

EMERGENCY DEPARTMENT PEDIATRIC CLINICAL DECISION TOOL

Nurse may Implement For all patients less than 13 years of age or adolescents less than 50 kg May use with <u>CLI.5110.PL.002</u> Addressograph Label Client Label DOB mm/dd/yyyy PHIN/MHSC# HRN

Allergies: Unknown No Yes (describe)	
Height (cm):Weight (kg):	ATIONIC
MEDICATIONS The following orders are active until patient is seen by a prescriber/transferred/discharged	
Users to apply CLI.5110.PL.002, CTAS and clinical judgement with use of this tool.	
\Box Requires a check (V) for activation	
Fever:	Shortness of Breath:
For temperature greater than 38°C:	For mild, moderate and severe respiratory distress with
□ Acetaminophen 15 mg per kg PO/PR = mg every	wheezing:
4 to 6 hours PRN (if not given in previous 4 hours) (maximum	□ Less than 20 kg: Salbutamol MDI (100 mcg/puff) 1 to 2 puffs
1000 mg per dose and 75 mg per kg per 24 hours or 4000 mg	via spacer (may repeat every 4 to 6 hours up to 3 times)
per 24 hours, whichever is less)	□ More than 20 kg: Salbutamol MDI (100 mcg/puff) 2 to 4 puffs
AND	via spacer every 20 minutes (may repeat every 20 minutes up
Ibuprofen 10 mg per kg PO =mg every 6 to 8	to 3 times)
hours PRN (if not given in previous 6 hours) (maximum 400	For severe respiratory distress with wheezing, add below:
mg per dose and 40mg per kg per 24 hours; Contraindicated	Less than 20 kg: Ipratropium MDI (20 mcg/puff) 2 to 4 puffs
with history of asthma, bleeding disorder, renal impairment,	via spacer (may repeat every 20 minutes as needed for up to
or history of GI bleed, ASA or NSAID allergy. Not for children less than 6 months old.)	3 hours)
	More than 20 kg: Ipratropium MDI (20 mcg/puff) 4 to 8 puffs
Pain:	via spacer (may repeat every 20 minutes as needed for up to 3 hours)
Exclusion criteria: Allergies or intolerance to analgesia, CTAS Level	
1, open fractures, amputation, multiple trauma, unstable vital	Lacerations:
signs, obtunded, Glasgow Coma Scale less than 14, head injury or	□ Apply LET (lidocaine, EPINEPHrine, tetracaine) gel with
headache with alteration in LOC, suspected or actual pregnancy	occlusive dressing on all lacerations requiring sutures 30
□ For painful or stressful procedures on infants less than 12	minutes prior to procedure, duration of action is 60 minutes
months of age, initiate Pain Relief in Infants Requiring	(do not use on mucous membranes)
Procedures Oral Sucrose <u>CLI.6010.SG.006</u>	For tetanus prophylaxis:
Acetaminophen 15 mg per kg PO = mg every 4	DTaP-IPV-Hib 0.5 mL IM for children less than 7 years of
to 6 hours PRN (if not given in previous 4 hours) (maximum	age , if vaccine history not up to date
1000 mg per dose and 75 mg per kg per 24 hours or 4000 mg per 24 hours, whichever is less)	□ Tdap 0.5 mL IM for patients 7 years of age or older who
\square Ibuprofen 10 mg per kg PO = mg every 6 to 8	have no history of Tdap immunization and for clients who
hours PRN (if not given in previous 6 hours) (maximum 400	are PREGNANT (optimal timing is between 27- and 32-
mg per dose and 40 mg per kg per 24 hours; Contraindicated	weeks' gestation, although Tdap may be given at any time during pregnancy)
with history of asthma, bleeding disorder, renal impairment,	Tetanus vaccine and tetanus immunoglobulin must be
or history of GI bleed, ASA or NSAID allergy. Not for children	administered at different injection sites.
less than 6 months old.)	
	Note: Tetanus immunoglobulin requires physician order.
Nurse or Prescriber Signature:	Date:Time:
Order transcribed: Date:Time:	Fax/Scan to Pharmacy: Date:Time:
Initials:	Initials:

CLI.5110.PL.002.FORM.02 Sept 23, 2024



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MEDICATIONS CONTINUED	
Allergic Reactions: For anaphylaxis, initiate black boxes on page 1 CLI.5110.SG.009.FORM.01 For cutaneous symptoms in the absence of respiratory symptoms: □ Cetirizinemg PO once • 6 months to 2 years old = 2.5 mg • 2 to 5 years old = 5 mg • Greater than 5 years old = 10mg Acute nausea and/or vomiting: □ □ Ondansetron mg PO every 8 hours PRN • Less than 15 kg = 0.15 mg per kg • 15.1 to 30 kg = 4 mg • Greater than 30 kg = 8 mg	Suspected Poisoning Management: Contact Poison Control 1-855-776-4766: If recommended: □ Activated charcoal 1 g per kg PO =g once (maximum 50 g per dose) - for all suspected oral overdoses within 1 - 2 hours of ingestion; must be alert with * GCS of ≥14 and cooperative. *high risk of aspiration with decreased LOC. (If closed ED, must transfer with ERS) Opioid Toxicity Management: □ Less than 5 years or less than or equal to 20 kg: Naloxone 0.1 mg/kg/dose IV/IM/subcut repeated every 2 - 3 min PRN □ Greater than or equal to 5 years or greater than 20 kg: Naloxone 2 mg/dose IV/IM/subcut repeated every 2 - 3 min PRN
GENERAL Intravenous (IV): IV to Normal Saline lock for any unstable patient Intraosseous (IO) to Normal Saline lock for nurses with certification EMLA cream-apply topically to skin 30 to 60 minutes prior to procedure Treatments: Oxygen per non-rebreathe or nasal prongs to maintain oxygen saturations greater than 92% unless known history of COPD Ring cutting when circulation has been impeded and when unable to remove ring Tissue adhesive/steri strips for minor lacerations (small, non-gaping, no active bleeding) Stat Glucometry for ALL diabetic patients and/or Altered Level of Consciousness Tests AVAILABLE FOR OPEN ED ONLY, RN may order under Reserved Act 2 & 10 (a-b) of RHPA	
 Acute Isolated Injury (less than or equal to 24 hours) of the low upper limb including fingers, hand, wrist, radius, ulna or humeri Excluding clients with multiple painful injuries, pregnant, cognit X-ray: Rapid Strep Urinalysis Pregnancy test Nurse or Prescriber Signature: Order transcribed: Date:	us.
Initials:	Initials: