

(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: _____

ED Alcohol Withdrawal CIWA-Ar > 20 Meds

Version 1 8/18/15

- This order set is for patients being transferred to ICU in which the Alcohol Withdrawal Order Set was previously ordered for.

Active Withdrawal Treatment - LORazepam (ATIVAN) Dosing Protocol

CIWA-Ar Score greater than 20

Continuous Infusions

LORazepam (ATIVAN) (1mg/mL)

- 1 milligram/hour continuous intravenous infusion AND titrate to target RASS score of 0 during the day, -2 during the night

dexmedetomidine 400 mcg/100 mL (4 mcg/mL) in 0.9 % sodium chloride IV (PRECEDEX)

- 0.2 microgram/kilogram per hour continuous intravenous infusion AND titrate in increments of 0.2 microgram/kilogram per hour every 5 minutes to target RASS score of 0 during day and -2 during night MAX 1.5 microgram/kilogram per hour

Provider Signature: _____ Date: _____ Time: _____