

**Pediatric Anesthesia Pre-Op**

**PreOp Medications**

<input type="checkbox"/> midazolam (VERSED) 2 mg/mL syrup	0.3 mg/kg, oral, once, For 1 Doses, Pre-op Maximum Dose of 10 milligrams. To be given pre-operatively.
<input type="checkbox"/> acetaminophen (TYLENOL) liquid	10 mg/kg, oral, once, For 1 Doses, Pre-op To be given pre-operatively.
<input type="checkbox"/> albuterol (PROVENTIL) nebulizer solution	2.5 mg, nebulization, once PRN, wheezing, For 1 Doses, Pre-op Aerosol Delivery Device:

**Pediatric Anesthesia Post-Op**

**Discharge**

<input type="checkbox"/> Discharge	Routine, Until discontinued, Starting S From PACU by attending Anesthesiologist, PACU
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**Mild Pain (Pain Score 1-3) (Single Response)**

Select only one

<input type="checkbox"/> HYDROcodone-acetaminophen (HYCET) 7.5-325 mg/15 mL solution	0.135 mg/kg, oral, every 4 hours PRN, mild pain (score 1-3), PACU & Post-op Monitor and record pain scores and respiratory status.
<input type="checkbox"/> acetaminophen (TYLENOL) liquid	10 mg/kg, oral, every 4 hours PRN, mild pain (score 1-3), PACU & Post-op Monitor and record pain scores.
<input type="checkbox"/> ibuprofen (MOTRIN) suspension - Not recommended for patients with eGFR LESS than 30 mL/min or acute kidney injury	10 mg/kg, oral, every 6 hours PRN, mild pain (score 1-3), PACU & Post-op

**Moderate Pain (Pain Score 4-6) (Single Response)**

Select only one

<input type="checkbox"/> morPHINE injection	0.05 mg/kg, intravenous, every 10 min PRN, moderate pain (score 4-6), PACU & Post-op Do NOT exceed a cumulative dose of *** mg.
<input type="checkbox"/> fentaNYL (SUBLIMAZE) injection	0.5 mcg/kg, intravenous, every 10 min PRN, moderate pain (score 4-6), PACU & Post-op Do NOT exceed a cumulative dose of *** mcg.

**Severe Pain (Pain Score 7-10) (Single Response)**

Select only one

<input type="checkbox"/> morPHINE injection	0.1 mg/kg, intravenous, every 3 hours PRN, severe pain (score 7-10), PACU & Post-op Do NOT exceed a cumulative dose of *** mg.
<input type="checkbox"/> fentaNYL (SUBLIMAZE) injection	1 mcg/kg, intravenous, every 10 min PRN, severe pain (score 7-10), PACU & Post-op Do NOT exceed a cumulative dose of *** mcg.

**For PACU**

<input type="checkbox"/> albuterol (PROVENTIL) nebulizer solution	2.5 mg, nebulization, once PRN, wheezing, For 1 Doses, PACU Aerosol Delivery Device:
<input type="checkbox"/> diphenhydrAMINE (BENADRYL) IV Push	0.25 mg/kg, intravenous, once PRN, itching, For 1 Doses, PACU

**Antiemetics (Single Response)**

( ) ondansetron (ZOFTRAN) IV or Oral	<b>"Or" Linked Panel</b>
[ ] ondansetron (ZOFTRAN) 4 mg/5 mL solution	0.1 mg/kg, oral, once PRN, nausea, vomiting, For 1 Doses, PACU & Post-op
[ ] ondansetron (ZOFTRAN) IV	0.1 mg/kg, intravenous, once PRN, nausea, vomiting, For 1 Doses, PACU & Post-op Give if patient cannot tolerate oral medication or if a faster onset of action is required.
( ) promethazine (PHENERGAN) IV or Oral	
[ ] promethazine (PHENERGAN) 6.25 mg/5 mL syrup	oral, once PRN, nausea, vomiting, For 1 Doses, PACU & Post-op
[ ] promethazine (PHENERGAN) injection	intravenous, once PRN, nausea, vomiting, For 1 Doses, PACU & Post-op