





Patient Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

PHYO  
CMC84731-001NS Rev. 1/2021

**Hydroxocobalamin Injection  
Therapy Plan**

**ORDERS TO BE COMPLETED FOR EACH THERAPY**

**EMERGENCY MEDICATIONS, CONTINUED**

2. Hives or cutaneous reaction plus one other system, i.e. abdominal cramping, vomiting, hypotension, altered mental status, respiratory distress, mouth / tongue swelling **PATIENT IS HAVING ANAPHYLAXIS:**

- a. Stop the infusion
- b. Call code – do not wait to give epinephrine
- c. Give epinephrine as ordered
- d. Notify provider
- e. Check vitals including blood pressure every 5 minutes until the code team arrives.
- f. Connect patient up to monitor (cardiac / apnea, blood pressure and oxygen saturation), if not already on one.
- g. Give diphenhydramine once as needed for hives
- h. May repeat epinephrine every 5 minutes x 2 doses for persistent hypotension and respiratory distress with desaturation until code team arrives.
- i. May give albuterol as ordered for wheezing with oxygen saturations stable while waiting for code team – continue to monitor oxygen saturation.

**Hypotension is defined as follows:**

- 1 month to 1 year – systolic blood pressure (SBP) less than 70
- 1 year to 11 years – systolic blood pressure (SBP) less than 70 + (2 x age in years)
- 11 years to 17 years – systolic blood pressure (SPB) less than 90
- OR any age – systolic blood pressure (SPB) drop more than 30% from baseline.
- Baseline systolic blood pressure x 0.7 = value below defined as hypotension.

**EPINEPHrine Injection  
(AMPULE / EPI - PEN JR. / EPI - PEN)**

0.01 mg / kg, INTRAMUSCULAR, EVERY 5 MINUTES PRN, for anaphylaxis and may be repeated for persistent hypotension and respiratory distress with desaturation until the code team arrives, for 3 doses  
Use caution with PIV administration. This solution has a pH < 5, or a pH > 9, or an osmolality > 600 mOsm / L.

**Dose:** \_\_\_\_\_

**Cardio / respiratory monitoring rationale for monitoring:  
High risk patient (please specify risk)**

(Patient receiving infusion with potential infusion reactions);  
heart rate, respiratory rate, oxygen saturation  
Rationale for Monitoring: High risk patient (please specify risk)  
Parameters: heart rate, respiratory rate, oxygen saturation  
Alarm limits: preset at age specific limits

**diphenhydrAMINE injection**

1 mg / kg, INTRAVENOUS, ONCE PRN, for hives or cutaneous reaction, for 1 dose maximum dose = 50 mg per dose, 300 mg per day.

**Dose:** \_\_\_\_\_

**albuterol for aerosol**

0.25 mg / kg., INHALATION ONCE PRN, for wheezing, but oxygen saturations stable while waiting for code team, - continue to monitor oxygen saturation for 1 dose

**Dose:** \_\_\_\_\_

(circle one):  
MD DO

\_\_\_\_\_  
Signature of Provider

\_\_\_\_\_  
Credentials

\_\_\_\_\_  
Date

\_\_\_\_\_  
Time

\_\_\_\_\_  
Printed Name of Provider