

(place patient label here)

Patient Name: \_\_\_\_\_



**PROVIDER ORDERS**

**Order Set Directions:**

- > (✓)- Check orders to activate; Orders with pre-checked box  will be followed unless lined out.
- > Initial each place in the pre-printed order set where changes such as additions, deletions or line outs have been made
- > Initial each page and Sign/Date/ Time last page

Diagnosis: \_\_\_\_\_

Allergies with reaction type: \_\_\_\_\_

## Stroke–Hemorrhagic Hypertension Protocol

**Version 1 5/23/14**

- After provider order for initiation of a protocol, nursing may place orders found within the protocol using the Policy/Protocol - No Esign Req order source.

### Medications

Antihypertensives: Reminders

- For systolic BP greater than 180 mm Hg or mean arterial pressure greater than 130 mm Hg and suspected elevated ICP, consider ICP monitoring and use intermittent or continuous antihypertensive to maintain cerebral perfusion pressure greater than or equal to 60 mm Hg

Antihypertensives

For Systolic Blood Pressure 150-200 mmHg or Diastolic Blood Pressure > 105 mmHg SELECT:

- For patients without contraindications who have intracerebral hemorrhage with systolic BP between 150 and 220 mm Hg, consider reduction to < 140 mm Hg.

labetalol 5 mg/mL IV

- 10 milligram intravenous push over 1-2 minutes for SBP > 150 mmHg or DBP > 105 mmHg; May repeat or double every 10 minutes. If blood pressure not controlled in 3 doses discontinue and start niCARDipine

If blood pressure not controlled with labetalol IV push doses SELECT:

niCARDipine (CARDENE) in D5W 25 mg/250 mL (0.1 mg/mL) IV

- 5 milligram/hour continuous intravenous infusion and titrate to keep SBP less than 150 mmHg or DPB less than 105 mmHg by increasing infusion by 2.5 milligram/hour every 5-15 minutes to a maximum of 15 milligram/hour Monitor BP every 10 minutes if elevated

If Blood Pressure not controlled by niCARDipine infusion SELECT:

nitroprusside (NIPRIDE) 50 mg/250 mL NS

- 0.5 microgram/kilogram per minute continuous intravenous infusion and titrate to keep SBP less than 150 mmHg or DPB less than 105 mmHg [MAX 10 microgram/kilogram per minute] Monitor BP every 10 minutes if elevated

For Systolic Blood Pressure > 200 mmHg or Mean Arterial Pressure > 150 mmHg SELECT:

- For systolic BP greater than 200 mm Hg or mean arterial pressure greater than 150 mm Hg, consider aggressive BP reduction with a continuous IV antihypertensive and reevaluate every 5 minutes

niCARDipine (CARDENE) in D5W 25 mg/250 mL (0.1 mg/mL) IV

- 5 milligram/hour continuous intravenous infusion and titrate to keep SBP less than 150 mmHg or DPB less than 105 mmHg by increasing infusion by 2.5 milligram/hour every 5-15 minutes to a maximum of 15 milligram/hour Monitor BP every 5 minutes if elevated

If Blood Pressure not controlled by niCARDipine infusion SELECT:

nitroprusside (NIPRIDE) 50 mg/250 mL NS

- 0.5 microgram/kilogram per minute continuous intravenous infusion and titrate to keep SBP less than 150 mmHg or DPB less than 105 mmHg [MAX 10 microgram/kilogram per minute] Monitor BP every 5 minutes if elevated

### IV/ Line Placement

IF niCARDipine or nitroprusside continuous infusion is initiated SELECT:

- Arterial IV insert/maintain