

## McLaren Print System Order

Order No: 63816  
 Order Date: 2021-07-23  
 User: Anne DeOrnellas  
 Phone: 810-342-2559

Ship Location: Educational Resources Attn: ANNE DEORNELLAS  
 401 S Ballenger Hwy  
 Flint , MI 48532

Brochures  
 Quantity: 4  
 Paragon Dept No: 13350  
 Dept Name: Educational Resources  
 Company Number: 60

Order Total Price: 100.00

Item Number: M-345-CC Titration  
 Item Description: Critical Care Titration Chart Badge Buddy  
 Revision Date: 12/2020  
 Print:  
 Paper:  
 Size:  
 Fold:  
 Finish:  
 Drill:  
 Misc Info: 50 per package; laminated with rounded corners; slot punch; finished size 3.5x5.625

Drug & Concentration	Storage	Remarks
Atorvastatin (Lipitor) 80 mg/200 mL 200 mg/200 mL	Bolus: 150 mg/100 mL over 30 minutes 1 mg/min x 8 hours 0.5 mg/min x 16 hours Cardiac arrest: 300mg IV, if VVI/VT recurs, then 120 mg IV then infusion	Monitor the QT interval every 8 hrs, prior to give via central line, use in-line filter. Monitor for pulmonary tox, hypotension, and bradycardia. <b>Max daily dose: 2.1 grams</b>
Clonidine (Klonopin) 200 mg/200 mL NS	Bolus: 0.2 mg/kg Normal starting rate: 1 mg/kg/min titrate by 0.5 mg/kg/min every 15 minutes to patient condition with Titration of Four 2 of 4 <b>Max rate: 10 mg/kg/min</b>	Must be ordered the ENTIRE TITRATION protocol. Rarely: Bradycardia, hypotension, flushing, bronchospasm. Do baseline Titration of Four.
Diazepam (Valium) 25 mg/50 mL	Continuous infusion: 1 mg/hr then double the dose every 30 seconds until approaching goal, then increase by 1 mg/hr every 5 min. <b>Max rate 20 mg/hr</b>	Monitor for hypotension and reflex tachycardia. Change tubing every 12 hours.
Droperidol (Droperidol) (Precedex) 200 mg/50 mL NS	Bolus: 1 mg/kg over 10 min Normal starting rate: 0.2 mg/kg/hr Increase by 0.1 mg/kg/hr every 30 minutes until desired response of RAOS -1 to 0 <b>Max rate: 0.8 mg/kg/hr</b>	<sup>14</sup> Only administer bolus if no other sedative is being used Monitor for hypotension and bradycardia
Ethosuximide (Zaroxin) 125mg/250mL (5mg/5mL) NS	Bolus 0.25 mg/kg (10/40) body weight over 2 minutes. <b>MAX 25 mg bolus</b> Start infusion at 10 mg/hr and increase by 5 mg/hr to meet heart rate goal or decrease by 5 mg/hr for hypotension <b>Max rate: 20 mg/hr</b>	Monitor for new arrhythmias, hypotension, syncope, CHF noted for SBP < 90
DORV/Fentanyl 500 mg/200 mL 200 mg/200 mL	Normal starting rate: 2.5 mg/kg/min. Increase by 2.5 mg/kg/min every 15 minutes until desired response is achieved: C12, MAP > 60, or SBP > 90. <b>Max Dose: 30 mg/kg/min</b>	Preferable central line May cause tachycardia or v-tach in high doses
LO/Fentanyl 400 mg/200 mL 200 mg/200 mL	Normal starting rate: 5 mg/kg/min. Increase by 2.5 mg/kg/min every 15 minutes until desired response is achieved <b>Max Dose: 20 mg/kg/min</b>	Preferable central line May cause tachycardia
Fentanyl (Fentanyl) 0 mg/200 mL NS	Normal starting rate: 0.25 mg/kg/min. Increase by 0.25 mg/kg/min every 15 minutes until MAP > 60 or SBP > 90 <b>Max Dose: 30 mg/kg/min</b>	Contact physician if goal unachieved at 0.8 mg/kg/min. May cause tachycardia.
Fentanyl (Fentanyl) 2,500 mg/250 mL (10 mg/mL) NS	Normal starting rate: 50 mg/kg/min. Increase by 25 mg/kg/min every 5 minutes until goal is achieved: noted if SBP < 90. <b>Max rate 200 mg/kg/min</b>	May cause respiratory
Fentanyl (Fentanyl) 1,000 mg/200 mL (50 mg/mL) NS	Normal starting dose: 0.5 mg/kg/hr Increase by 0.5 mg/kg/hr every 15 minutes until goal achieved (RAOS -1 to 0)	Contact physician if goal unachieved at 3 mg/kg/hr
Labetalol (Trandate) 200 mg/200 mL 200 mg/200 mL	Normal starting rate: 1 mg/min. Titrate by 1 mg/min every 15 minutes to specified goal <b>Max dose 8mg/min</b>	Discontinue after pt received cumulative dose of 300-mg. May cause hypotension and bradycardia

Spec Info: Office is on Ground floor by central elevators