

COMFORT CARE ORDERS – ADULT

CODE STATUS

REMINDER: For DNAR status complete separate DNAR Physician Order Set

NURSING

- Comfort Care - End of Life
 - Discontinue routine vital signs
 - Discontinue all routine imaging
 - Discontinue all routine labs
 - Discontinue all monitoring
 - Discontinue enteral feeding
 - Discontinue endotracheal tube – Extubate
- Place in private room when appropriate
- RN may pronounce death per policy
- Suction oral secretions only for severe symptomatic throat secretions Prn
- Oral care Q 2 Hrs
- Insert indwelling urinary catheter; Reason: Comfort Care
- Apply condom catheter Prn incontinence

RESPIRATORY

- Apply O2 with Defined Parameters: O2 1-4 L/min via NC Prn SOB/dyspnea. Titrate to pt comfort

IV FLUIDS

- Sodium Chloride 0.9% IV to run at 20 mL/Hr
- Dextrose 5% IV to run at 20 mL/Hr

MEDICATIONS

- Discontinue all previously ordered medications. Pharmacist to discontinue ALL previously ordered medications - comfort measures only

Analgesic medications *Physician to select **ONE** drug only*

REMINDER: For PCA orders – Use appropriate PCA SS

REMINDER: For IV methadone – Use IV methadone SS

- MorphINE 2 mg IV Push Q 1 Hr Prn RR > 20, HR > 100, grimacing, agitation, or Riker scale > 2. Max = 10 mg/24 Hrs. Contact MD if max dose is reached and pt needs more pain meds.
- HYDROMorphone 0.5 mg IV Push Q 1 Hr Prn RR > 20, HR > 100, grimacing, agitation, or Riker scale > 2. Max = 5 mg/24 Hrs. Contact MD if max dose is reached and pt needs more pain meds.
- FentaNYL Transmucosal Tab (Fentora) 100 mCg SL Q 1 Hr Prn RR > 20, HR > 100, grimacing, agitation, or Riker scale > 2. Max = 1,000 mCg/24 Hrs. Contact MD if max dose is reached and pt needs more pain meds.

CNS medications: Anxiolytics

- LORazepam (Ativan) 1 mg SUBL Q 2 Hrs Prn RR > 20, HR > 100, grimacing, agitation, or Riker scale > 2. If IV LORazepam is also ordered give LORazepam SUBL first.

****For patients > or = 65 years old, use 0.5 mg order**

- LORazepam 0.5 mg IV Push Q 1 Hr Prn RR > 20, HR > 100, grimacing, agitation, or Riker scale > 2 up to a total of 4 mg/24 Hrs Contact MD if goal not met with max dose.

****For patients < 65 years old, use 1 mg order**

- LORazepam (Ativan) 1 mg IV Push Q 1 Hr Prn RR > 20, HR > 100, grimacing, agitation, or Riker scale > 2 up to a total of 6 mg/24 Hrs. If SUBL LORazepam is also ordered give LORazepam SUBL first. Contact MD if goal not met with max dose.

CNS medications: Delirium Treatment

- RisperiDONE (Risperidal) ODT 1 mg SUBL at Bedtime.

COMFORT CARE ORDERS – ADULT V19 11.07.12. OK FOR PRINTING

MEDITECH NAME: COMFORT CARE ORDERS – ADULT

MEDITECH MNEMONIC: ST.COMFC

ZYNX= NONE

Sponsor: PEGGY DELMASTRO/BOYD/STERLING

V:\SJO Ordersets\Order Sets\MEDICAL INFECTIOUS DX\Hospice

- Haloperidol (Haldol) Liquid (2 mg/mL) 1 mg SUBL Q 4 Hrs Prn delirium. If pt unable to take SUBL may give IV (if ordered). Max dose = 8 mg/24 Hrs for patients < 65 Y/O, Max dose = 6 mg/24 Hrs for patients > or = 65 Y/O. Contact provider if goal not met with max dose.
- Haloperidol (Haldol) 0.5 mg IV Push Q 1 Hr Prn Mild-Moderate delirium until calmness achieved up to a total of 5 mg/24 Hrs. If SUBL Haloperidol is also ordered give Haloperidol SUBL first. Contact MD if goal not met with max dose. May give IM if no IV access.
- Haloperidol (Haldol) 1 mg IV Push Q 1 Hr Prn Severe delirium until calmness achieved up to a total of 9 mg/24 Hrs. If SUBL Haloperidol is also ordered give Haloperidol SUBL first. Contact MD if goal not met with max dose. May give IM if no IV access.

Respiratory medications: Secretion control *Physician to select **ONE** regimen*

**Secretion control Regimen #1

- Atropine 1% 3 drops SUBL Q 2 Hrs Prn secretions (OK to use *ophthalmic drops SUBL*) RN to request from pharmacy if needed.
- Scopolamine patch (Transderm Scōp) 1.5 mg topically to mastoid Q 72 Hrs Prn secretions if SUBL Atropine (if ordered) is ineffective after 3 doses. RN to request from pharmacy if needed. RN to contact pharmacy to switch this order to ATC once pt gets 1st patch placed.

**Secretion control Regimen #2

- Scopolamine patch (Transderm Scōp) 1.5 mg topically to mastoid Q 72 Hrs.
- Atropine 1% 3 drops SUBL Q 2 Hrs Prn secretions if Scopolamine patch (if ordered) is ineffective after 8 Hrs (OK to use *ophthalmic drops SUBL*) RN to request from pharmacy if needed.

GI medications: Anti-emetics

- Ondansetron ODT (Zofran) 8 mg SUBL Q 8 Hrs Prn N&V. Nursing to administer antiemetic medications in the following sequence (if ordered) if patient does not respond: Ondansetron ODT(Zofran), LORazepam SL (Ativan), ProCHLORperazine IV (Compazine), ProMETHazine IVPB (Phenergan). Note – must wait at least 30 mins after each dose to determine if previous drug was ineffective.
- LORazepam (Ativan) 1 mg SUBL Q 3 Hrs Prn N&V. May crush and mix with 2-3 mL of water if pt has dry mouth. Nursing to administer antiemetic medications in the following sequence (if ordered) if patient does not respond: Ondansetron ODT(Zofran), LORazepam SL (Ativan), ProCHLORperazine IV (Compazine), ProMETHazine IVPB (Phenergan). Note – must wait at least 30 mins after each dose to determine if previous drug was ineffective.
- ProCHLORperazine (Compazine) 10 mg IV Push Q 6 Hrs Prn N&V. Nursing to administer antiemetic medications in the following sequence (if ordered) if patient does not respond: Ondansetron ODT(Zofran), LORazepam SL (Ativan), ProCHLORperazine IV (Compazine), ProMETHazine IVPB (Phenergan). Note – must wait at least 30 mins after each dose to determine if previous drug was ineffective.
- ProMETHazine (Phenergan) 12.5 mg/50 mL Sodium Chloride 0.9% IVPB over 15 mins Q 6 Hrs Prn N&V. Nursing to administer antiemetic medications in the following sequence (if ordered) if patient does not respond: Ondansetron ODT(Zofran), LORazepam SL (Ativan), ProCHLORperazine IV (Compazine), ProMETHazine IVPB (Phenergan). Note – must wait at least 30 mins after each dose to determine if previous drug was ineffective.

GI medications: Other Anti-emetics

- Dexamethasone (Decadron) 20 mg Po Daily

GI medications: Laxatives/Stool Softeners/etc

- Senokot S (docusate 50 mg/sennosides 8.6 mg) 2 Tab Po BID. Hold for loose stool.
- Polyethylene glycol 3350 (MiraLAX) 17 Gm Po Daily Prn constipation. Mix in 4-8 oz of fluid.
- Bisacodyl suppository (Dulcolax) 10 mg PR Daily Prn constipation not relieved by MiraLAX (if ordered).
- Fleet enema adult 1 bottle (133 mL) PR Daily Prn constipation not relieved by MiraLAX and Dulcolax suppository (if ordered). (product contains phosphate salts)
- Sorbitol 30 mL Po Daily Prn constipation not relieved by MiraLAX, Dulcolax suppository and Fleets enema (if ordered).

- Diphenoxylate/Atropine (Lomotil) 2 Tabs Po Q 4 Hrs Prn diarrhea
- Maalox Plus (aluminum/magnesium/simethicone) 30 mL Po Q 4 Hrs Prn indigestion (product contains magnesium salt)

Other Medications:

- Acetaminophen Liquid 650 mg Po Q 4 Hrs Prn Temp > 101°F
- DiphenhydrAMINE (Benadryl) 25 mg Po Q 6 Hrs Prn itching.
- DiphenhydrAMINE (Benadryl) 12.5 mg IV Push Q 6 Hrs Prn itching if pt unable to take Po DiphenhydrAMINE (if ordered).
- Lubricating eye drops to both eyes Q 2 Hrs Prn dry eyes. RN to request from pharmacy if needed.

Other medications: _____

REQUEST FOR SERVICES

- Consult for Social Services