

PHYSICIAN'S ORDERS - OPIOID WITHDRAWAL - CLONIDINE PROTOCOL

- 1. Clonidine 0.1 mg po every 4 hours x 48 hours, then
- 2. Clonidine 0.1 mg po every 6 hours x 24 hours, then
- 3. Clonidine 0.1 mg po every 8 hours x 24 hours, then discontinue.
- 4. Hold Clonidine if systolic BP less than 90mmHg.
- 5. Hydroxyzine (Vistaril) 25mg po every 4 hours prn for anxiety and/or agitation.
- 6. Dicyclomine (Bentyl) 10mg po every 6 hours prn for abdominal cramping.
- 7. Ibuprofen (Motrin) 600mg po every 6 hours prn for Myalgias and Arthralgias.
- 8. CINA every 4 hours x 48 hours, then every 8 hours if less than 6.
- 9. Clonidine 0.1 mg (Catapres TTS-1) patch, apply now to skin and every 7 days if SBP greater than 90.
- 10. Clonidine 0.1mg po every 2 hours prn for CINA greater than or equal to 6 if SBP greater than 90.
- 11. Trazodone 100mg po at bedtime for sleep, may repeat x1, prn.

Physician's Signature _____ Date: _____ Time: _____

PROHIBITED ABBREVIATION	REQUIRED TERM	PROHIBITED ABBREVIATION	REQUIRED TERM
ug	Write Microgram	1.0	Write 1. Do not use zero after decimal point
qd, q.d.	Write Daily	Zero after decimal point	
qod	Write Every Other Day or Every 48 hrs	MS	Write Morphine
U or u	Write Units	MgSO ₄ , MSO ₄	Write Magnesium sulfate or Morphine sulfate
.5	Write 0.5 - make sure you use preceding 0	IU	Write International units
No zero before decimal point		OS, OD, OU	Write Left or right eye or both eyes
		AS, AD, AU	Write Left or right ear or both ears



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PATIENT LABEL



MR.RHORDER