

Patient weight:

Quality-Driven Responsible Compassionate

kg

First name:	5	Surname) :	
Hospital No:	NHS No:		DOB:	
Consultant:		Ward	: Hosp:	
Use addressograph	label			

The	Pennine Acute Hos	NHS Trust
	It is mandatory to complete ALLERGY STATUS: Medicine / Substance	this section Reaction

Date

Sign (NAME)

A&E SEDATION INFUSION CHART

			ACL SLD	ATIONI	141 031	OIY CIT	AIXI				
Drug:			Route:	Date:							
Propofol 1%			IV								
Dilution:	Dilution:		Start date:	Time:							
Ready diluted 10 mg/	mL										
Rate:			Stop date:	Sign:							
mL/hr (*max	4 mg/kg/hr)		•								
Signature:	Pharm		Stop sign:	Witness:							
	Body										
* Max propofol dose according to body	weight (kg)	45	50	> 50kg	consid	<u>ler swi</u>	tching	to 2%	propof	<u>ol</u>	
weight	Infusion		·			infı	fusion				
3	Rate (mL/hr)	18	20			<u> </u>	131011				
			<u> </u>								
			_		ı	ı	I	ı			
Drug:			Route:	Date:							
Propofol 2%			IV								

Drug:			Rou	te:	Date:									
Propofol 2%			IV	'										
Dilution:			Start date:		Time:									
Ready diluted 20 mg/mL														
Rate:			Stop o	date:	Sign:									
mL/hr (*max	4 mg/kg/hr)													
Signature:	Pharm		Stop	sign:	Witnes	s:								
	Body													
* Max propofol dose	weight (kg)	45	50	55	60	65	70	75	80	85	90)	95	100
according to body	Infusion													
weight	Rate (mL/hr)	9	10	11	12	13	14	15	16	17	18	3	19	20

Drug:		Route:	Date:			
Alfentanil	Alfentanil					
Dilution:		Start date:	Time:			
25 mg made up to 50mL with 0.9% sodium chloride						
Rate: 0 - 10 mL/hr		Stop date:	Sign:			
Signature:	Pharm	Stop sign:	Witness:			

Drug: Midazolam 1 mg/ml		Route:	Date:			
Dilution: 50 mg made up sodium chloride	to 50mLs with 0.9%	Start date:	Time:			
Rate: 0 - 10 ml/hr		Stop date:	Sign:			
Signature:	Pharm:	Stop sign:	Witness:			



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4 mg made up to 50mL with glucose 5%

Pharm

Rate:

0 – 10 mL/hr Signature:

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A&E INFUSION CHART

				/ ton= :		001011	01171						
Drug: Noradrenaline 80 m	crograms/mL	_		Route CVC		Date:							
Dilution: 4 mg made up to 50r with glucose 5%	nL			Start da	ite:	Time:							
Rate: 0 – 10 mL/hr				Stop da	ite:	Sign:							
Signature:	Pharm			Stop sig	gn:	Witness:							
Drug: Metaraminol 500 mio	rograms/mL			Route:		Date:							
Dilution: 20 mg made up to 40mL with NaCl 0.9% or glucose 5%				Start da	ite:	Time:							
Rate: 0 – 10 mL/hr				Stop da	ite:	Sign:							
Signature:	Pharm			Stop sig	gn:	Witness:							
Drug: Isoprenaline Sulphate				Route):	Date:							
Dilution: 2 mg made up to 500mL with 0.9% sodium chloride		Start da	ite:	Time:									
Rate: 0-150 ml/hr				Stop da	ite:	Sign:							
Signature:	Pharm			Stop sig	gn:	Witness:							
Drug: Dobutamine 5 mg/m	L			Route CVC		Date:							
Dilution: 250 mg made up to 5 0.9%	0ml with sodiu	ım chlo	ride	Start da	ite:	Time:							
Rate: mL/hr (*ma	x 600 microgrn	nasg/kg	ı/hr)	Stop da	ite:	Sign:							
Signature:	Pharm		<u> </u>	Stop sig	gn:	Witness:							
* Max dobutamine	Body weight (kg)	45	50	55	60	0 65	70	75	80	85	90	95	100
dose according to body weight	Infusion Rate (mL/hr)	5.4	6	6.6	7.:	2 7.8	8.4	9	9.6	10.2	10.8	11.4	12
							1		ı	Т		Г	
Drug: Adrenaline				Route: CVC		Date:							
Dilution:				Start dat	ρ.	Time:	Ī	1				l l	

Stop date:

Stop sign:

Sign:

Witness:



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