

**ROYAL ADELAIDE HOSPITAL  
ACUTE PAIN SERVICE  
PATIENT-CONTROLLED  
ANALGESIA (PCA)  
Standard Orders**

**PATIENT LABEL**

Unit Record No.: \_\_\_\_\_  
Surname: \_\_\_\_\_  
Given Names: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

**PCA PROGRAM ORDERS:**

1. **DRUG:** .....

\* = order in mg or microgram as appropriate

*Place appropriate drug label here*

2. **CONCENTRATION:**\* ...../mL

3. **BOLUS DOSE:**\*

Dose:

..... \*\* = sign and date any changes

..... \*\*

**If pain not controlled:**

Bolus dose may increase to .....

Bolus dose may increase to ..... \*\*

4. **CONTINUOUS (BACKGROUND) INFUSION:**\*

..... /hr (..... mL/hr)

..... /hr (..... mL/hr) \*\*

5. **LOADING DOSE:** 0 (zero)

6. **DOSE DURATION:** "stat"

7. **LOCKOUT:** 5 minutes

**ROUTE (if other than IV):** .....

**GENERAL ORDERS:**

- Oxygen at 2 to 4 L/min via nasal specs or 6 to 8 L/min via mask while orders are in effect.
- No systemic opioids or sedatives to be given except as ordered by the APS.
- Naloxone to be immediately available.
- One-way anti-reflux valve to be used in IV line and an anti-syphon valve must be in-line between patient and syringe at all times.
- Monitoring requirements: see overleaf.
- Record current total dose per syringe in mg or microgram as appropriate. Reset total dose to zero when syringe changed.
- Cease PCA if the patient becomes confused.
- For inadequate analgesia or other problems related to the analgesia, contact the rostered APS anaesthetist.

**TREATMENT OF SIDE EFFECTS:**

**RESPIRATORY DEPRESSION (EXCESSIVE SEDATION):**

- If sedation score = 2, reduce size of the bolus dose by half and cease any background infusion.
- If sedation score = 3 (irrespective of respiratory rate) OR sedation score = 2 and respiratory rate  $\leq$  6/min, give 100 microgram NALOXONE IV stat. Repeat 2 minutely PRN up to a total of 400 microgram. Cease PCA and call the APS anaesthetist.
- If sedation score  $\geq$  2 revert to hourly sedation scores until sedation score < 2 for at least 2 hours.

**NAUSEA AND VOMITING:**

- Give METOCLOPRAMIDE 10mg IV 4 hourly PRN.
- If ineffective after 15 minutes, add TROPISETRON 2 mg IV daily PRN.
- If still ineffective after another 15 minutes, add DROPERIDOL 500 microgram IV 4 hourly PRN (250 microgram if > 70 years).

**SIGNATURE OF ANAESTHETIST:** ..... Date: .....

(Print name .....)

**Cease above orders:**

Signature of anaesthetist: ..... Date: ..... Time: .....

**ATTACH CONTINUATION  
SHEET AGAINST THE  
DOTTED LINE.**

APS-PATIENT CONTROLLED ANALGESIA

MR 98.2