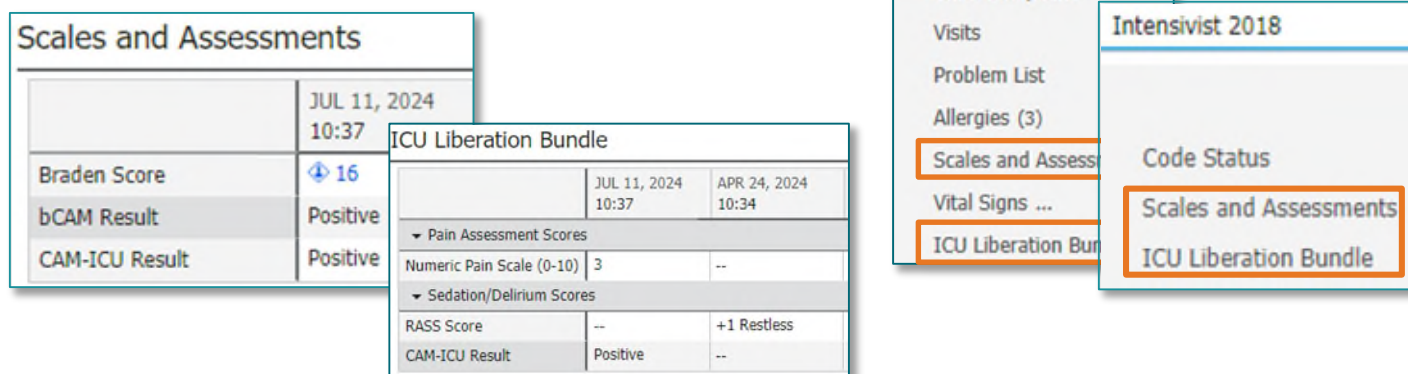


Providers can view nursing bCAM, CAM-ICU assessments, and RASS scores in Provider View. Delirium Management Adult PowerPlan has been created for managing delirium in the critical and non-critical patients and replaces the Delirium Therapy for Critical Care Adult and Delirium Prevention and Treatment Adult PowerPlans. Related Results will display the bCAM (Med/Surg patients) or CAM-ICU results.

### Provider View – Locating bCAM, RASS, and CAM Assessment Results

➤ Nursing assessments of delirium can be viewed in the **Inpatient 2018** and **Intensivist 2018** MPages in:

- **Scales and Assessments** component
- **ICU liberation Bundle** component



The image shows three overlapping screenshots of the Provider View interface. The leftmost screenshot, titled 'Scales and Assessments', shows a table with columns for assessment type, date, and time. It lists 'Braden Score' (16), 'bCAM Result' (Positive), and 'CAM-ICU Result' (Positive). The middle screenshot, titled 'ICU Liberation Bundle', shows a table with columns for assessment type, date, and time. It lists 'Pain Assessment Scores' (Numeric Pain Scale 0-10: 3), 'Sedation/Delirium Scores' (RASS Score: +1 Restless, CAM-ICU Result: Positive), and 'ICU Liberation Bundle' (Positive). The rightmost screenshot shows the 'Inpatient 2018' and 'Intensivist 2018' MPages. The 'Inpatient 2018' page has a menu with 'Scales and Assessments' and 'ICU Liberation Bundle' highlighted. The 'Intensivist 2018' page has a menu with 'Code Status', 'Scales and Assessments', and 'ICU Liberation Bundle' highlighted.

- **Scales and Assessments** and **ICU Liberation Bundle** components can be moved in the **MPage** menu by clicking the component and dragging it to the desired location.
- Discuss delirium assessment scores, patient symptoms, and response to treatment in daily Multidisciplinary Rounds (MDR).
- To view multiple ICU patient results at once, use the **ICU Liberation Worklist** located in the toolbar.
  - If the patient is a pediatric ICU patient, use the **PICU Liberation Worklist**.
  - Click [here](#) for more information on using the ICU and PICU Liberation Worklists.

### Delirium Management Adult PowerPlan

- Search in the Order Catalog for the **Delirium Management Adult PowerPlan** by typing **Delirium** in the **Search** box within the **New Order Entry** component or the **Orders** tab in the Menu.



- The PowerPlan is used for **all patients** with delirium regardless of location in the hospital.
- Guidelines for use are located at the top of the PowerPlan as well as **Universal Precaution Measures** and **CAM positive Interventions** that nursing will use.

- Consider adding the **Delirium Management Adult PowerPlan** to Favorites.
- **Activity and Education** are preselected.
- **Medication** section contains the guidelines for medications.
- **Haldol** is available in Low Dose and High Dose with additional guidance for ordering.
    - **High Dose Haldol** is more appropriate in **Critical Care settings**.
    - Caution should be used in patients 60 years old or greater.
    - Baseline ECG if not done within past 72 hours.

Haloperidol (Haldol) is recommended first-line agent. AVOID haloperidol (Haldol) in patients with Parkinson's Disease, Lewy Body Dementia (consider QUETiapine (Seroquel)).

Use with caution in patients at risk for seizure. Avoid high doses of haloperidol (Haldol) or combinations of antipsychotics in patients with prolonged QT interval.

Use caution if total daily dose exceeds 20mg.

Low Dose Haldol

Baseline ECG if not done within past 72 hours

CV ECG

Single doses of haloperidol (Haldol) greater than 5 mg for two or more days require a daily ECG.

Priority Expedite, Reason Evaluate QTc, Evaluate QTc interval within 24 hours of starting haloperidol (Haldol), 24 hr, ONCE

+1 day

CV ECG

Priority Expedite, Reason Evaluate QTc, Evaluate QTc interval daily for any patient receiving greater than 5 mg of haloperidol (Haldol) for two or more days, Da...

Notify If

Notify provider if QTc 500 or greater

haloperidol (Haldol)

Select an order set

High Dose Haldol

Typically, more appropriate in Critical Care settings, use caution in patient 60 years old or greater.

Baseline ECG if not done within past 72 hours

CV ECG

Priority Expedite, Reason Evaluate QTc, Evaluate QTc interval within 24 hours of starting haloperidol (Haldol), 24 hr, ONCE

Single doses of haloperidol (Haldol) greater than 5 mg for two or more days require a daily ECG.

Priority Expedite, Reason Evaluate QTc, Evaluate QTc interval daily for any patient receiving greater than 5 mg of haloperidol (Haldol) for two or more days, Da...

Notify If

Notify provider if QTc 500 or greater, 24 hr

2.5 mg, Soln, IV Push, Every 30 Minute Interval, PRN, Other(comment), 2 Doses/Times, 24 hr

5 mg, Soln, IV Push, Every 30 Minute Interval, PRN, Other(comment), 2 Doses/Times, 24 hr

- **Related Results** will display the **bCAM** and **CAM-ICU** results when ordering the **Delirium Management Adult PowerPlan**.

Orders

Document Medication by Hx | Reconciliation \* | Check Interactions | External Rx History | No Check

Orders Medication List Document In Plan

View

Discontinue & Problems

Related Results (2)

bCAM Result

Positive 09/24/2024 16:32 EDT

Stupor/Coma, Unable to Assess 09/23/2024 9:00 EDT

CAM-ICU Result

Positive 09/04/2024 16:31 EDT

Agitated/Refused, Unable to Assess 09/03/2024 10:00 EDT

Negative 02/09/2024 8:49 EST

Delirium Management Adult (Planned Pending)

Admit/Dischq/Transfer

For patients 18 years or older who demonstrate positive CAM (Confusion Assessment Method) res...

acute/fluctuating course, disorganized thought and/or altered consciousness.

All patients aged 65 and older are at increased risk for delirium, especially:

- History of dementia or neurocognitive disorder
- Prior history of delirium when hospitalized.
- Having surgery

Consider discontinuing active orders for the following:

- Continuous pulse oximetry