

**PHYSICIAN'S ORDERS**  
**For IV Norepinephrine (Levophed)**  
**ER/ICU/Cath Lab Only**

Center Patient Admission  
Label Here

**Administration and treatment of patients for short-term support of blood pressure, and cardiac stimulation in non-hypovolemic shock; management of hypotension; adjunctive therapy during cardiopulmonary arrest.**

Another brand of drug identical in form  
and content may be dispensed unless checked. ☐

Drug Allergies

**Central line preferred, or large bore IV**

☐ **Standard Concentration:** 8mg Norepinephrine (Levophed) in 500ml of D5W (16 mcg/ml)

☐ **Double Concentration:** 16mg Norepinephrine (Levophed) in 500mL of D5W (32mcg/ml)

1. Initial dose: \_\_\_\_\_ mcg/min
2. Titration instructions 2 mcg/min Q 3 minutes; Max dose of 60 mcg/min
3. Goal MAP>\_\_\_\_\_ or SBP>\_\_\_\_\_

Obtain BP and heart rate upon initiation, with all titrations, Q 5 min x 4 after Norepinephrine started, then Q 15 x 4 until stable then Q 1hr.

**\*\*\*Notify Physician if goal is not met at max dose\*\*\***

**Patient Care Implications:** May cause tachycardia, hypertension, angina, or PVC's. Extravasation or peripheral ischemia can cause sloughing and necrosis of tissue in the surrounding areas (Antidote: Regitine "Phentolamine" or nitro paste). If occurs, refer to "Management of Extravasation Regitine" policy and procedure.

\_\_\_\_\_  
MD Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

\_\_\_\_\_  
Time

\_\_\_\_\_  
Nurse # 1 verifying rate

\_\_\_\_\_  
Nurse # 2 verifying rate