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WARD/UNIT: \_



## PATIENT CONTROLLED ANALGESIA (PCA) ADULT ORDER

ACUTE PAIN SERVICE (APS) LAUNCESTON GENERAL HOSPITAL

PT ID					
SURNAME			D.C	O.B	1
NAMES		 - 10 50			
ADDRESS					
	142000	 			

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				(Tick ☑	as appropr	iate, format tii	me as 00:00 (24	4 hour) and date as I	DDIMMIYY
Weight:	kilograms (l	(g)	I <sup>st</sup> Pr	escriber	to prin	t patient	name and	check label o	:orrect:
Height:	centimetres	s (cm)		15.0				00.00	v cerespi A.G.
ALLERGIES	No Yes (specify):	emv2 ler	300 00	100000	ECHE		3.00(1)	,	
ALERTS	☐ No ☐ Yes (specify):								
All Alerts and Administratio	Allergies must be on System	document	ted on t	he DMF	Alert	Form and	d registere	d in iPM, Patie	ent
RELEVANT M	EDICAL HISTORY								
Opioid tolerant		]Yes [	] No	If yes	to which	drug/s?			
Obstructive sleep	apnoea [	Yes	] No						
Other respiratory	disease	]Yes	No	If yes	specify t	уре			> 8
PRESCRIPTIO	N GUIDELINES -	ADULTS					STANDA	ARD PCA BO	LUS
Fentanyl	1000 micrograms in 50	) millilitres (	mL) of so	odium chlo	ride 0.9 p	percent (%)	20 microgr	rams (microg)	
Morphine	100 mg in 50 mL of so	dium chlori	de 0.9%				I milligram	ı (mg)	
Oxycodone	100 mg in 50 mL of so	dium chlori	de 0.9%				I mg		
PCA PUMP SI	ETTINGS						OBSERV	/ATIONS	
I. The order below	w can be used for ongoi	ng administr	ation.				15 minutely	y for I hour	
2. Prescriber to cr	oss out mg or microg as	applicable.					I hourly fo	r 12 hours	
3. Alterations to t	he pump settings are to	be docume	nted in th	ie PCA pu	mp settin	gs section.	2 hourly fo	r 12 hours	
4. Alterations to s	yringe contents require	a new form					4 hourly th	ereafter	
								dministered Nalox ns start again at 15	
PRESCRIPTIC	ON ORDER								
Oxygen: Via	nasal prongs at	litre	s / minu	te		/ia high flo	w nasal pro	ngs – see order	
Date & Dru	ROUTE TOTAL	TOTAL	CONC	BOLUS	DOSE	LOCKOUT	CONTINUOUS	Prescriber Print	Pump

Date & Time	Drug	ROUTE	TOTAL Amount (microg/ mg)	TOTAL Volume (mL)	Volume	(microg / mg per mL)	BOLUS Dose (microg/ mg)	DOSE Duration (minutes)	Period (minutes)	Infusion (microg/mg per hour)	Prescriber Print Name & Signature	Progra	imp ammer tials
			1118)	Les Samples and Control	1112)	1118)			per nour)		RNI	RN2	
		IV	Over an object	ene ve vo		rala, rusa	Wig IV 8	ACM skill	reavig sal co-	ma ahlologa bigana	N. F.		
Chan	ges of Pu	mp setti	ings	Date/	Time	lacina	will brus	1 - 10) to	6060 (Vi) 200	esvattal modec o			
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				Date	Time			GOAL A	9 6/12 62890	e oz a inslitej sa			
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			201	a Transfel	ONE TO SE	961.000	20 alg 1 au	3A 6/5 JS	ane.) - I	elenylana az	N/A	vari.	
			to III year	Date	Time		en Objecte continues no	ter Males	and r	1.0		une Pi	
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Acute Pain Service (APS) Contact 0436 930 912 or Duty Anaesthetist 0436 916 889

<b>TASMANIAN</b>	
HEALTH	
SERVICE	
SLITVICE	



## PATIENT CONTROLLED ANALGESIA (PCA) ADULT ORDER

ACUTE PAIN SERVICE (APS) LAUNCESTON GENERAL HOSPITAL

WA	R	D/I	IN	IT:

PT ID					
SURNAME OTHER NAMES			Azes	).B	
ADDRESS	N. C. C. C. C.		ima GMD	4_1	

Date	Time	Adı	ministration		2007 6110	Discard	ded Record
DDIMMIYYYY)	00:00 (24 hour)	Prepared, commend (Print Name &	ced and checked by Signature x2)	Time Started	Volume Remaining	Date &	Signature x2
		RN I	RN 2/EN	00:00 (24 hour)	(mL)	Time	. C. C. T. CONSISTED AND ADDRESS OF THE PARTY OF THE PART
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Record volume	Date (DD/MM/YYYY)	<b>Time</b> 00:00 (24 hour)	Transfer to	Transfer from	Volume Remaining	RN I	RN 2/EN
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or unit to another	muod ST again	rossi I-			, mhileship	a za governi ne gin sub	eora or editores il
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				DD/MH/MY

## **GENERAL INSTRUCTIONS**

- 1. No systemic opioids are to be given while PCA is in progress unless ordered by an anaesthetist.
- 2. Naloxone 400 microg must be available within the ward/unit.
- 3. Maintain patent intravenous (IV) cannula for 4 hours after removal of PCA infusion.
- 4. Must run with continuous intravenous fluids.
- 5. Record vital signs on the relevant observation chart and on the Acute Pain Monitoring chart.
- 6. Anti-reflux valve to be in place between intravenous therapy and intravenous access.
- 7. Only the patient is to activate the PCA button.

ASSESSMENT/INTERVENTION GUIDELINES						
Inadequate analgesia	Contact the Acute Pain Service (APS) or Duty Anaesthetist					
Pruritus	<ul> <li>Consider Naloxone 40 microg intravenous and repeat every 10 minutes as required up to 200 microg as per medical order</li> <li>Contact the APS or Duty Anaesthetist</li> </ul>					
Nausea and vomiting	Administer the prescribed antiemetic     If ineffective contact the APS or Duty Anaesthetist					

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Abbreviation Key: CONC	concentration	<b>EN</b> Enrolled Nurse	RN	Registered Nurse	SpO,	saturation of peripheral oxygen	1