**DESCRIPTION/OVERVIEW**

To maintain the safe, clear and consistent administration of those medications which have been prescribed with a range in dose, frequency or route of administration. This procedure does not apply to procedural sedation.

**REFERENCES**


**AREAS OF RESPONSIBILITY**

This applies to licensed clinical staff who administers medications based on licensure and education.

**PROCEDURE**

The order by the licensed independent practitioner (LIP) will have exact criteria for administration (e.g. indication {pain, sedation, restlessness, specific blood pressure, etc}). Range orders may contain only one range parameter, e.g., dose, frequency or route.

1. To determine the dose / route / frequency to administer with a range the nursing staff will follow this procedure:
   1.1 PRN medications where the dose is written as a range, the staff will follow these steps:
      1.1.1 When the dose of a new range order is written, the initial dose will be the lowest in the range.
      - For example; if the order is written 2-4 mg, the nurse will administer 2 mg.
      - If the desired effect has not been achieved and no adverse reactions have been observed, the initial dose may be increased up to the highest dose.
      - Subsequent doses can be given after the dosing interval has passed.
      - For example; an order for morphine IV 2-4 mg, Q3H PRN for pain was written.
        - 2 mg morphine IV was given at 1400. At 1430 the patient has had no relief (and there are no adverse effects or contraindications) therefore the remainder of the dose, 2 mg. of morphine IV, can be given.
      - A subsequent dose at the higher dose in the ordered range can be given in three hours as needed.
        - For example; the last 2 mg of morphine IV was given at 1445, therefore, the next dose at the higher dose (up to 4 mg. of morphine) can be given at 1745.
1.1.2. If it has been determined that the higher dose is required due to suboptimal effect from the lower dose, an order to reflect this should be received from the LIP.

1.1.3. Doses of medication less than the range prescribed (e.g., administering 25 mg when the order was for 50-75mg) cannot be given based on the higher dose order. Contact the LIP for authorization to administer a dose lower than the range previously specified.

1.2. PRN medications ordered where the frequency is written as a range, the staff will follow these steps:

   1.2.1. The initial frequency shall be planned at the shortest time interval and the patient response can be assessed. For example, if the order is written q 4-6 hours, the medication may be given at four hour intervals based on the patient’s response.

   1.2.2. The nurse may adjust subsequent frequency to a longer time interval, if the patient’s condition permits.

1.3 PRN medications ordered where the route is written as a variable:

   1.3.1. For orders written as IM (intramuscular) or IV (intravenous), IV is the preferred route of administration, if permissible.

   1.3.2. For orders written as IV (intravenously) or PO, the medications will be given parenterally until the patient takes fluids by mouth without complications.

   1.3.3. For orders written as PO or PR (rectally), the medications will be given orally as long as the patient is taking fluids by mouth without complications.

   1.3.4. If the medication is not supplied in one of the routes ordered, the LIP must be notified and an order received to reflect this change.

DEFINITIONS

1. **Range Orders** are defined as licensed independent provider (LIP) orders where the dose or interval allows licensed staff that has been delegated clinical judgment to select an appropriate dose or interval based on patient factors or treatment guidelines, such that each licensed staff member follows the orders in a similar fashion.

2. **Taper or Wean**: The gradual withdrawal of a medication, such as steroids. Tapering may occur quickly over several days and then stop or may occur more gradually over weeks e.g. Prednisone - reduce by 1 milligram a day until off of medication.

3. **Titrate**: The increase or decrease of a medication to attain a patient-specific response that has been specifically ordered: e.g. Titrate Dopamine to keep mean blood pressure between 60-70 mmHg. Contact physician if greater than 20 micrograms per kilogram per minute is required to achieve desired blood pressure.

DOCUMENTATION

Patient Care Flow Sheet: including Pain Scale as appropriate, Patient Progress Notes, Multidisciplinary Plan of Care, Patient and Family Education Record

SUMMARY OF CHANGES


RESOURCES/TRAINING

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Title: Range Orders & Decision-making for Medications
Owner: Director, Clinical Education
Effective Date: 11/27/2012
Doc. #2985
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<td>Consultant(s)</td>
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<td>Nursing Officer</td>
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<td>Sheena Ferguson, MSN, CCRN, CNS, CNO</td>
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