

Protamine Ordering-Protocol Review

Allergy/AdvReac	Type	Severity	Reaction	Date	Verified
No Known Drug Allergies	Allergy		Unknown	10/13/23	Yes
pineapple	AdvReac		Unknown	10/13/23	Yes

Orders with Activity	Instructions	Status	Source
<input type="checkbox"/> protamine protamine 50 mg/5 mL Vial U000001516 ...	0 MG IV ONCE ONE 11/08/24 1116 -11/08/24 1117 MAIN.PR...	Unverified Protocol	OM - GARY.TE... Hospitalist... Provider

View Order Data

Incomplete Reasons

Rule Error detected on order (RXPROTD001 - Protamine Calcdose match Dose)

Protocol

Protocol Queries

Protamine dose (mg): 37.5

Reversal of: Unfractionated Heparin
 Dosing per 100 units of heparin: 0.5 mg
 Amount of heparin given (units): 7500
 Dosing per 1 mg of enoxaparin:
 Amount of enoxaparin given (mg):

- Max dose of 50 mg protamine IV once
- Provider please populate calculated dose on order.
- Unfractionated Heparin Reversal
- < 60 minutes since heparin administration or infusion stopped
- 1 mg protamine per 100 units heparin given as a bolus or
- total administered heparin during the last 2 hours of infusion
-
- 1-3 hours since heparin administration or infusion stopped
- 0.5 mg protamine per 100 units heparin given as a bolus or
- total administered heparin during the last 2 hours of infusion
- Enoxaparin Reversal
- < 8 hours since enoxaparin administration

Protamine orders will have a Protocol attached that calculates the dose based off the options selected by the provider.

From the Patient Profile, clicking on the lower case "i" will display the protocol information attached to the order.

Medication Taper Protocol Chemo Comments Instructions Queries Screenings Provider

Rx Number: U000001516 protamine 50 mg/5 mL Vial

Protamine dose (mg): **37.5**

Reversal of: Unfractionation

Dosing per 100 units of heparin: 0.5 mg

Amount of heparin given (units): 7500

Dosing per 1 mg of enoxaparin:

Amount of enoxaparin given (mg):

- Max dose of 50 mg protamine IV once
- Provider please populate calculated dose on order.

1 of 2 Goto 2

Cancel Save

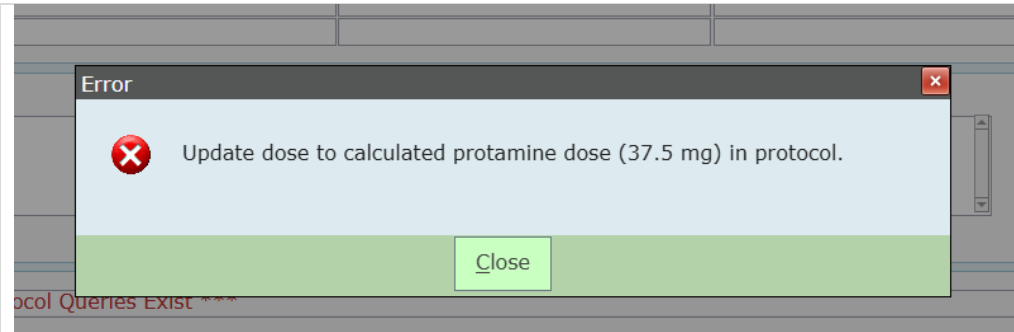
Edit/View Protocol Queries Cancel Save

During order verification, selecting the Protocol tab will display the entire protocol.

*Note there are 2 pages to this protocol.

The calculated Protamine dose (mg) can be found at the beginning of the protocol.

Protamine Ordering-Protocol Review



When filing the order, a rule will direct the pharmacist to update the Dose to match the Calculated Dose in the protocol.

*Note, this rule will prevent the order from auto verification in the EDM.

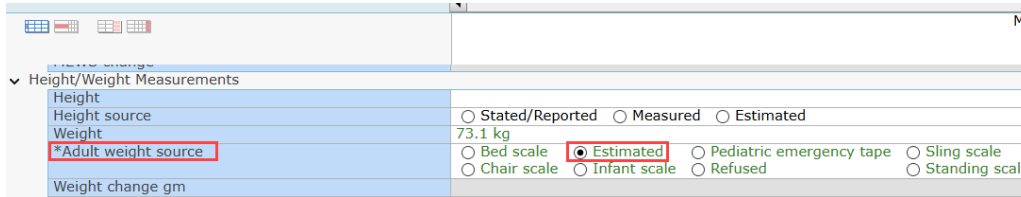
The form shows medication details for "Protamine 50 mg/5 mL Vial". It includes fields for Rx Number (U000001516), Medication (PROT10V), Order Type (M), and Dosing Wt. The main form has a "Dose" field set to 0 MG. A red arrow points from this field to a pop-up window showing the "Calculated Dose" of 37.5 MG. The pop-up window also shows "3.75 ML PER DOSE" and other order details like Route (IV), Frequency (ONCE), and Schedule (one time only @ONCE). Buttons for "View Provider Order Details", "Cancel", and "Save" are at the bottom.

The pharmacist must update the '0' dose to the dose calculated in the protocol to File the order.

MEDITECH Expanse TIP SHEET

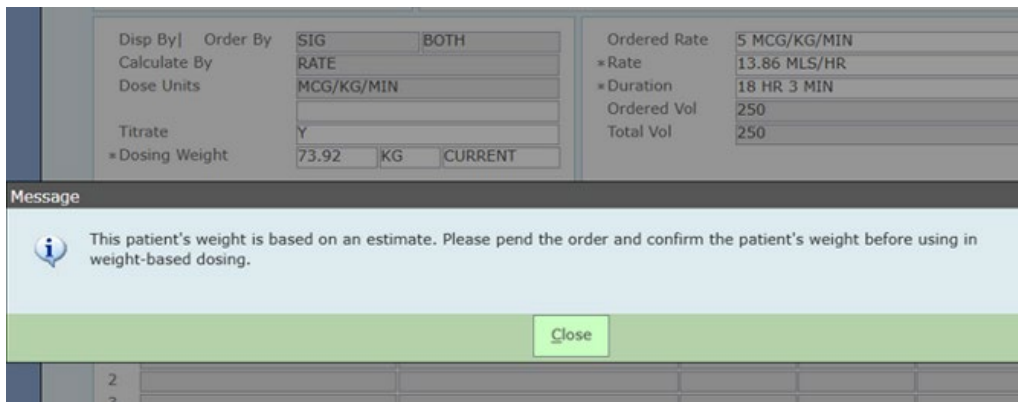
Pharmacy Estimated Weight Alert

Verifying Weight-Based Dosing Orders When the Patient's Weight is Estimated




Height	<input type="radio"/> Stated/Reported <input type="radio"/> Measured <input type="radio"/> Estimated
Height source	
Weight	73.1 kg
*Adult weight source	<input checked="" type="radio"/> Estimated <input type="radio"/> Pediatric emergency tape <input type="radio"/> Sling scale
	<input type="radio"/> Bed scale <input type="radio"/> Chair scale <input type="radio"/> Infant scale <input type="radio"/> Refused <input type="radio"/> Standing scale
Weight change gm	

When documenting the patient's weight in the Vital Signs>Height/Weight Measurements, the nurse can select "Estimated" as the Adult weight source.



Disp By	Order By	SIG	BOTH	Ordered Rate	5 MCG/KG/MIN
Calculate By	RATE	*Rate	13.86 MLS/HR	*Duration	18 HR 3 MIN
Dose Units	MCG/KG/MIN	Ordered Vol	250	Total Vol	250
Titrate	Y				
*Dosing Weight	73.92 KG CURRENT				

Message

 This patient's weight is based on an estimate. Please pend the order and confirm the patient's weight before using in weight-based dosing.

[Close](#)

When verifying a weight-based medication order, if "Estimated" has been selected as the source of the last documented patient weight in PCS, the pharmacist will receive an alert.

The alert will instruct the pharmacist to pend the order and verify the patient's weight.

The pharmacist should click "Close" to pend the order and confirm the patient's weight before verifying the order.

MEDITECH Expanse TIP SHEET

Pharmacy

Hypoglycemia Protocol Not Ordered Rule-Updated

Rx Number: NEW
*Medication: INSU20V7 HumuLIN R
*Order Type: M Medication
Clinical Ind: Dosing Wt: CURRENT

NOTE: Dose Range Checking is not supported for Zero/Ranged dose orders.

*Dose: 1 UNIT 0.01 ML PER DOSE
Range Dose Low: High
*Route: SUBO Subcutaneous
*Frequency:
*Schedule| Par Le:
*Start Date| *Time:
Total Doses:
Bulk:
*Inventory: MAIN.PKMC *Charge Type: NOCALC

Error
Patient does not have Hypoglycemic Medication on Profile
Close

All patients receiving scheduled Insulin, should have Hypoglycemia rescue medications available to them.

A rule has been created to alert the pharmacist when a patient does not have at least ONE of the following medications (Active or Unverified) present on their profile.

Dextrose 4 mg Tablet
Dextrose 40% (Glucose) Gel
Dextrose 50% Inj
Glucagon Inj
Dextrose 10%

You will not be able to File the order until a Hypoglycemia Protocol medication is entered onto the profile.

This rule is excluded from ED orders doses and any order less than or equal to 10 units.

MEDITECH Expanse TIP SHEET

Partial Form Rule-Updated to Appear in Audit Trail



Entering or Verifying an Order Requiring a Partial Tablet or Capsule

Rules			
PHA	Date-Time	User	Evaluated At
PHA Partial Dose Alert	09/10/24-0917	GT05204	FILE

Rx Number	U000003631	furosemide 40 mg Tablet
* Medication	FURO40TA54	Lasix
* Order Type	M	Medication
Clinical Ind	Dosing Wt	100 KG CURRENT

NOTE: Dose Range Checking is not supported for Zero/Ranged dose orders.

* Dose	20	MG	0.5 TabletS PER DOSE
Range Dose Low	High		
* Route	PO	Oral	

Partial Form rule will now be recorded in the **Rx Audit Trail**.

This rule triggers for any order with a **decimal** in the **Per Dose field** and whose **form contains "Tab" or "Cap"**. This includes all regular, ER, XR, SL, etc. tablets and capsules.

The rule will evaluate when filing the order and evaluates for all routes, frequencies, and schedules.

Confirmation	
	Please ensure this ordered dose matches the most appropriate dispense form to reduce the need for splitting. Continue?
<input type="button" value="Yes"/>	<input type="button" value="No"/>

If the **Dose** results in a **partial form** (0.5 tablet, 0.25 Capsule, etc.) a **Yes/No Confirmation** message will display.

Answer **Yes** to approve the order and continue to file.

Answer **No** to return to the order and make edits.

Selection defaults to **No** to prevent accidental approval.

--	--