

PHYSICIAN'S ORDERS
For IV Phenylephrine (Neo-Synephrine)
ER/ICU/ and CCL Only

USE: Used in vascular failure in shock, shock-like states and drug induced hypotension, to increase blood pressure. Also will increase pulmonary artery pressure. Useful as alternative in patients who develop unacceptable tachycardia and tachydysrhythmias with dopamine or norepinephrine.

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

Drug Allergies:

The following orders will be initiated

1. Initial weight at infusion _____ then daily weights
2. VS upon initiation of infusion, then Q5-10 minutes during titrations
3. VS after titration may be Q15 minutes while the drug is being infused.
4. Prepare solution of 10mg Phenylephrine in volume of NSS to equal 250ml bag. (concentration 40 microgram/ml) (also may be mixed in D5W)
5. Initial dose 100 – 180 microgram/min to obtain desired BP,
6. **Vital Sign Parameters:** Maintain MAP > 65

*****MUST have physician order for rates greater than 300 micrograms/min**

Blood volume depletion should be corrected before phenylephrine therapy is initiated. Extravasation or peripheral ischemia can cause sloughing and necrosis of tissue in the surrounding areas (Antidote: Regitine).

Use with caution in patients with sulfite sensitivity, Cardiogenic shock, uncompensated CHF, bradycardia, pulmonary edema, and heart block. Reduce dose in presence of liver failure.

MD Signature

_____/_____/_____
Date

Time

Nurse # 1 verifying rate

Nurse # 2 verifying rate