Children's Hospital of Eastern Ontario
Centre hospitalier pour enfants de l'est de l'Ontario

PHYSICIAN ORDERS
for
OPIOID ANALGESIA
IN THE
EMERGENCY DEPARTMENT

Patient Identification

Weight: _____ kg Height: _____cm Allergies: _____

Initial on all lines applicable

- Notify Child Life Specialist for procedural support

DIET:

_____ NPO

VITAL SIGNS/MONITORING:

- For INTRAVENOUS narcotics: Monitor level of consciousness, HR, RR, BP and pain score prior to therapy and Q10min for 30 minutes. Continuous oxygen saturation monitoring for 30 minutes. If patient to go to XRAY post IV narcotics, they must either wait after the 30 minute monitoring period and be accompanied by a family member or HCA in a wheelchair/stretcher, OR they must be accompanied by an RN if they go before the 30 minute monitoring period.
- For INTRANASAL narcotics: Monitor level of consciousness, HR, RR, BP and pain score prior to therapy and at 10 min post administration x 1. If patient to go to XRAY post IN fentanyl, they must be accompanied by a family member or HCA in a wheelchair/stretcher
- For both IV and IN narcotics minimize ambulation post-administration

FLUIDS:

_____ IV bolus 0.9% NaCl _____ mL over _____ minutes

_____ IV 0.9% NaCl at _____mL/h

_____ IV D5W/0.9% NaCl at _____mL/h

MEDICATIONS:

_____ **FentaNYL** _____mcg (1.5 mcg/kg/dose, MAX 100 mcg) Intranasal x 1 dose; give 50% in each nostril

_____ **Morphine** _____mg (0.05 – 0.1 mg/kg/dose, initial MAX 5 mg/dose) IV; may repeat x 1 after 15 minutes then Q2H PRN

_____ **Morphine** _____mg (0.2 – 0.3 mg/kg/dose, initial MAX 10 mg/dose) PO Q4H PRN

_____ **Ondansetron** _____mg (0.1 mg/kg/dose, MAX 4 mg/dose) IV Q6H PRN (MAX of 3 doses/day)

Other:_____

Do not use Ketamine within 30 minutes of an opioid medication due to increased risk of respiratory adverse events

_____	_____	_____
PHYSICIAN SIGNATURE	PRINT NAME OF PHYSICIAN	DATE & TIME
_____	_____	_____
NURSE SIGNATURE	PRINT NAME OF NURSE	DATE & TIME