



# HYDRomorphone Continuous Infusion High Alert

K07002307 Jun/7/2002 M  
SCA, TEST Visit  
ER0000145/12 HCN: 22222222  
Van den Hof, TEST / TEST, Maureen  
Dec/8/2012

Patient: \_\_\_\_\_

Alert Record Reviewed  No Allergies Known

Allergies-Adverse Reactions-Cautions: \_\_\_\_\_

Age \_\_\_\_\_ Patient's Weight \_\_\_\_\_ kg Date of Patient's Weight \_\_\_\_\_

DIAGNOSIS: \_\_\_\_\_

Items preceded by a **bullet (•)** are active orders. Items preceded by a **checkbox ( )** are only actioned if checked (✓)

### For infants less than 6 months:

- **HYDRomorphone** infusion must be prescribed by qualified specialist as per institutional policy.

### MEDICATIONS

- Discontinue all previous opioid medications
- Use standard **HYDRomorphone** concentration according to weight:
  - 20 kg and less: 0.05 mg/mL (or 50 micrograms/mL)
  - Greater than 20 kg: 0.2 mg/mL (or 200 micrograms/mL)

*Initial bolus dose:*

**HYDRomorphone** (usual range 2 to 8 micrograms/kg/dose) \_\_\_\_\_ micrograms/kg/dose IV x 1 dose

*Continuous infusion:*

- **HYDRomorphone** (usual range 2 to 8 micrograms/kg/hour) \_\_\_\_\_ micrograms/kg/hour IV

*Breakthrough doses:*

**HYDRomorphone** (usual range 2 to 8 micrograms/kg/dose or hourly dose) \_\_\_\_\_ micrograms/kg/dose IV every 30 minutes PRN

### MONITORING

- Continuous pulse oximetry for first 24 hours. After first 24 hours, monitor when asleep or unattended and PRN: Notify most responsible prescriber if oxygen saturation is less than 94% and/or if oxygen requirements increase
- Heart rate, respiratory rate and depth, and sedation scale (while awake) Q1H for 24 hours after initiation or dose increase then Q2H unless respiratory rate is below limit (see reverse) or if breathing is shallow
- Blood pressure and pain assessment Q4H

**If patient has a sedation score of 3 or higher OR respiratory rate is less than \_\_\_\_\_ breaths/minute (see reverse for age-appropriate limits):**

- Stimulate/rouse patient and encourage breathing
- STOP **HYDRomorphone** infusion
- Apply oxygen at 6 to 10L by face mask, check pulse oximetry
- Call most responsible prescriber and respiratory therapist

**If patient is unarousable AND/OR oxygen saturation is less than 90% with oxygen:**

- Call code blue
- STOP **HYDRomorphone** infusion
- Begin resuscitation and give naloxone
- Naloxone:  \_\_\_\_\_ mg (0.01 mg/kg/dose) IV (for patients less than 8 kg) every 2 to 3 minutes PRN
- 0.1 mg IV (for patients 8 to 14.9 kg) every 2 to 3 minutes PRN
- 0.2 mg IV (for patients 15 to 24.9 kg) every 2 to 3 minutes PRN
- 0.3 mg IV (for patients 25 to 34.9 kg) every 2 to 3 minutes PRN
- 0.4 mg IV (for patients greater than or equal to 35 kg) every 2 to 3 minutes PRN
- Stat page most responsible prescriber

DATE (yyyy/MON/dd) Time (24hour/hh:mm) Verified By (Signature) Printed Surname

DATE (yyyy/MON/dd) Time (24hour/hh:mm) Verified By (Signature) Printed Surname

Note: Page 2 contains Clinician Information



## HYDROmorphine Continuous Infusion High Alert

K07002307 Jun/7/2002 M  
SCA, TEST Visit  
ER0000145/12 HCN: 22222222  
Van den Hof, TEST / TEST, Maureen  
Dec/8/2012

### Respiratory Rate Limits

Age	Respiratory Rate (breaths/minute)
Less than 6 months	30
6 to 12 months	20
1 to 2 years	16
2 to 10 years	10
11 years and older	8

### Sedation Scale

1	None	Alert
2	Mild	Occasionally drowsy, easy to arouse
3	Moderate	Frequently drowsy, easy to arouse
4	Severe	Somnolent, difficult to arouse
5	Sleep	Normal sleep