



**HOT TIP**  
January  
2019

# Northern Health Palliative Care

## Palliative Care Order Sets

### Goals

- To improve early recognition of symptoms
- To standardize and support consistent care across multiple care settings
- To guide initial treatment of palliative symptoms with evidence based medication (utilizing 1<sup>st</sup> and 2<sup>nd</sup> line medication)
- To prevent delay in symptom management
- To prevent crisis by dealing with symptoms in a timely manner
- To treat crisis in a timely fashion when it does occur
- To provide autonomy and capability of direct care providers to administer medications when necessary
- To promote seamless transitions between care areas

### Forms

- [Adult Palliative Care Orders for Hospital Inpatients 10-111-5204](#)
- [Adult Palliative Care Orders for Outpatients, D Beds and Symptom Management Kits 10-111-5204-001](#)
- [Adult Palliative Care Crisis Event Orders for Hospital Inpatients 10-111-5193](#)
- [Adult Palliative Care Crisis Event Orders for Outpatients, D Beds and Symptom Management Kits 10-111-5193-001](#)

### Notable Changes:

- Addition of outpatient order sets that mirror inpatient order sets
- Removal of atropine eye drops for respiratory secretions
- Change to glycopyrrolate subcutaneous for respiratory secretions
- Addition of midazolam to the crisis orders for a severe bleed
- Slight changes to guidelines for nausea management
- Dose stacking for agitation
- Change to lorazepam for seizures
- Addition of PEG 3350 to the bowel protocol

**northern health**  
All Sites and Facilities  
Adult Palliative Care 4  
D Beds and Symptom Management Kits

**northern health**  
Regional Order Set  
Adult Palliative Care Crisis Event Orders  
for Outpatients, D Beds and Symptom Management Kits

Page 1 of 1 PATIENT LABEL

Allergies:  None known  Unable to obtain  
[List with reactions]

1. Severe pain/burden of breath (score of 7/10 or greater) or a Terminal Crisis Event  
 Call the physician  
 Physician to complete a physical assessment of the patient within 30 minutes  
 Consult a palliative care consult  
 1.  Oxycodone All orders for opioids to be provided utilizing outpatient duplicate prescriptions. Provide opioid choice and dose subcutaneous, maximum quantity of 3 doses, with recommended directions of use dose (start and may repeat q30mins x 3 PRN (until first sign of pain breaking). If not settled, call physician.  
 2.  Fentanyl  Hydromorphone  
 3.  Morphine  
 4.  Oxycodone  
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