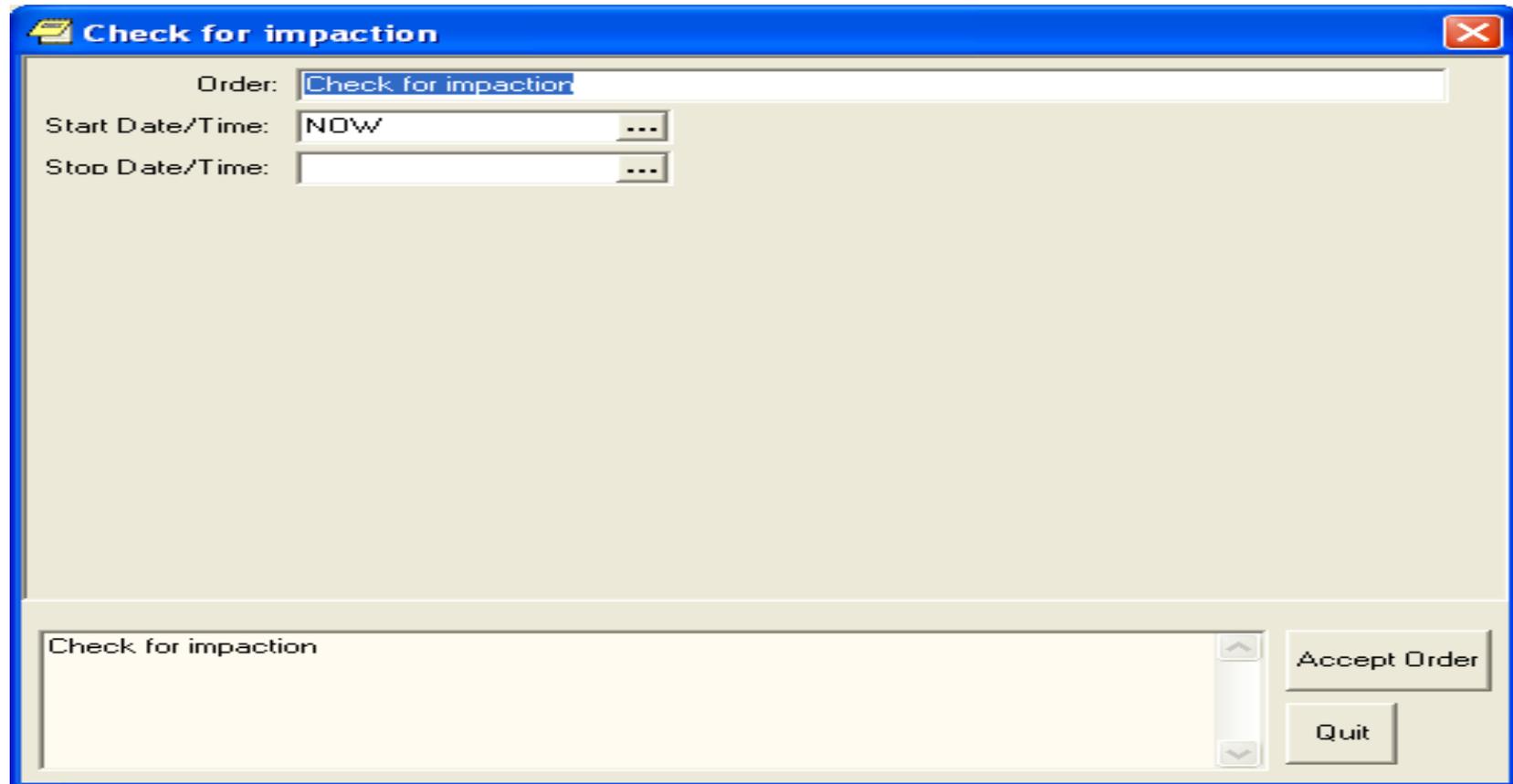


Comfort Care Constipation Orders Done

CONSTIPATION: Initiate if on opioids or no BM x 2 days.

- 1 Please check for impaction
- 2 Bisacodyl 5mg PO BID
- 3 Sennosides 17.2mg PO DAILY (may crush)
- 4 Docusate 250mg PO BID
- 5 MOM 30ml PO DAILY PRN constipation
- 6 Lactulose 30gm/45ml DAILY
- 7 Bisacodyl SUPP 10MG PR DAILY PRN
- 8 FLeets enema PR DAILY PRN

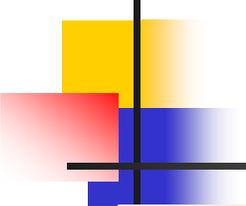
Constipation



The image shows a screenshot of a software dialog box titled "Check for impaction". The dialog box has a blue title bar with a close button (X) in the top right corner. The main area is light beige and contains the following fields:

- Order:** A text field containing "Check for impaction".
- Start Date/Time:** A text field containing "NOW" with a three-dot menu icon to its right.
- Stop Date/Time:** An empty text field with a three-dot menu icon to its right.

At the bottom of the dialog box, there is a list box containing the text "Check for impaction". To the right of the list box is a vertical scrollbar. Below the list box are two buttons: "Accept Order" and "Quit".



For Death Rattle

Comfort Care Death Rattle Orders Done

DEATH RATTLE: Keep back of throat dry by turning head to side.

Stop IVF or tube feeding.

- 1 Scopolamine patch behind ear Q 3 days
- 2 Atropine drops in back of throat Q4hr PRN
- 3 Glycopyrrolate 0.2/ml IV Q6hr
- 4 Glycopyrrolate 0.2/ml SUBQ Q6hr
- ← 5 Yankauer suction to bedside. Avoid deep suctioning
- ← 6 Cleanse mouth with Spongettes Q4hrs. Instruct family how to use.

For Death Rattle

Medication Order [Change]

SCOPOLAMINE PATCH

| Dosage | Complex | Route | Schedule (Day-Of-Week) |
|----------------------|---------|------------------------|--|
| 1 PATCH 0.33MG/24HRS | | TOPICAL | Q24H <input type="checkbox"/> PRN |
| 1 PATCH 0.33MG/24HRS | NF | TRANSDERMAL
TOPICAL | PC SUPPER
PC&HS
PM
PRN
Q12H
Q12H PRN
Q18H
Q1H
Q1H PRN
Q24H
Q2H
Q2H PRN
Q2WEEKS
Q36H
Q3H
Q3H PRN
Q3MIN PRN
Q3-MINX3 PRN/CP
Q3WEEKS
Q48H
Q4H
Q4H PRN
Q4WEEKS
Q5MIN PRN
Q6H
Q6H PRN
Q72H
Q8H
Q8H PRN |

Comments:

Give additional dose now

Admin Time: 08

Expected First Dose: TOMORROW (Oct 15, 09) at 08:00

Priority: ROUTINE

SCOPOLAMINE PATCH 0.33MG/24HRS
1 PATCH TOP Q24H

Accept Order
Quit

Additional Comfort Orders

Comfort Care Additional Comfort Orders Done

Please schedule medication if symptoms are continuous.

Fever:

- 1 Acetaminophen tab 650mg po q 4hr prn
- 2 Acetaminophen supp 650mg pr q 4hr prn

Insomnia:

- 3 Trazodone 25mg po qhs prn

Dry eyes:

- 4 Methylcellulose 0.4% opth sol 2 gtts each eye q6hr
- 5 Lacri Lube opth oint thin ribbon of Lacri Lube both eyes 6qhr

Sore mouth:

- 6 Mylanta benedryl lidocaine visc susp 30cc po ac prn
- 7 Cetylpyridinium mouthwash 1 rinse of 0.05% topical qid prn

Thrush:

- 8 Nystatin 100000UT /ml 5ml po qid x 7d

Sore throat:

- 9 Phenol spray 1.4% 2puffs of 1.4% qid

Cough:

- 10 Guaifenesin 100mg/5ml po q6hr

Hiccoughs:

- 11 Baclofen 10mg po tid prn
- 12 Chlorpromazine 25mg po q6hr prn

Dyspepsia:

- 13 Maalox plus extr str 30ml po q6hr prn
- 14 Ranitidine 150mg po bid
- 15 Omeprazole 20mg po qd

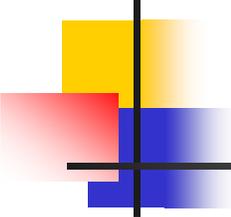
Diarrhea:

Call MD for Lomotil & C.Diff orders.

- 16 Pepto Bismol 262mg qid prn

Dysuria:

- 17 Phenazopyridine 100mg po tid x 2d



Consider Consults

Comfort Care Consult Orders Done

Consults to Consider:

- 1 Social Work Consult
- 2 Chaplain Consult
- 3 Palliative Care Consult
- 4 Pharmacy
- 5 Geriatric
- 6 [Mental Health](#)
- 7 Physical Therapy
- 8 Occupational Therapy
- 9 Speech Consult
- 10 Wound Care/Skin Risk Mgmt. Consult
- 11 All Other Consults