

Cyanokit Alert Protocol & Rules Update

Cyanokit Alert Protocol

Protocol	
Old	Cyanokit Shortage Alert
•	Cyanokit may have SERIOUS quality issues and is on shortage.
•	Reserve for smoke inhalation ONLY.
•	Must be administered with appropriate 0.2 micron filter.
* I confirm Cyanokit is being used to treat smoke inhalation:	
<input type="button" value="Yes"/> <input type="button" value="No"/>	
New	Cyanokit Alert
•	Cyanokit may have SERIOUS quality issues.
•	Must be administered with appropriate 0.2 micron filter.
* I confirm Cyanokit is being used to treat smoke inhalation:	
<input type="button" value="Yes"/> <input type="button" value="No"/>	

Verbiage in the Cyanokit Alert protocol and the associated PHA rule has been updated to remove mentions of “shortage” and “reserve for smoke inhalation only”.

No change in verbiage for NUR MAR rule.

Cyanokit PHA Alert

Cyanokit Shortage PHA Alert
Old
*****patient Safety Alert*****
Cyanokit may have SERIOUS quality issues and is on shortage
Reserve for smoke inhalation ONLY
Dispense with appropriate 0.2 micron filter for administration
New
*****Patient Safety Alert*****
Cyanokit may have SERIOUS quality issues
Dispense with appropriate 0.2 micron filter for administration

Cyanokit NUR MAR Alert – No Change

 This medication requires a 0.2 Micron Filter
Use filter provided by pharmacy

DKA Insulin Infusion Max Initial Rate Rule

Rx Number: U000002374 insulin regular in NS 100 UNIT/100 ML Bag

*Route: IV Intravenous

*Frequency: TITRATE titrate @Daily

*Schedule: SCH

PRN Reason:
 Clinical Indication:

 *Start Date: 02/03/26 *Time: 0730

Total Bags:
 Total Volume to Infuse:

 Stop Date:
 Time:
 Soft Stop:

 Inv Substitute:
 *Inventory: MAIN.PRNH
 *Dispense: 0 Bags
 *Last Bag: 0
 Cart Amount: 0

*Charge Type: NOCALCIV
 *Charge: Pending
 0.00

Label Comments:
 DKA Insulin Infusion

Verification Rule

DKA Insulin infusions have a max initial rate of 10 units/hr.

To tell these drips apart from others that do not have a maximum initial rate, we are adding the keyword “DKA Insulin Infusion” on the first line of the label comments.

The rule will look for this keyword to determine when it should be evaluated. (Order sets will need to be updated with label comments)

Order By: SIG BOTH
te By: RATE UNIT/HR
nits: Y
Weight: 135 KG CURRENT

Fluid: 100P %Conc:
 insulin regular in NS (100 UNIT/100 ML)

Ordered Rate: 13 UNIT/HR
*Rate: 13 MLS/HR
*Duration: 7 HR 42 MIN
Ordered Vol: 100
Total Vol: 100

Confirmation: DKA protocol initial max rate of 10 UNIT/HR is exceeded. Click NO and update ordered rate to 10 UNIT/HR if applicable or click YES to continue with current rate.

Yes No

Insulin infusions can be ordered by units/hr or units/kg/hr.

The rule will evaluate either ordered rate and display a message to the verifying pharmacist if the maximum initial rate of 10 units per hour is exceeded.

This rule functions as a soft stop and can be overridden by the pharmacist.

Medications Rx Information Protocol Chemo Comments Instructions Queries Screenings Provider

Rx Number: U000002184 Order Type: IV TITRATE

Disp By: Order By: SIG: BOTH
Calculate By: RATE: **0.1 UNIT/KG/HR**
Dose Units: UNIT/KG/HR

Titrate: Y
*Dosing Weight: 135 KG CURRENT

Ordered Rate: 0.1 UNIT/KG/HR
*Rate: 13.5 MLS/HR
*Duration: 7 HR 25 MIN
Ordered Vol: 100
Total Vol: 100

IV Fluid: 1 INSU100P insulin regular in NS (%Conc: 100) Ordered Dose: 100 UNIT Volume: 100 ML

1 2 3 * Dosing Weight: 135 KG CURRENT

Confirmation
DKA protocol initial max rate of 10 UNIT/HR is exceeded. Click NO and update ordered rate to 0.07 UNIT/KG/HR if applicable or click YES to continue with current rate.

Calculated To: 2
QS Drug: 2
QS Volume: 2

View Provider Order Details | Enter Smart Pump Data | Cancel | Save

For the ordered rates in units/kg/hr, the rule will calculate a new rate in units/kg/hr if the 10 units/hr is exceeded.

MEDITECH Expanse TIP SHEET

PHA



Remove trailing zeros on oral syringes

Trailing zero on the label fragment for Oral Syringes is being corrected

Before Fix

HCAH Medical Center ROOM: BP.3SP0DA BP.303-A
MAR,TEST ACCT# BP0000015695
ADULT DOB:01/01/74 AGE:52 SEX: M HT:177.80cm WT:100 kg

RX#PP000006330 START: 01/08-1130 STOP:
amoxicillin 250 mg/5 mL Oral Suspension
DOSE: 50 MG (**1.0 ml**)
RTE: PO SIG: Q6H DISP#3
Prep By: _____ Storage Temp:
Chk By: _____ Room / Fridge
Do Not Use Beyond Dt/Tm: _____ / _____

After Fix

HCAH Medical Center ROOM: BP.3SPODA BP.303-A
MAR, TEST ACCT# BP0000015695
ADULT DOB:01/01/74 AGE:52 SEX: M HT:177.80cm WT:100 kg

RX#PP00006342 START:02/05-1030 STOP:
amoxicillin 250 mg/5 mL Oral Suspension
DOSE: 50 MG (1 ML)
RTE:PO SIG:Q6H DISP#3
Prep By: _____ Storage Temp:
Chk By: _____ Room / Fridge
Do Not Use Beyond Dt/Tm: _____ / _____

Duplicate Label Prints on Next Full Label

***** DUPLICATE LABEL *****
(continued)



Correction to Standard IV Label Fragment

Label fragments will be updated to more clearly define Dose/Volume.

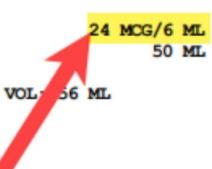
Before Fix

Spotsylvania Hospital Y.SUROP -
ACCT#
ADULT DOB: AGE: SEX: F HT:170.18cm WT:96 kg
RX# BAG# DUE:
===== DISCONTINUED =====

desmopressin 4 mcg/mL Injectable
sodium chloride 0.9% 50 mL Bag
ROUTE:IV SIG: ONCE
RATE:100 MLS/HR (33 MIN 36 SEC) TOT VOL: 56 ML
Prep By: Storage Temp:
Chk By: Room / Fridge
Do Not Use Beyond Dt/Tm: /
(continued)

Appears like a concentration

24 MCG/6 ML
50 ML



After Fix

Spotsylvania Hospital Y.4MEDSURG Y.4120-
PHATRNING, PATIENTSP192 DNDC ACCT#Y00000011274
ADULT DOB:05/27/68 AGE:57 SEX: F HT:172.72cm WT:82 kg
RX#SV000007665 BAG# DUE:
===== DISCONTINUED =====

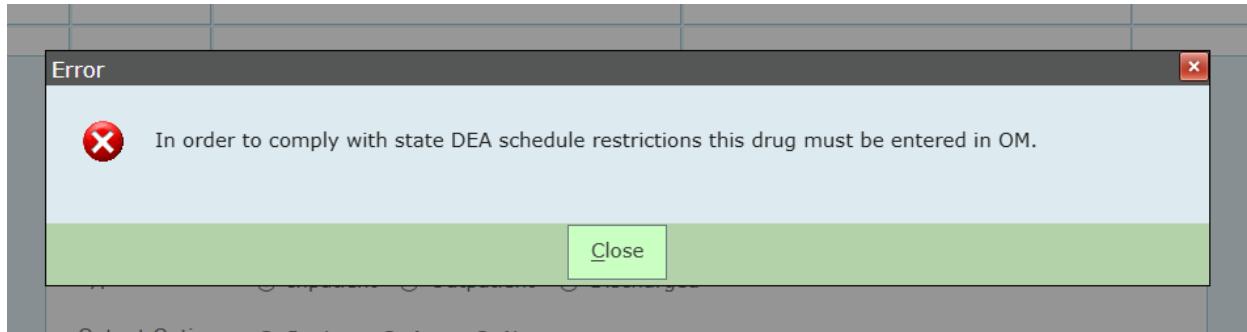
desmopressin 4 mcg/mL Injectable
sodium chloride 0.9% 50 mL Bag
ROUTE:IV SIG: ONCE
RATE:100 MLS/HR (33 MIN 36 SEC) TOT VOL: 56 ML
Prep By: Storage Temp:
Chk By: Room / Fridge
Do Not Use Beyond Dt/Tm: /
(continued)

24 MCG (6 ML)
50 ML

State Control Schedule more restrictive than Federal Control Schedule

EHR
Update

DEA Scheduling PHA Rule



Virginia

Medication order entry in Pharmacy is only able to check against the Federal Control Schedule of a medication for provider credential checking.

Medication order entry in OM, checks both the Federal and State Control Schedule and uses the more restrictive of the two when checking provider credentials.

To avoid the possibility of a pharmacist entering a medication where a provider may not have the appropriate DEA licensure, medications with a more restrictive State schedule **MUST** be entered via OM.

A rule has been developed to alert the pharmacist when attempting to order these medications in Pharmacy and directs them to enter the medication through OM.

Pediatric Insulin Protocols

Expanse Pharmacy

EHR

Update

Pediatric Insulin Protocols

<p>* Protocol</p> <p>PED Insulin Carbohydrate Ratio</p> <ul style="list-style-type: none">• Before Breakfast<ul style="list-style-type: none">* Administer insulin (units):* For carbohydrates (grams):• Before Lunch<ul style="list-style-type: none">* Administer insulin (units):* For carbohydrates (grams):• Before Dinner<ul style="list-style-type: none">* Administer insulin (units):* For carbohydrates (grams):• Before snack<ul style="list-style-type: none">* Administer insulin (units):* For carbohydrates (grams):	<p>Two Pediatric Insulin Protocols have been developed for use in order sets.</p> <ul style="list-style-type: none">• PED Insulin Carbohydrate Ratio• PED Insulin Correction Factor
<p>* Protocol</p> <p>PED Insulin Correction Factor</p> <ul style="list-style-type: none">• Target for blood glucose:<ul style="list-style-type: none">* Meals (mg/dL):* Bedtime (mg/dL): <p>Adjust insulin using Correction Factor (CF) 1 unit</p> <p>* per CF (mg/dL) above/below target BG (mg/dL):</p> <ul style="list-style-type: none">• How to calculate correction factor:<ul style="list-style-type: none">Subtract target from measured BG(i.e. measured BG minus Target BG = X)• Then X divided by correction factor = insulin adjustment• -Positive number = add to carb count insulin dose• -Negative number = subtract from carb count insulin dose <p>Document final dose of insulin administered in EMAR</p>	

OM Apply To Protocols Update

Expanse Pharmacy

EHR
Update

OM Apply To Protocols Update

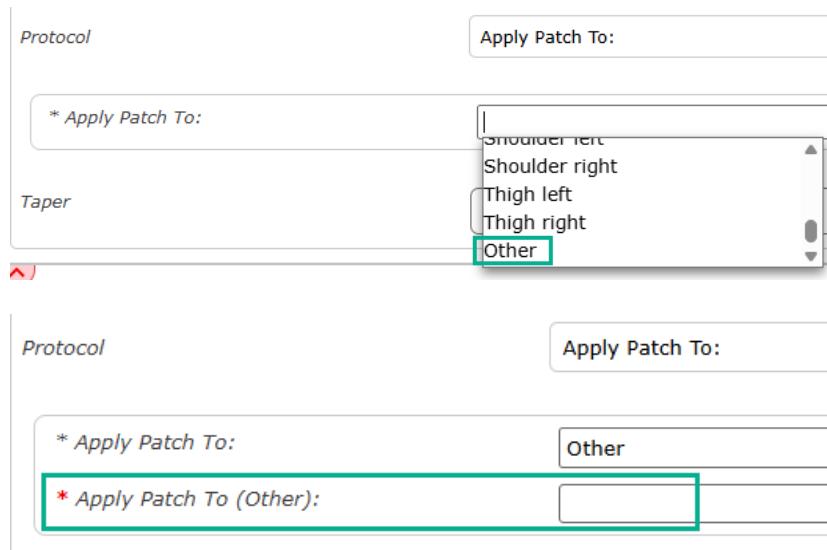
The following OM Apply To Protocols will have title changes:

Mnemonic	Current Protocol Title	NEW Protocol Title
RXAPPLYPAT	Apply Patch	Apply Patch To:
RXAPPPATSC	Apply Patch to:	Apply Scopolamine Patch to:
RXAPPNITRO	Apply patch to:	Apply Nitroglycerin Patch to:
RXAPPLYTOA	Apply To	Apply Topically To:

In addition, the “Apply Patch To:” protocol will have the following content changes:

- Add “Other” as option to the “Apply Patch To:” field.

If provider selects “Other”, a free text field will appear, and provider can enter the desired patch admin site.



Protocol

Apply Patch To:

* Apply Patch To:

Taper

Shoulder left
Shoulder right
Thigh left
Thigh right
Other

Protocol

Apply Patch To:

* Apply Patch To:

* Apply Patch To (Other):

Update PRN Reasons for Hypoglycemia

Expanse Pharmacy

EHR

Update

The Hypoglycemia 2025 ADA Standards for hospitalized patients have changed requiring an update to current PRN Reasons for hypoglycemia treatment.

Proposed Changes	
BG50	RETIRE
BG60	RETIRE
BG<54	Blood Glucose less than 54
BG54-69	Blood Glucose 54-69
BG70	Blood Glucose less than 70

BG<54 and BG54-69 have been added to the Corporate Standard PRN Reason dictionary. BG50 and BG60 will be retired on April 15, 2025. Order Strings and Order Sets will need to be updated to reflect these values prior to this date.