

# Infusions – Unfractionated Heparin Orderset



## This Quick Reference Guide will explain how to:

This QRG will cover **Ordering** the Heparin Infusion orderset, **Modifying** the Infusion, **Pausing** the Infusion, and **Discontinuing** the orderset.

## Ordering

1. Navigate to **Orders** page and click **+Add**
2. Search for and select the **“Unfractionated Heparin Infusion (Adults > 16 years)”** orderset
3. A window will display to show this is a multi-phase orderset. Click **OK**

Enter name to create sequence:

Search:

Up Unfractionated Heparin Infusion (Adults > 16 years)  
\*Enter\* to Search

TESTWHIEPIT12, JACOB MR - Add Plan

Unfractionated Heparin Infusion (Adults > 16 years)

Select Visit and Start Time

Confirm Heparin IV Infusion Order Start Date/Time

AEST

Confirm Phase Action

Phase	Start Date/Time	Action
Heparin IV Infusion Order	31/08/2020 10:18 AEST	Order now
APTT less than 40	*Est. 31/08/2020 10:18 AEST	Plan for a later date
APTT between 40 and 49	*Est. 31/08/2020 10:18 AEST	Plan for a later date
APTT in target range (50 - 75)	*Est. 31/08/2020 10:18 AEST	Plan for a later date
APTT between 76 and 85	*Est. 31/08/2020 10:18 AEST	Plan for a later date
APTT between 86 and 110	*Est. 31/08/2020 10:18 AEST	Plan for a later date
APTT between 111 and 130	*Est. 31/08/2020 10:18 AEST	Plan for a later date
APTT greater than 130	*Est. 31/08/2020 10:18 AEST	Plan for a later date
Troubleshooting	*Est. 31/08/2020 10:18 AEST	Plan for a later date

TESTWHIEPIT12, JACOB MR - 1684679

4. All phases appear under **View > Medical**. Click on **Heparin IV Infusion Order**
5. Review **Related Results**

Related Results (2)	
Haemoglobin Level	152 g/L
Platelet Count	178

**View**

Orders for Signature

Plans

Medical

Unfractionated Heparin Infusion (Adults > 16 years)

**Heparin IV Infusion Order (Initiated Pending)**

APTT less than 40 (Planned Pending)

APTT between 40 and 49 (Planned Pending)

APTT in target range (50 - 75) (Planned Pending)

APTT between 76 and 85 (Planned Pending)

APTT between 86 and 110 (Planned Pending)

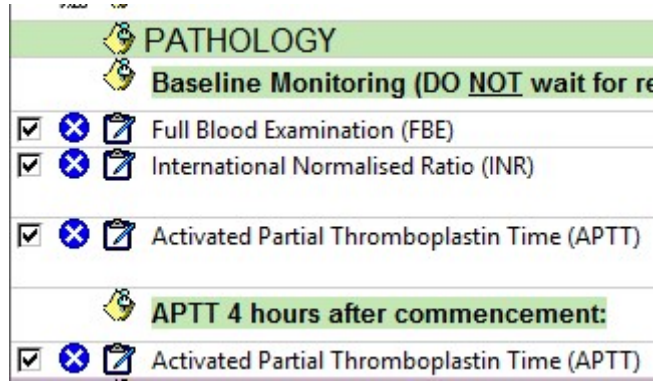
APTT between 111 and 130 (Planned Pending)

APTT greater than 130 (Planned Pending)

Troubleshooting (Planned Pending)

**6. Pathology**

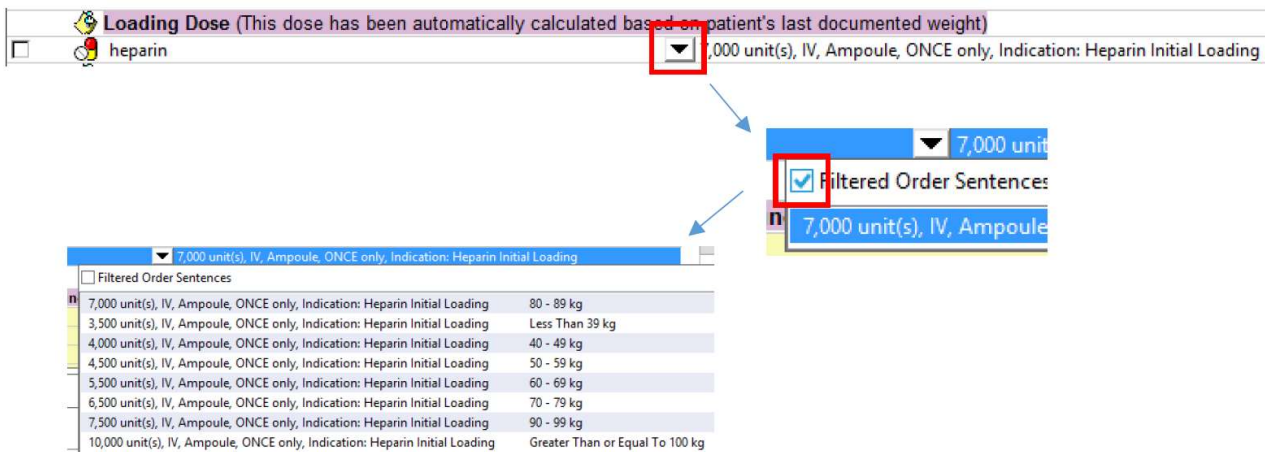
**\*Note\*:** Pathology orders have been pre-ticked, including an APTT to be taken in 4 hours time.



**7. Loading Dose**

Select the loading dose, if required.

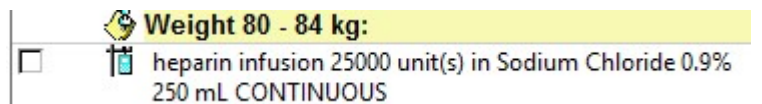
**\*Note\*:** The dose has been filtered based on the patient's most recent documented weight. Click the drop-down arrow and untick the 'Filtered' box to see the other order sentences.



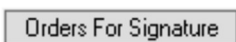
**8. Continuous Infusion**

Select the continuous infusion order.

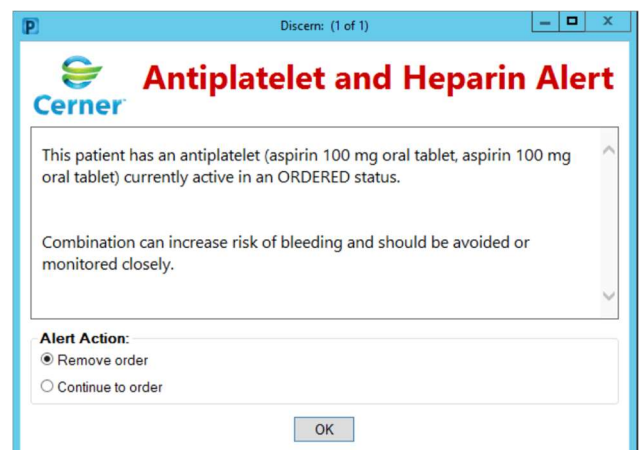
**\*Note\*:** This has also been filtered based on the patient's most recent documented weight. The starting rate will be pre-defined as per PPG.



**9. Click**



**10. Note\*:** If patients are on an active antiplatelet / anticoagulant a warning alert will pop up. Selecting **Remove order** will remove the pending Heparin infusion and not the existing medication.





11. Review the order sentences.

<b>Continuous Infusions</b>				
	heparin (additive) 25,000 unit(s) [1200 u...	Order	26/10/2020 10:11	250 mL, IV Infusion, Rate: 12 mL/hr, First dose 26/10/2020 10:11 AEDT, Use premix heparin bags, Total volume (mL): 250
<b>Medications</b>				
	heparin	Order	26/10/2020 10:11	7,000 unit(s), IV, Ampoule, ONCE only, Indication: Heparin Initial Loading, First dose 26/10/2020 10:11 AEDT, Stop date 26/10/2020 10:11 AEDT

12. Click the continuous infusion order to view the pre-defined **Continuous Details**.

**\*Note\***: Normalized Rate = any rate that is not mL/hr

▼ Details for **heparin (additive) 25,000 unit(s) [1200 units/hr] + Sodium Chloride**

Details
**Continuous Details**
Order Comments
Offset Details
Diagnoses

Base Solution	Bag Volume	Rate	Infuse Over	
Sodium Chloride 0.9% infusion	250 mL	12 mL/hr	20.8 hr(s)	
Additive	Additive Dose	Normalized Rate	Delivers	Occurrence
heparin (additive)	25,000 unit(s)	1200 units/hr	1200 units/hr	EB
<b>Total Bag Volume</b>		250 mL		

13. Add any **Order Comments** if required

14. **Sign** orders and **Refresh MAR** to review before verbally communicating with nursing staff.

**Scheduled**

**heparin**  
 7,000 unit(s), IV, Ampoule, ONCE only, Indication: Heparin Initial Loading, First dose 26/10/2020 10:11:00, NOW, Stop date 26/10/2020 10:11:00  
 heparin

**Continuous Infusions**

**heparin (additive) 25,000 unit(s) [1,200 units/hr]**  
 Sodium Chloride 0.9% infusion 250 mL  
 250 mL, IV Infusion, Rate: 12 mL/hr, First dose 26/10/2020 10:11:00, Use premix heparin bags, Total volume (mL): 250

**Modifying**

15. Review the patient's APTT and return to the orderset on the **Orders** page > **View** > **Medical**.

16. Click the appropriate phase based on the patient's APTT result.

**\*Note\***: If a phase has already been Initiated and needs to be used again, right click and select **Replicate**. Refer to the **Troubleshooting** phase if required.

**View**

Orders for Signature

- Plans
  - Medical
    - Unfractionated Heparin Infusion (Adults > 16 years)
      - Heparin IV Infusion Order (Initiated)**
        - APTT less than 40 (Planned)
        - APTT between 40 and 49 (Initiated Pending)**
        - APTT in target range (50 - 75) (Planned)
        - APTT between 76 and 85 (Planned)
        - APTT between 86 and 110 (Planned)

17. Click Initiate Now





18. Follow the instructions, e.g:
  - **Step 1:** Read how to modify the rate of the continuous infusion
  - **Step 2:** Select further orders as required
  - **Step 3:** The next APTT order will be pre-ticked

Unfractionated Heparin Infusion (Adults > 16 years, APTT between 40 and 49 (Planned)  
Last updated on: 26/10/2020 10:27 by: MO1, Medical Officer1 Dr.

**APTT between 40 and 49**

Note: if reduced target range, check with unit

STEP 1: Increase Heparin Infusion Rate by 100 units/hour (1 mL/hour) by modifying existing order  
STEP 2: BOLUS Dose as per guidelines (40 units/kg up to maximum of 5,000 units)

NO BOLUS for patients with acute ischaemic stroke, ceasing warfarin, other anticoagulants or post

heparin 40 units/kg, IV, Ampoule, ONCE only, Indl Up to max of 5,000 units

STEP 3: Order APTT to be taken 4 hours after rate change

Activated Partial Thromboplastin Time (APTT) Timed Collection, Spec Type: Blood, T;N+

19. Click the **Heparin IV Infusion Order** phase of the orderset.

20. Right click and **Modify** the continuous infusion order. The **Continuous Details** tab will appear.

Base Solution	Bag Volume	Rate	Infuse Over
Sodium Chloride 0.9% infusion	250 mL	12 mL/hr	20.8 hr(s)
Additive	Additive Dose	Normalized Rate	Delivers
heparin (additive)	25000 unit(s)/250 mL	1200 units/hr	1200 units/hr
Total Bag Volume		250 mL	

21. Modify the **Normalized Rate** field as per the instructions.

**\*Note\*:** You will be unable to modify the **Rate** field, but once the Normalized Rate field has been modified, the other fields will automatically re-calculate.

Base Solution	Bag Volume	Rate	Infuse Over
Sodium Chloride 0.9% infusion	250 mL	11 mL/hr	22.7 hr(s)
Additive	Additive Dose	Normalized Rate	Delivers
heparin (additive)	25000 unit(s)/250 mL	1100 units/hr	1100 units/hr

22. Click **Orders for Signature**, review orders and **Sign**.

23. **Refresh** the **MAR** to review before verbally communicating with nursing staff.

## Pausing Infusion

24. When the heparin infusion needs to be paused as per PPG, there will be an order for **Pause Heparin Infusion** in the appropriate phase, e.g.:

**APTT between 86 and 110**

Note: if reduced target range, check with unit

STEP 1: Place the below order to pause infusion for 30 minutes:

Pause Heparin Infusion T;N, ONCE only, PAUSE INFUSION FOR 30 MINUTES  
Change rate of infusion task to 0 mL/hour. Restart infusion at the decreased rate after 30 minutes

STEP 2: Decrease Heparin Infusion rate by 100 units/hour (1 mL/hour) by modifying existing infusion

STEP 3: Order APTT to be taken 4 hours after rate change

Activated Partial Thromboplastin Time (APTT) Timed Collection, Spec Type: Blood, T;N+240, Anticoagulant: Heparin

25. Select this order and follow the modification process as outlined above. **Modify** the continuous infusion order as per the instructions – **change the normalized rate to what the infusion will be recommenced at after the pause.**



26. Once signed, the **Pause Heparin Infusion** order will drop a task to the nurse’s **Care Compass**, with these instructions:

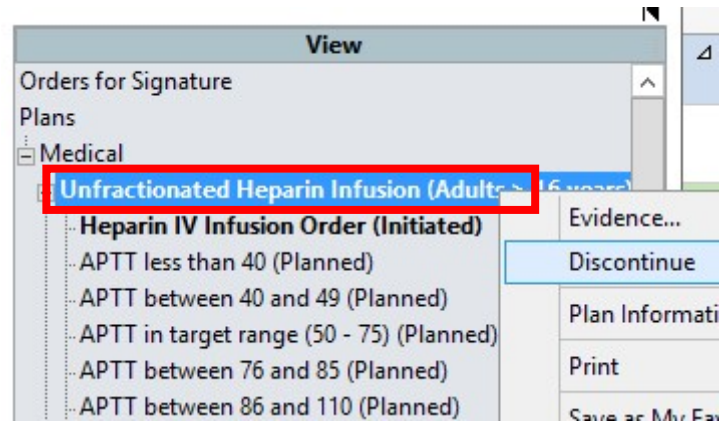
Change rate of infusion to 0 mL/hr.  
Restart infusion at decreased rate after 30 minutes.

The 'pause heparin infusion' order will **NOT** automatically change the infusion order on the EMR

- a) Doctors are responsible for placing the order and verbally communicating to nursing staff.
- b) Nursing staff are responsible for manually pausing the infusion.
- c) Doctors are responsible for ensuring the rate of the infusion is modified correctly for when the required pause is over.

### Discontinuing

1. When the heparin infusion can be discontinued, return to the orderset on the **Orders** page > **View** > **Medical**.
2. Right click on the title of the orderset and select **Discontinue**
3. Enter mandatory discontinuation reasons.



**Sign**, and **Refresh** the **MAR** to check orders have