

Modified NMBA PowerPlan for Critical Care Providers and Nurses

Cerner PowerChart **EDUCATION**













NMBA PowerPlan

Providers: See the SPAD PowerPlan for the appropriate management of a patient before initiating NMBA therapies. When ordering the Vecuronium (Norcuron) Drip or Rocuronium (Zemuron) Drip NMBA *Paralytic* PowerPlan, the SPAD PowerPlan sedation goal "Comments" must be adjusted to reflect new RASS Goal of <-3.

Vecuronium (Norcuron) Drip or Rocuronium (ZEMURON) Drip NMBA *Paralytic*

Providers and Nurses:

- Patient sedation must be at RASS score <-3 before initiating paralysis. Details noted in the PowerPlan.
 - It is important to achieve adequate analgesia and sedation prior to the initiation of an NMBA.
 - Pain and RASS cannot be monitored accurately during paralysis.
- See NMBA guidelines for Algorithm and Key points.
- Note printable reference texts located in the PowerPlan (Train of Four, Vecuronium, Rocuronium, NMBA Guidelines).

Vecuronium (Norcuron) Drip or Rocuronium (ZEMURON) Drip NMBA *Paralytic* (Initiated Pending)		
Patient Care		
	Ensure patient is on continuous infusion sedative (propofol, lorazepam or midazolam) AND continuous infusion analgesic (ex. fentanyl) titrated to a goal RASS of < -3 PRIOR to administration of NMBA. Update RASS goal in ALL sedatives/analgesics to < -3 while NMBA is ordered.	
<input checked="" type="checkbox"/>	 Train of Four (TOF)	q1hr, monitoring, Goal Train of Four: 2 / 4 Monitor q1hr initially until a stable Train of Four is reached (at least 2 consecutive scores at goal)
<input type="checkbox"/>	 Train of Four (TOF)	q4hr, monitoring, Goal Train of Four: 2 / 4 Monitor q1hr initially until a stable Train of Four is reached (at least 2 consecutive scores at goal)
Medications		
<input checked="" type="checkbox"/>	 Note	1 Note, Note, ONCE, STAT Nurse/Pharmacist: Ensure patient is on continuous infusion sedative (propofol, lorazepam or ...)
<input checked="" type="checkbox"/>	 ocular lubricant (Lacri-Lube S.O.P. ophthalmic ointment)	1 Appl, Eye-Both, Ophth Oint, q6hSTD Apply a small amount of ointment to inside of eyelid of each eye every 6 hours while on NMBA...
Vecuronium (NORCURON)		
<input checked="" type="checkbox"/>	 PRN ventilator dyssynchrony - bolus dose - VECuronium (NORCURON)	vecuronium (VEcuronium *PARALYTIC* IVPush) 0.1 mg/kg, IVPush, Inject, q1hr, PRN See comment, NOW PRN ventilator dyssynchrony defined as sustained plateau airway pressures > 35 cmH2O AND/...
<input type="checkbox"/>	 DRIP with initial bolus dose - VECuronium (NORCURON)	vecuronium (VEcuronium *PARALYTIC* IVPush) 0.1 mg/kg, IVPush, Inject, ONCE, NOW Maximum dose 10mg, doses greater than 10mg at physician discretion only.
<input type="checkbox"/>	 vecuronium (Vecuronium Drip (Paralytic) - TITRATE)	0.8 mcg/kg/min, up to a **Maximum Rate of 1.7 mcg/kg/min, TITRATE - PARALYTIC, IV, 0, 100 ... Titrate up or down by 0.3 mcg/kg/min every 1 hour to achieve goal Train of Four: of 2/4. Moni...
Rocuronium (ZEMURON)		
Provider Note: Rocuronium to be used as an ALTERNATIVE ONLY IF VECURONIUM NOT AVAILABLE		
<input type="checkbox"/>	 PRN ventilator dyssynchrony - bolus dose - Rocuronium (ZEMURON)	rocuronium (ROcuronium*PARALYTIC* IVPush) 1 mg/kg, IVPush, Inject, q1hr, PRN See comment PRN ventilator dyssynchrony defined as sustained plateau airway pressures > 35 cmH2O AND/...
<input type="checkbox"/>	 DRIP with initial bolus dose - Rocuronium (ZEMURON)	rocuronium (ROcuronium*PARALYTIC* IVPush) 1 mg/kg, IVPush, Inject, ONCE, NOW Maximum dose 100mg, doses greater than 100mg at physician discretion only.
<input type="checkbox"/>	 rocuronium (Rocuronium Drip (Paralytic) - TITRATE)	8 mcg/kg/min, up to a **Maximum Rate of 12 mcg/kg/min, TITRATE - PARALYTIC, IV, 0, 50 mL... Initial rate 8 mcg/kg/min, titrate up or down by 1 mcg/kg/min q10 min to achieve goal Train o...
Protocols/Standards		
<input checked="" type="checkbox"/>	 NMBA Guideline	Note Reference Text-View and Print for Algorithm

Documentation of Paralyzed Patient

Before initiating NMBA:

- Achieve and document RASS of less than negative three (<-3) before administering a NMBA.
- Document Train of Four ○ Document intensity baseline.
- IV Drips.

After initiation of a NMBA, document hourly and with every Titration/Bolus:

1. Train of Four.
2. RASS.
3. Titration/Bolus.

	13:00 EDT	12:00 EDT	11:00 EDT	10:00 EDT	9:00 EDT	8:00 EDT	7:00 EDT	6:45 EDT	6:30 EDT
Call the Provider (3)					4 (2) 020				
Call the Provider (1)									
1 Patient requiring increased analgesia and sedation with ventilator dyssynchrony									
If dyssynchrony persists Call the Provider									
2 Achieve RASS <-3 Document Train of Four Give IVP paralytic									
If dyssynchrony persists Call the Provider									
3 Begin paralytic continuous infusion. Document Train of Four Document IV Drips q1h and PRN									
Critical Care Neuro									
Train of four	2 twitches	2 twitches	2 twitches	2 twitches	2 twitches	2 twitches	2 twitches	4 twitches	
IV Drips									
Fentanyl ADDITIVE 2,500 mcg Bolus mL									
+ NS 0.9% for Fentanyl TITR... Rate mL/hr	17.5	17.5	17.5	17.5	17.5	17.5	17.5	17.5	15
fentaNYL mcg/hr	175	175 mcg/...	175	175	175	175	175	175	150
Propofol Drip - TITRATE Bolus mL									
1,000 mg Rate mL/hr	15.75	15.75	15.75	15.75	15.75	15.75	15.75	13.5	13.5
propofol mcg/kg/min	35	35 mcg/...	35	35	35	35	35	30	30
Vecuronium Drip Bolus mL									
(Paralytic) - TITRATE 100... Rate mL/hr	3.6	3.6							
vecuronium mcg/kg/min	0.8	0.8 mcg/...							
Mental Status View									
Richmond Agitation Sedation Scale	-5 no re...	-5 no re...	-5 no re...	-5 no re...	-5 no re...	-5 no re...	-5 no re...	-4 no re...	0 alert ...
Focus Notes									
Topic, Focus			Other: V...	Other: V...	Other: V...	Other: V...	Other: V...	Other: V...	Other: Vent Dyssynchrony