



PHARMACOLOGIC TREATMENT OF DELIRIUM ORDER SET

Pharmacy and Therapeutics Committee

1. Indications for use:

- There is documentation of the diagnosis of delirium and the possible cause, if known, and any need for further diagnostic tests to meet the goals of care.
- If appropriate, the cause of the delirium is being treated.
- PRN medication is given for uncontrolled symptoms and suffering.
- If an antipsychotic is not controlling the behavior and this is documented, or the delirium is caused by alcohol/benzodiazepine withdrawal, it is appropriate to use a benzodiazepine. If detoxification is indicated, there is an applicable order set (#026) available to the physician.
- If irreversible or terminal delirium, there is an applicable order set (#935) available to the physician.

2. Symptoms of Delirium:

Symptom(s) which is/are causing suffering or distress are:

___ Moaning ___ Grimacing ___ Hallucinations ___ Restlessness

___ Other: _____

3. Antipsychotic Medication (first generation):

Haloperidol (Haldol) (1 mg by mouth is equivalent to 0.5 mg IV or subcutaneous).

a. If administering Haloperidol (Haldol) intravenously or subcutaneously, verify that a recent electrocardiogram has been performed to evaluate QTc. If QTc is greater than 440ms if male or greater than 470ms if female, transfer to telemetry bed – unless terminal care.

b. Scheduled Haloperidol (Haldol) dosing (recommended starting dose: Haloperidol (Haldol) 2 mg by mouth every 6 hours **OR** Haloperidol (Haldol) 1 mg IV or subcutaneous every 6 hours).

___ Haloperidol (Haldol) ___mg by mouth every ___ hours

___ Haloperidol (Haldol) ___mg IV every ___ hours (if unable to administer IV may give subcutaneously)

If symptoms are mild and primarily occur at bedtime (recommended starting dose: 0.5 – 1 mg):

___ Haloperidol (Haldol) ___ mg by mouth daily at bedtime

___ Haloperidol (Haldol) ___ mg IV daily at bedtime (if unable to administer IV may give subcutaneously)

c. PRN Haloperidol dosing (recommended starting dose: Haloperidol (Haldol) 2 mg by mouth every hour as needed **OR** Haloperidol (Haldol) 1 mg IV or subcutaneous every hour as needed).

___ Haloperidol (Haldol) ___mg by mouth as needed every ___ hours.

___ Haloperidol (Haldol) ___mg IV every ___ hours as needed. (if unable to administer IV may give subcutaneously)

- If three PRN doses are not effective within ___ hours, call physician for further orders.

4. Antipsychotic Medication (Second generation):

a. Scheduled dosing

i. **Risperdone** (Risperdal) (recommended dosing is 0.25 – 0.5 mg daily at bedtime):

___ Risperdone (Risperdal) ___mg by mouth daily at bedtime or _____

ii. **Olanzapine** (Zyprexa) (recommended starting dose is 2.5 – 5 mg daily at bedtime):

___ Olanzapine (Zyprexa) ___mg by mouth daily at bedtime or _____

iii. **Quetiapine** (Seroquel) (recommended starting dose is 25 mg daily at bedtime or twice a day)

___ Quetiapine (Seroquel) ___mg by mouth daily at bedtime or _____

iv. **Other:**

b. PRN dosing: Haloperidol (Haldol) is recommended – see 3c or _____.

Date: _____ Time: _____ Physician Signature: _____

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ORDERS FOR TREATMENT

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North	2800 Clay Edwards Drive
Kansas City	North Kansas City, MO 64116-3281
Hospital	(816) 691-2000

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PLACE
PATIENT LABEL
HERE