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 1st and 2nd 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
the northern way of caring