ASSESS PATIENT’S NEEDS!

ANALGESIA
WITH SEDATION

PATIENTS ALLERGIC
sensitive to morphine
or
Personal preference

Patients allergic

Routine Analgesia/
Sedation

FENTANYL
Initial: 1-2 mcg/kg
Usual Dosage Range: 0.5-1mcg/kg/hr
START BOWEL PROGRAM

>>more pophilic vs morphine
>>usual half life: 30-60 min
(prolonged admin = 9-16 hrs)
>>little euphoric effect

ROUTINE
SEDATION

LORAZEPAM
Bolus: 1-4mg q 1-4 hrs

Adequate Sedation?

YES

Continuous Infusion
Rebolus: 1-4 mg
Initial: 0.4-4mg/hr
Usual Maintenance Range: 1-4mg/hr
Titration: 0.4-1mg/hr
START BOWEL PROGRAM

REASSESS PATIENT’S NEEDS!

>>Maximize lorazepam (10-15mg/hr)

>>REASSESS PATIENT’S NEEDS
-pain?
-ICU psychosis?

Comments
1. Hydromorphone
  - more potent vs morphine
  - less euphoria vs morphine
2. Meperidine . . . NOT RECOMMENDED
  - active metabolite can accumulate and cause
    CNS excitation
3. Withdrawal of narcotics
  - long-term use (>4 days)
  - signs/symptoms: restlessness, lacrimation, rhinorrhea, twitching, spasms, autonomic
    instability, anorexia, anxiety
  - consider weaning drip ~ 10-20%/day