

Dexmedetomidine (Precedex) Orders for Critical Care Patients

Inclusion Criteria: Precedex is formulary restricted to patients in the ICU who meet one of the following indications (SELECT ONE):

- Intubated, mechanically ventilated neurocritical care patients
- Failure to achieve desired level of sedation DESPITE maximum propofol dose (propofol infusion \geq 50 mcg/kg/min)
- Intolerance to propofol (ie, hypertriglyceridemia)
- Alcohol withdrawal syndrome refractory to standard therapies

Exclusion Criteria:

- Pre-existing heart block
- Bradycardia with HR < 60 beats/min
- MAP < 60 mmHg, despite vasopressors

Use with caution in patients with:

- Severe ventricular dysfunction
- Hypovolemia
- Co-administration of a beta-blocker
- For patients with hepatic dysfunction - dose reduction may be necessary
 - Consider reducing dose by 25% in mild hepatic dysfunction (Child-Pugh class A) and by 50% in moderate-severe hepatic dysfunction (Child-Pugh class B or C)

Dexmedetomidine (Precedex) 400 microgram/100 mL 0.9% NaCl (4 microgram/mL)

- Loading dose: _____ microgram/kg IV over 10 minutes (Maximum 1 microgram/kg)
 - For hemodynamically unstable patients or patients \geq 65 years of age:
 - Reduce loading dose to 0.5 microgram/kg and administer over 30 minutes
- Start infusion at 0.2 mcg/kg/hour
 - Titrate by 0.1 microgram/kg/hour Q 30 minutes PRN to achieve a Modified Ramsey Sedation Score of 2-3.
 - Maximum dose 1.5 microgram/kg/hour

If SBP < 90 mmHg or MAP < 60 mmHg or HR < 60 beats/min:

- Decrease infusion rate by $\frac{1}{2}$ and notify MD

If SBP < 80 mmHg or MAP < 50 mmHg or HR < 50 beats/min:

- Stop infusion and notify MD

Procedure:

- Wean and discontinue **continuous sedative and analgesia infusions** while on dexmedetomidine
- For intubated, mechanically ventilated patients:
 - Proceed with weaning trials when patient qualifies per "*Weaning from Mechanical Ventilation Protocol*" (may wean while patient on dexmedetomidine)
 - Discontinue dexmedetomidine infusion within 1 hr after extubation

Notify MD:

- For sedation and analgesia orders if dexmedetomidine is discontinued prior to extubation, if applicable
- If agitation continues at maximum dose of dexmedetomidine

Clinical Pearls:

- Dexmedetomidine provides some analgesic effects; patient may require decreased doses of narcotics
- Dexmedetomidine possesses no amnestic properties
- Due to effects on hemodynamics there may be an increased need for vasopressors or external pacing compared to standard therapies

MD Signature: _____

Date: _____

Time: _____

RN Signature: _____

Date: _____

Time: _____



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