

Peripheral Parenteral Nutrition (PPN): for administration through a peripheral line. Pharmacy will check osmolarity of final product. Physician will be notified if osmolarity is greater than 900 mosm, higher osmolarities are associated with increased risk of vein irritation and access loss.

Consults

Consult to dietitian

- to recommend parenteral nutrition orders
- to write parenteral nutrition orders
- to chart calorie and protein intake for 2 days and after each change in parenteral nutrition solution

Consult to pharmacist

- to recommend parenteral electrolyte and additive orders and adjust according to patient need
- to write parenteral electrolyte and additive orders and adjust according to patient need

Vital Signs

- Measure weight (daily)
- Measure intake and output every shift

Peripheral Parenteral Nutrition: Administer through peripheral line.

Administer at _____ ml/hr. Infusion to begin at 50mL/hr and be titrated up to ordered infusion rate over 8 hours.

Amino Acids (Select one)

- Amino Acids 5% (protein 50 gm/L, N2 7.65 gm/L)
- Amino Acids 4.25% (protein 42.5 gm/L, N2 gm 6.5/L)
- Amino Acids 3.5% (protein 35 gm/L, N2 5.35 gm/L)

Dextrose (Select one)

- Dextrose 10% (340 Kcal/L)
- Dextrose 5% (170 Kcal/L)
- Dextrose ____% (Not to exceed dextrose 10%)

Lipids (Infuse over a minimum of 8 hours)

- INTRALIPID 20% IV 250 ml ____X/week(500 kcal/ 250ml); administer over ____ hours (Infuse over a minimum of 8 hours)

Physician Initials: _____

**Please initial each place that a deletion, addition, or strike through has occurred.
Any changes made after initial authentication requires a new order sheet.**

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Electrolytes (Select one)

- Standard Electrolytes (Na 35 mEq/L, K 35 mEq/L, Mg 5mEq/L, Ca 4.5 mEq/L, Cl 35 mEq/L, PO4 10 mmol/L, Acetate to balance)
- Customized Electrolytes
 - Sodium _____mEq/L
 - Potassium _____mEq/L
 - Magnesium _____mEq/L
 - Calcium _____mEq/L
 - Chloride _____mEq/L
 - Phosphate _____mmol/L
 - Acetate to balance

Additives

- M.V.I. ADULT 10 ml once a day
- trace elements 3 ml once a day (Cr 12 mcg, Cu 1.2 mg, Mn 0.3mg, Zn 3 mg)
- zinc sulfate _____ mg /L (consider adding 1-2 mg/ L for metabolically unstable patients)
- insulin regular human _____ unit /L (Recommend insulin drip)

Other Medications

- dextrose 10% in Water at same rate, PRN for parenteral nutrition solution interruption
- phytonadione (vitamin K) 10 mg subcutaneously every Monday
- insulin regular human per continuous infusion protocol; if glucose exceeds _____
- initiate BNC Protocol; begin at level _____; if glucose exceeds _____

Nursing

- Glucose, blood, point-of-care measurement daily at 1800 for 3 days
- USE MOST DISTAL PORT for parenteral nutrition solution

Laboratory

- Complete blood cell count with automated white blood cell diff ASAP and every Monday
- Magnesium (Mg) level, serum ASAP and every Monday
- Phosphorus level, serum ASAP and every Monday
- Prealbumin ASAP and every Monday
- Comprehensive metabolic panel (CMP) ASAP and every Monday
- Basic metabolic panel (BMP) on second and third days, then every Thursday

Physician Signature: _____**Date:** _____ **Time:** _____

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