

DRUG ALLERGIES / SENSITIVITIES	
Medication	Reaction
1	
2	
3	

STAT NOW

All orders will be carried out unless crossed off. Any order with a blank or check box must be individually addressed.
ORDERS CANNOT BE PROCESSED WITHOUT THE ABOVE INFORMATION COMPLETED

Scan check initials

Date/Time

1. Weight in kg:
 2. Allergies: NKA others
 3. Time of last Sedation/Paralytic bolus prior to departure:

4. Sedation/Paralytic regimen:
 To be given every 30 minutes en route beginning 30 min after last dose given in OGH ED
****IT IS STRONGLY RECOMMENDED THAT SEDATION BE GIVEN CONCURRENTLY WITH EACH DOSE OF PARALYTIC**

SELECT 1 (or more if combining opiate and benzodiazepine therapy) FROM TABLE A AND 1 FROM TABLE B

Table A

Ativan (lorazepam) _____ mg IV bolus every _____ minutes

Valium (diazepam) _____ mg IV bolus every _____ minutes

Versed (midazolam) _____ mg IV bolus every _____ minutes

Sublimaze (fentanyl) _____ mcg IV bolus every _____ minutes

Other _____

Table B (dosage table below)

Zemuron (rocuronium) _____ mg IV bolus every _____ minutes

Norcuron (vecuronium) _____ mg IV bolus every _____ minutes

Other _____

Recommended Paralytic dose for every 30 minute dosing:

Zemuron (0.6 mg/Kg):		Vecuronium (0.1 mg/Kg)	
<u>Weight (Kg)</u>	<u>Dose I</u>	<u>Weight (Kg)</u>	<u>Dose IV</u>
40-44.....	25 mg	40-45.....	4 mg
45-53.....	30 mg	46-54.....	5 mg
54-62.....	35 mg	55-65.....	6 mg
63-69.....	40 mg	66-75.....	7 mg
70-77.....	45 mg	76-85.....	8 mg
78-85.....	50 mg	86-95.....	9 mg
86-93.....	55 mg	>95.....	0 mg
94-100.....	60 mg		
101-110.....	65 mg		
111-118.....	70 mg		
119-127.....	75 mg		
> 128.....	80 mg*		

5. Call for medical direction immediately if patient develops hypotension or other significant vital sign changes, signs of allergic reaction, or appears to be regaining motor function/consciousness before next dose of sedation and paralytic is scheduled.

INITIAL Verbal/Telephone Order read-back. VORB

Physician Signature: _____

Noted by: _____ Date: _____ Time: _____

Trans Am Ambulance Services Inc.
Olean NY

Routine Physician Orders
 Sedation transfer orders for adult patients
 Requiring Mechanical Ventilation