## Pain Management for Opioid Tolerant Patients [4927]

This order set should NOT be used for neonates, pediatrics. Use caution in patients with HYPOtension, kidney disease or liver disease.

Opioid-tolerant patients are those who have been taking, for a week or longer, at least 60 mg of morphine daily, or at least 30 mg of oral oxycodone daily, or at least 8 mg of oral hydromorphone daily or an equianalgesic dose of another opioid (equivalent to 60 MEDD).

To optimize pain relief, assess patient's home medication: A) Consider increasing scheduled dose of home pain medications by 30% and/or B) Consider adding breakthrough pain medication dose up to 20% of the prior 24 hours dosing available every 4 hours as needed.

Nursing	
Activity	
[] Strict bed rest	Routine, Until discontinued, Starting S
[] Bed rest with bathroom privileges	Routine, Until discontinued, Starting S Bathroom Privileges: with bathroom privileges
[] Ambulate with assistance	Routine, 3 times daily Specify: with assistance
[] Activity as tolerated	Routine, Until discontinued, Starting S Specify: Activity as tolerated
Nursing	
[X] Vital signs - T/P/R/BP	Routine, Per unit protocol 60 minutes after administration of pain medication AND every 4 hours. Assess and document side effects of at least every 4 hours for duration of therapy and when patient complains of pain and/or side effects.
[X] Pasero Opioid-induced Sedation Scale	Routine, Once For 1 Occurrences Assess POSS prior to and 60 minutes after administration of opioid pain medication (e.g, codeine, hydrocodone, morphine, fentanyl, hydromorphone). Contact provider if score 3 or 4.
Notify	
[X] Notify Physician	Routine, Until discontinued, Starting S, Patient has inadequate pain control following administration of therapeutic option for severe pain.

## Medications

Prior to initiation of opioid therapy, it is recommended to check the prescription monitoring program (PMP) database to assess patient's opioid tolerance status. A summarized version of the PMP report may be accessed by clicking on the NaRx Score on the patient's Storyboard.

Pain Management Guide

Opioid PCA Conversion to Oral Opioid Regimen

Due to risk of accumulation of toxic metabolite, the use of morphine in patients with renal dysfunction is not recommended. An alternative opioid should be utilized, if possible.

## Scheduled Pain Medications (Single Response)

Consider scheduled option if pain source is present and patient unable to reliably communicate needs.

Do not order both scheduled and PRN NSAIDs/APAP simultaneously.

() acetaminophen (TYLENOL) 500 mg tablet or liquid	d "Or" Linked Panel
[] acetaminophen (TYLENOL) tablet	500 mg, oral, every 6 hours scheduled
[] acetaminophen (TYLENOL) liquid	500 mg, oral, every 6 hours scheduled
() ( ;   (T)(  ENOL) 050 ( )   ( ) ; ;	I IIO III I I I I I I I I I I I I I I I

<sup>()</sup> acetaminophen (TYLENOL) 650 mg tablet or liquid

[] acetaminophen (TYLENOL) tablet	650 mg, oral, every 6 hours scheduled
[] acetaminophen (TYLENOL) liquid	650 mg, oral, every 6 hours scheduled
( ) NSAIDS (Single Response)	
() ibuprofen (ADVIL, MOTRIN) tablet or oral sus	pension "Or" Linked Panel
[] ibuprofen (ADVIL, MOTRIN) tablet	600 mg, oral, every 6 hours scheduled
[] ibuprofen (MOTRIN) 100 mg/5 mL	600 mg, oral, every 6 hours scheduled
suspension	
( ) naproxen (NAPROSYN) tablet	250 mg, oral, 2 times daily
( ) celecoxib (CeleBREX) capsule	100 mg, oral, 2 times daily
() ketorolac (TORADOL) injection	15 mg, intravenous, every 6 hours scheduled
PRN Pain Medications	
[] PRN Oral Medications for Mild Pain (Pain Score	1-3):
For Patients LESS than 65 years old (Single Res	
Do not order both scheduled and PRN NSAIDs/A	
	,
() acetaminophen (TYLENOL) tablet OR oral su	spension "Or" Linked Panel
	ay from all sources. (Cirrhosis patients maximum: 2 grams per day from all
sources)	3,
,	
[] acetaminophen (TYLENOL) tablet	650 mg, oral, every 6 hours PRN, mild pain (score 1-3)
acetaminophen (TYLENOL)suspension	650 mg, oral, every 6 hours PRN, mild pain (score 1-3)
	Use if patient cannot tolerate oral tablet.
() ibuprofen (ADVIL, MOTRIN) tablet or oral sus	pension "Or" Linked Panel
[] ibuprofen (ADVIL, MOTRIN) tablet	600 mg, oral, every 6 hours PRN, mild pain (score 1-3)
	Give if patient is able to tolerate oral medication.
[] ibuprofen (MOTRIN) 100 mg/5 mL	600 mg, oral, every 6 hours PRN, mild pain (score 1-3)
suspension	Use if patient cannot swallow tablet.
( ) naproxen (NAPROSYN) tablet	500 mg, oral, 2 times daily PRN, mild pain (score 1-3)
( ) celecoxib (CeleBREX) capsule	200 mg, oral, 2 times daily PRN, mild pain (score 1-3)
() acetaminophen-codeine (TYLENOL #3) table	t OR elixir "Or" Linked Panel
[] acetaminophen-codeine (TYLENOL WITH	1 tablet, oral, every 6 hours PRN, mild pain (score 1-3)
CODEINE #3) 300-30 mg per tablet	Give if patient is able to tolerate oral medication.
,	The use of codeine-containing products is contraindicated in patients
	LESS THAN 12 years of age. Is this patient OVER 12 years of age? Y/N:
[] acetaminophen-codeine 300 mg-30 mg	10 mL, oral, every 6 hours PRN, mild pain (score 1-3)
/12.5 mL solution	The use of codeine-containing products is contraindicated in patients
	LESS THAN 12 years of age. Is this patient OVER 12 years of age? Y/N:
() traMADoL (ULTRAM) tablet	50 mg, oral, every 6 hours PRN, mild pain (score 1-3)
	Give if patient able to swallow tablet. Max recommended dose is 400
	mg/day; or 200 mg/day in patients with CrCl LESS THAN 30 ml/min, or
	100mg/day in ESRD patients
[] PRN Medications for Mild Pain (Pain Score 1-3):	
Patients GREATER than or EQUAL to 65 years	Old
(Single Response)	NDAD ' K
Do not order both scheduled and PRN NSAIDs/	APAP simultaneously.
()	- Poul I interd Donal
() acetaminophen (TYLENOL) tablet OR oral su	
, ,	ay from all sources. (Cirrhosis patients maximum: 2 grams per day from all
sources)	
[] acotominanhan (TVI ENOL) tablet	650 mg, oral, ayany 6 hayra DDN, mild noin /accrs 4, 2)
[] acetaminophen (TYLENOL) tablet [] acetaminophen (TYLENOL) suspension	650 mg, oral, every 6 hours PRN, mild pain (score 1-3) 650 mg, oral, every 6 hours PRN, mild pain (score 1-3)
[] acetaminophen (TYLENOL) suspension	
( ) ibunratan (AD)/II MOTDIN) tablat ar aral aug	Use if patient cannot tolerate oral tablet. pension "Or" Linked Panel
( ) ibuprofen (ADVIL, MOTRIN) tablet or oral sus	
[] ibuprofen (ADVIL, MOTRIN) tablet	600 mg, oral, every 6 hours PRN, mild pain (score 1-3) Give if patient is able to tolerate oral medication.
[] ibuprofen (MOTRIN) 100 mg/5 mL	600 mg, oral, every 6 hours PRN, mild pain (score 1-3)
suspension	Use if patient cannot swallow tablet.

F 1	aceteminanhan aceteina (TVI ENOL WITH	1 toblet erel even 6 beure DDN mild nein (egers 1.2)
[]	acetaminophen-codeine (TYLENOL WITH CODEINE #3) 300-30 mg per tablet	1 tablet, oral, every 6 hours PRN, mild pain (score 1-3)
	CODE INE #3) 300-30 mg per tablet	Give if patient is able to tolerate oral medication.  The use of codeine-containing products is contraindicated in patients
		<u>~ '</u>
	anataminanhan andaina 200 mg 20 mg	LESS THAN 12 years of age. Is this patient OVER 12 years of age? Y/N:
IJ	acetaminophen-codeine 300 mg-30 mg	12.5 mL, oral, every 6 hours PRN, mild pain (score 1-3)
	/12.5 mL solution	Use if patient cannot swallow tablet.
		The use of codeine-containing products is contraindicated in patients
	· MAD I (III TOANA) · III ·	LESS THAN 12 years of age. Is this patient OVER 12 years of age? Y/N:
( )	traMADoL (ULTRAM) tablet	25 mg, oral, every 6 hours PRN, mild pain (score 1-3)
		Max recommended dose is 400 mg/day; or 200 mg/day in patients with
		CrCl LESS THAN 30 ml/min, or 100mg/day in ESRD patients
	RN Oral Medications for Moderate Pain (Pain S	
	6): For Patients LESS than 65 years old (Single	
	esponse)	
		ets in patients with renal dysfunction, particularly in ESRD, is not
re	commended. An alternative opioid should be ut	llized.
	is not recommended. An alternative opioid shou	uld be utilized, if possible. (adjust dose for renal/liver function and age)
	10/000 1 1 1 10/005/000	20) (     (
()	HYDROcodone-acetaminophen 10/325 (NORC	CO) tablet "Or" Linked Panel
	OR elixir	
	• • • • • • • • • • • • • • • • • • • •	ay from all sources. (Cirrhosis patients maximum: 2 grams per day from all
	sources)	
[]	HYDROcodone-acetaminophen (NORCO)	1 tablet, oral, every 6 hours PRN, moderate pain (score 4-6)
_	10-325 mg per tablet	Give if patient able to swallow tablet.
[]		20 mL, oral, every 6 hours PRN, moderate pain (score 4-6)
	2.5-108.3 mg/5 mL solution	Give if patient unable to swallow tablet.
()	hydromorPHONE (DILAUDID) tablet	2 mg, oral, every 6 hours PRN, moderate pain (score 4-6)
. ,	·	Give if patient able to swallow tablet
()	morPHINE immediate-release tablet	7.5 mg, oral, every 6 hours PRN, moderate pain (score 4-6)
( )		Tablets may be crushed. Give if able to swallow tablet.
()	oxyCODone-acetaminophen (PERCOCET)	1 tablet, oral, every 6 hours PRN, moderate pain (score 4-6)
( )	5-325 mg per tablet	Maximum of 4 z grams of acetaminophen per day from all sources.
	<b>3</b> 1	(Cirrhosispatients maximum: 2 grams per day from all sources) Give if
		patient able to swallow tablet.
()	oxyCODONE (ROXICODONE) immediate	5 mg, oral, every 6 hours PRN, moderate pain (score 4-6)
( )	release tablet	Tablets may be crushed. Give if patient able to swallow tablet
()	traMADoL (ULTRAM) tablet	50 mg, oral, every 6 hours PRN, moderate pain (score 4-6)
( )	tidivii (DOE (OETTO tivi) tablet	Max recommended dose is 400 mg/day; or 200 mg/day in patients with
		CrCl LESS THAN 30 ml/min, or 100mg/day in ESRD patients
1 PI	RN Oral Medications for Moderate Pain (Pain S	<u> </u>
	6): For Patients GREATER than or EQUAL to 6	
	d (Single Response)	o y care
		cts in patients with renal dysfunction, particularly in ESRD, is not
		ilized. (adjust dose for renal/liver function and age)
10	commended. An alternative opiola should be di	inzed. (adjust dose for renal/liver function and age)
7)	HYDROcodone-acetaminophen 7.5/325 (NOR	CO) tablet "Or" Linked Panel
( )	OR elixir	CO) tablet Of Liffked Failer
		wy from all courses. (Cirrhagia patients mayimum: 2 grams par day from all
		ay from all sources. (Cirrhosis patients maximum: 2 grams per day from all
	sources)	
	LIVDDO and an a costominant on (NODCO)	1 tablet and every Chause DDN maderate nain (coors 1.6)
[]	HYDROcodone-acetaminophen (NORCO)	1 tablet, oral, every 6 hours PRN, moderate pain (score 4-6)
F 3	7.5-325 mg per tablet	Give if patient able to swallow tablet.
IJ	HYDROcodone-acetaminophen (HYCET)	15 mL, oral, every 6 hours PRN, moderate pain (score 4-6)
7.	2.5-108.3 mg/5 mL solution	Give if patient unable to swallow tablet.
()	oxyCODone-acetaminophen (PERCOCET)	1 tablet, oral, every 6 hours PRN, moderate pain (score 4-6)
_	5-325 mg per tablet	
()	hydromorPHONE (DILAUDID) tablet	2 mg, oral, every 6 hours PRN, moderate pain (score 4-6)
		Give if able to swallow tablet. Nursing may crush tablets.

() morPHINE immediate-release tablet	7.5 mg, oral, every 6 hours PRN, moderate pain (score 4-6) Give if able to swallow tablet. Nursing may crush tablets.
( ) oxyCODONE (ROXICODONE) immediate release tablet	5 mg, oral, every 6 hours PRN, moderate pain (score 4-6) Give if able to swallow tablet. Nursing may crush tablets.
() traMADoL (ULTRAM) tablet	50 mg, oral, every 6 hours PRN, moderate pain (score 4-6) Max recommended dose 300mg/day, 200mg/day with CrCl LESS THAN 30mL/min, and 100mg/day in ESRD.
<ul> <li>PRN IV Medications for Moderate Pain (Pain Scot For Patients LESS than 65 years old if unable to Oral Pain Medication (Single Response)</li> </ul>	tolerate
	cts in patients with renal dysfunction, particularly in ESRD, is not tilized. (adjust dose for renal/liver function and age)
() morPHINE injection	2 mg, intravenous, every 4 hours PRN, moderate pain (score 4-6) Give if patient is NPO, unable to swallow oral medication, or if pain unrelieved 60 minutes after giving oral pain medications.
() hydromorPHONE (DILAUDID) injection	0.5 mg, intravenous, every 4 hours PRN, moderate pain (score 4-6) Give if patient is NPO, unable to swallow oral medication, or if pain unrelieved 60 minutes after giving oral pain medications
[] PRN IV Medications for Moderate Pain (Pain Sco For Patients GREATER than or EQUAL to 65 year unable to tolerate Oral Pain Medication (Single Response)	
Due to risk of toxicity, the use of morphine productive recommended. An alternative opioid should be ut	cts in patients with renal dysfunction, particularly in ESRD, is not tilized.
() morPHINE injection	1 mg, intravenous, every 4 hours PRN, moderate pain (score 4-6) Give if patient is NPO, unable to swallow oral medication, or if pain unrelieved 60 minutes after giving oral pain medications.
( ) hydromorPHONE (DILAUDID) injection	0.25 mg, intravenous, every 3 hours PRN, moderate pain (score 4-6) Give if patient is NPO, unable to swallow oral medication, or if pain unrelieved 60 minutes after giving oral pain medications
PRN Oral Medications for Severe Pain (Pain Sco 7-10): For Patients LESS than 65 years old (Sing Response)	
	cts in patients with renal dysfunction, particularly in ESRD, is not tilized.
( ) HYDROcodone-acetaminophen 7.5/325 (NOR OR elixir	CO) tablet "Or" Linked Panel
Maximum of 4 grams of acetaminophen per da sources)	ay from all sources. (Cirrhosis patients maximum: 2 grams per day from all
[] HYDROcodone-acetaminophen (NORCO) 7.5-325 mg per tablet	2 tablet, oral, every 6 hours PRN, severe pain (score 7-10)  Maximum of 4 grams of acetaminophen per day from all sources.  (Cirrhosis patients maximum: 2 grams per day from all sources). Give if patient able to swallow tablet.
[] HYDROcodone-acetaminophen (HYCET) 2.5-108.3 mg/5 mL solution	30 mL, oral, every 6 hours PRN, severe pain (score 7-10) Give if patient unable to swallow tablet.
( ) oxyCODone-acetaminophen (PERCOCET) 10-325 mg per tablet	1 tablet, oral, every 6 hours PRN, severe pain (score 7-10) Give if patient able to swallow tablet.
( ) hydromorPHONE (DILAUDID) tablet	4 mg, oral, every 6 hours PRN, severe pain (score 7-10) Give if patient able to swallow tablet
() morPHINE immediate-release tablet	15 mg, oral, every 6 hours PRN, severe pain (score 7-10) Tablets may be crushed. Give if able to swallow tablet.
( ) oxyCODONE (ROXICODONE) immediate release tablet	10 mg, oral, every 6 hours PRN, severe pain (score 7-10) Tablets may be crushed. Give if patient able to swallow tablet
( ) traMADoL (ULTRAM) tablet	100 mg, oral, every 6 hours PRN, severe pain (score 7-10) (Max daily dose not to exceed 200 mg/day in patients with CrCl LESS than 30 ml/min). Give if patient able to swallow tablet.

	PRN Oral Medications for Severe Pain (Pain Score 7-10): For Patients GREATER than or EQUAL to 65 years old (Single Response)	
	Due to risk of toxicity, the use of morphine products in patients with renal dysfunction, particularly in ESRD, is not recommended. An alternative opioid should be utilized.	
(	( ) HYDROcodone-acetaminophen 10/325 (NORCO) tablet "Or" Linked Panel OR elixir	
	Maximum of 4 grams of acetaminophen per day from all sources. (Cirrhosis patients maximum: 2 grams per day from all sources)	
	[] HYDROcodone-acetaminophen (NORCO) 10-325 mg per tablet	1 tablet, oral, every 6 hours PRN, severe pain (score 7-10) Give if patient able to swallow tablet.
	[] HYDROcodone-acetaminophen (HYCET) 2.5-108.3 mg/5 mL solution	20 mL, oral, every 6 hours PRN, severe pain (score 7-10) Give if patient unable to swallow tablet.
(	) oxyCODone-acetaminophen (PERCOCET) 10-325 mg per tablet	1 tablet, oral, every 6 hours PRN, severe pain (score 7-10) Give if patient able to swallow tablet.
ī	) hydromorPHONE (DILAUDID) tablet	4 mg, oral, every 6 hours PRN, severe pain (score 7-10)
(	) morPHINE immediate-release tablet	15 mg, oral, every 6 hours PRN, severe pain (score 7-10) Oral tablets may be crushed. Give if patient able to swallow tablets.
(	) oxyCODONE (ROXICODONE) immediate release tablet	10 mg, oral, every 6 hours PRN, severe pain (score 7-10) Oral tablets may be crushed. Give if patient able to swallow tablet
(	) traMADoL (ULTRAM) tablet	100 mg, oral, every 8 hours PRN, severe pain (score 7-10) (For eGFR LESS than 30 mL/min, change frequency to every 12 hours. Max recommended dose 300mg/day, 200mg/day with CrCl LESS THAN 30mL/min, and 100mg/day in ESRD.
[]	PRN IV Medications for Severe Pain (Pain Score	7-10):
	For Patients LESS than 65 years old if unable to t Oral Pain Medication (Single Response)	
		cts in patients with renal dysfunction, particularly in ESRD, is not ilized. (adjust dose for renal/liver function and age)
(	) fentaNYL (SUBLIMAZE) injection	25 mcg, intravenous, every 3 hours PRN, severe pain (score 7-10) Use if patient is NPO, unable to swallow oral medication, or if pain unrelieved 60 minutes after administering oral pain.
(	) morPHINE injection	4 mg, intravenous, every 4 hours PRN, severe pain (score 7-10) Give if patient is NPO, unable to swallow oral medication, or if pain unrelieved 60 minutes after giving oral pain medications.
(	) hydromorPHONE (DILAUDID) injection	1 mg, intravenous, every 4 hours PRN, severe pain (score 7-10) Give if patient is NPO, unable to swallow oral medication, or if pain 60 minutes after giving oral pain medications.
[]	PRN IV Medications for Severe Pain (Pain Score For Patients GREATER than or EQUAL to 65 year unable to tolerate Oral Pain Medication (Single Response)	7-10):
		ets in patients with renal dysfunction, particularly in ESRD, is not ilized.
(	) fentaNYL (SUBLIMAZE) injection	12.5 mcg, intravenous, every 3 hours PRN, severe pain (score 7-10) Use if patient is NPO, unable to swallow oral medication, or if pain unrelieved 60 minutes after administering oral pain medications.
(	) morPHINE injection	2 mg, intravenous, every 4 hours PRN, severe pain (score 7-10) Use if patient is NPO, unable to swallow oral medication, or if pain unrelieved 60 minutes after administering oral pain medications.
(	) hydromorPHONE (DILAUDID) injection	0.5 mg, intravenous, every 3 hours PRN, severe pain (score 7-10) Use if patient is NPO, unable to swallow oral medication, or if pain unrelieved 60 minutes after administering oral pain medications.

**Respiratory Depression and Somnolence** 

Itching: For Patients LESS than 70 years old (Single Response)  () diphenhydr/MNINE (BENADRYL) tablet 25 mg, oral, every 6 hours PRN, itching (N) yedro/Xirpie (ATARAX) tablet 10 mg, oral, every 6 hours PRN, itching (X) cetirizine (ZyrTEC) tablet 5 mg, oral, daily PRN, itching (X) cetirizine (ZyrTEC) tablet 5 mg, oral, daily PRN, itching (X) cetirizine (ZyrTEC) tablet 5 mg, oral, daily PRN, itching (X) cetirizine (ZyrTEC) tablet 5 mg, oral, daily PRN, itching (X) cetirizine (ZyrTEC) tablet 5 mg, oral, daily PRN, itching (X) cetirizine (ZyrTEC) tablet 5 mg, oral, daily PRN, itching (X) cetirizine (ZyrTEC) tablet 5 mg, oral, daily PRN, itching (X) cetirizine (ZyrTEC) tablet 5 mg, oral, every 6 hours PRN, muscle spasms (X) cyclobenzaprine (FLEXERIL) tablet 5 mg, oral, every 6 hours PRN, muscle spasms (X) cyclobenzaprine (FLEXERIL) tablet 5 mg, oral, every 8 hours PRN, muscle spasms (X) ordansetron (ZOFRAN) Oral or IV 10 nodansetron (ZOFRAN) IV 10 nodansetron	[X] naloxone (NARCAN) injection	0.2 mg, intravenous, once PRN, respiratory depression, as needed for respiratory rate 8 per minute or less OR patient somnolent and difficult to arouse (POSS GREATER than 3). Repeat Naloxone 0.2 mg once in 2 minutes if necessary (MAXIMUM 0.4 mg). If naloxone is needed, please call the ordering physician and/or CERT team. Monitor vital signs (pulse oximetry, P/R/BP) every 15 minutes for 3 times.
(X) cetirizine (ZyrTEC) tablet 5 mg, oral, daily PRN, itching 5 mg, oral, daily PRN, itching 6 mg, oral, daily PRN, itching 7 mg, oral, daily PRN, itching 8 mg, oral, daily PRN, itching 8 mg, oral, 2 times daily PRN, itching 9 mg, oral, 3 times daily PRN, muscle spasms 9 mg, oral, 3 times daily PRN, muscle spasms 9 mg, oral, 3 times daily PRN, muscle spasms 9 mg, oral, 3 times daily PRN, muscle spasms 9 mg, oral, 3 times daily PRN, muscle spasms 9 mg, oral, 3 times daily PRN, muscle spasms 9 mg, oral, 3 times daily PRN, muscle spasms 9 mg, oral, 3 times daily PRN, muscle spasms 9 mg, oral, 3 times daily PRN, muscle spasms 9 mg, oral, oral, every 8 hours PRN, muscle spasms 9 mg, oral, oral, every 8 hours PRN, muscle spasms 9 mg, oral, oral, every 8 hours PRN, nausea, vomiting 9 mg, oral, oral, every 8 hours PRN, nausea, vomiting 9 mg, oral, oral, every 8 hours PRN, nausea, vomiting 9 mg, oral, oral, every 8 hours PRN, nausea, vomiting 9 mg, oral, oral, every 8 hours PRN, nausea, vomiting 9 mg, oral, oral, every 8 hours PRN, nausea, vomiting 9 mg, oral, oral, every 8 hours PRN, nausea, vomiting 9 mg, oral, oral, every 8 hours PRN, nausea, vomiting 9 mg, oral, oral, every 8 hours PRN, nausea, vomiting 9 mg, oral,	Itching: For Patients LESS than 70 years old (Single	e Response)
(i) revolenadine (ALLEGRA) tablet - For eGFR LESS than 80 mL/min, reduce frequency to once daily as needed tching: For Patients GREATER than or EQUAL to 70 years old (Single Response) (i) cetinzine (ZyrTEC) tablet 5 mg, oral, daily PRN, itching  Muscle Relaxants (Single Response) (i) methocarbamol (ROBAXIN) tablet 500 mg, oral, a times daily PRN, muscle spasms (i) cyclobenzaprine (FLEXERIL) tablet 5 mg, oral, 3 times daily PRN, muscle spasms (i) cyclobenzaprine (FLEXERIL) tablet 2 mg, oral, 2 times daily PRN, muscle spasms (ii) tiZANidine (ZANAFLEX) tablet 2 mg, oral, 2 times daily PRN, muscle spasms (iii) tiZANidine (ZANAFLEX) tablet 2 mg, oral, 2 times daily PRN, muscle spasms (iii) tiZANidine (ZOFRAN) Oral or IV "Or" Linked Panel [X] ondansetron (ZOFRAN) Oral or IV "Or" Linked Panel [X] ondansetron ODT (ZOFRAN-ODT) 4 mg, oral, every 8 hours PRN, nausea, vomiting disintegrating tablet Give if patient is able to tolerate oral medication. [X] ondansetron (ZOFRAN) IV 4 mg, intravenous, every 8 hours PRN, nausea, vomiting Give if patient is UNable to tolerate oral medication. [X] ondansetron (ZOFRAN) IV 4 mg, intravenous, every 8 hours PRN, nausea, vomiting Give if patient is UNable to tolerate oral medication. [X] ondansetron (ZOFRAN) IV 4 mg, intravenous, every 8 hours PRN, nausea, vomiting Give if patient is UNable to tolerate oral medication. [X] polyethylene glycol (MIRALAX) packet 17 g, oral, daily 10 mg, rectal, daily PRN, constipation, if no bowel movement after 3 days  Labs  Cardiology  Imaging  Other Studies  Respiratory  Rehab  Consults For Physician Consult orders use sidebar	,, , , , , , , , , , , , , , , , , , , ,	<u> </u>
tching: For Patients GREATER than or EQUAL to 70 years old (Single Response)  () cetirizine (ZyrTEC) tablet 5 mg, oral, daily PRN, itching  Muscle Relaxants (Single Response)  () methocarbamol (ROBAXIN) tablet 500 mg, oral, every 6 hours PRN, muscle spasms () cyclobenzaprine (FLEXERIL) tablet 5 mg, oral, 3 times daily PRN, muscle spasms () tiZANAFLEX) tablet 2 mg, oral, every 6 hours PRN, muscle spasms () tiZANAFLEX) tablet 2 mg, oral, every 6 hours PRN, muscle spasms () tiZANAFLEX) tablet 2 mg, oral, every 6 hours PRN, muscle spasms () tiZANAFLEX) tablet 2 mg, oral, every 6 hours PRN, muscle spasms () tiZANAFLEX) tablet 2 mg, oral, every 6 hours PRN, muscle spasms () tiZANAFLEX) tablet 2 mg, oral, every 6 hours PRN, muscle spasms () tiZANAFLEX) tablet 2 mg, oral, every 6 hours PRN, muscle spasms () tiZANAFLEX) tablet 2 mg, oral, every 6 hours PRN, muscle spasms () tiZANAFLEX) tablet 2 mg, oral, every 6 hours PRN, muscle spasms () tiZANAFLEX) tablet 2 mg, oral, every 6 hours PRN, muscle spasms () tiZANAFLEX) tablet 2 mg, oral, every 8 hours PRN, nausea, vomiting (Give if patient is able to tolerate oral medication. (X) ondansetron (ZOFRAN) DIV 4 mg, intravenous, every 8 hours PRN, nausea, vomiting (Give if patient is able to tolerate oral medication OR if a faster onset of action is required.  Bowel Regimen (X) sennosides-docusate sodium (SENOKOT-S) 8.6-50 mg 1 tablet, oral, 2 times daily hold for diarrhea. (X) polyethylene glycol (MIRALAX) packet 17 g, oral, daily (X) bisacodyl (DULCOLAX) suppository 10 mg, rectal, daily PRN, constipation, if no bowel movement after 3 days  Labs  Cardiology  Imaging  Other Studies  Respiratory  Rehab  Consults For Physician Consult orders use sidebar		
() cetirizine (ZyrTEC) tablet 5 mg, oral, daily PRN, itching  Muscle Relaxants (Single Response) () methocarbamol (ROBAXIN) tablet 500 mg, oral, every 6 hours PRN, muscle spasms () cyclobenzaprine (FLEXERIL) tablet 5 mg, oral, a times daily PRN, muscle spasms () tiZANidine (ZANAFLEX) tablet 2 mg, oral, every 8 hours PRN, nuscle spasms HOLD for SBP LESS 100 mmHg  Antiemetics  [X] ondansetron (ZOFRAN) Oral or IV "Or" Linked Panel [X] ondansetron (ZOFRAN-ODT) 4 mg, oral, every 8 hours PRN, nausea, vomiting disintegrating tablet Give if patent is able to tolerate oral medication.  [X] ondansetron (ZOFRAN) IV 4 mg, intravenous, every 8 hours PRN, nausea, vomiting Give if patent is Unable to tolerate oral medication OR if a faster onset of action is required.  Bowel Regimen  [X] sennosides-docusate sodium (SENOKOT-S) 8.6-50 mg 1 tablet, oral, 2 times daily Hold for diarrhea.  [X] polyethylene glycol (MIRALAX) packet 17 g, oral, daily [X] bisacodyl (DULCOLAX) suppository 10 mg, rectal, daily PRN, constipation, if no bowel movement after 3 days  Labs  Cardiology  Imaging  Other Studies  Respiratory  Rehab  Consults For Physician Consult orders use sidebar		
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