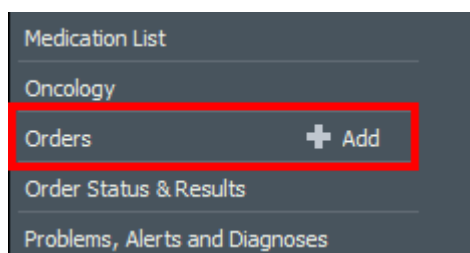


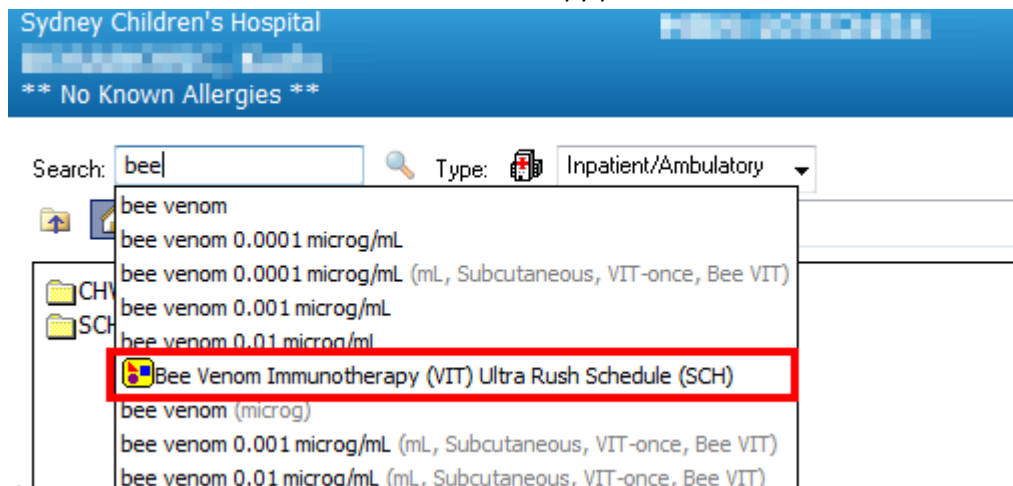
Prescribing Ultra Rush Venom Immunotherapy (VIT) - Bee, Paper Wasp and Yellow Jacket Wasp

Please note that these PowerPlans are for inpatient use only

- Click order + add



- Search for and select the venom immunotherapy plan



- The scheduling window will appear.
 - The plan may be prescribed for a current or future inpatient visit.
 - Select the visit start Date.
 - The start time will default to 09:00 as per the VIT schedule
- Click OK

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Bee Venom Immunotherapy (VIT) Ultra Rush Schedule (SCH)

Select Visit and Start Time

This Visit Confirm Bee Venom Immunotherapy (VIT) Ultra Rush Schedule (SCH) Start Date/Time

Future Inpatient Visit 02/11/2019 0900

Future Outpatient Visit

Confirm Phase Action

Phase	Start Date/Time	Action
Bee Venom Immunotherapy (VIT) Ultra Rush Schedule (SCH)	*Est. 02/11/2019 09:00	Order for future visit

OK Cancel

- All venom dilution doses will be pre-selected and pre-populated with the require information. For a standard schedule, no changes are required.
- PRN medicines may be selected by clicking in the left hand side box.
- For some PRN medications, an order sentence is required to be selected from the drop down menu.

Offset	Component	Status	Dose ...	Details	Order Comm...
Bee Venom Immunotherapy (VIT) Ultra Rush Schedule (SCH) (Future Pending)					
Immunotherapy					
CAUTION in patients with poorly controlled asthma or acute infection					
Baseline observations to be completed prior to commencing VIT					
Medications must be stored in the refrigerator between 2-8 degrees C					
<input checked="" type="checkbox"/>	bee venom (bee venom 0.01 microg/mL)		0.1 mL, Subcutaneous, VIT-once, Bee VIT		
<input checked="" type="checkbox"/>	+40.5 hr		bee venom (bee venom 0.1 microg/mL)	0.1 mL, Subcutaneous, VIT-once, Bee VIT	
<input checked="" type="checkbox"/>	+1 hr		bee venom (bee venom 1 microg/mL)	0.1 mL, Subcutaneous, VIT-once, Bee VIT	
<input checked="" type="checkbox"/>	+2 hr		bee venom (bee venom 10 microg/mL)	0.1 mL, Subcutaneous, VIT-once, Bee VIT	
<input checked="" type="checkbox"/>	+3 hr		bee venom (bee venom 100 microg/mL)	0.1 mL, Subcutaneous, VIT-once, Bee VIT	
<input checked="" type="checkbox"/>	+4 hr		bee venom (bee venom 100 microg/mL)	0.2 mL, Subcutaneous, VIT-once, Bee VIT	
<input checked="" type="checkbox"/>	+5 hr		bee venom (bee venom 100 microg/mL)	0.3 mL, Subcutaneous, VIT-once, Bee VIT	
<input checked="" type="checkbox"/>	+6 hr		bee venom (bee venom 100 microg/mL)	0.4 mL, Subcutaneous, VIT-once, Bee VIT	
<input checked="" type="checkbox"/>	+24 hr		bee venom (bee venom 100 microg/mL)	0.5 mL, Subcutaneous, VIT-once, Bee VIT	
<input checked="" type="checkbox"/>	+25 hr		bee venom (bee venom 100 microg/mL)	0.5 mL, Subcutaneous, VIT-once, Bee VIT	
PRN Medicines					
<input type="checkbox"/>	adrenaline (epinephrine) (adrenaline (epinephrine) 1 mg/mL (1:1,000) injectable solution)		0.01 mL/kg, Intramuscular, ONCE, PRN anaphylaxis, anaphylaxis		May be repeated ev...
<input type="checkbox"/>	cetirizine		Select an order sentence		
<input type="checkbox"/>	desloratadine		Select an order sentence		
<input type="checkbox"/>	loratadine		Select an order sentence		
<input type="checkbox"/>	prednisolone		Filtered Order Sentences		
<input type="checkbox"/>	bupropion		10 mg, Oral, daily, PRN allergic reaction, Allergic reaction, Less sedating antihistamine	Greater Than or Equal To 6 year(s)	ive with or son after fo...
<input type="checkbox"/>	paracetamol		15 mg/kg, Oral, 6 hourly, PRN pain		
<input type="checkbox"/>	salbutamol (salbutamol 100 mcg/inh pressurised inhalation)		Select an order sentence		

- Click orders for signature
- Click sign
- The plan will sit in a pending future state.

Orders Medication List Document In Plan

View

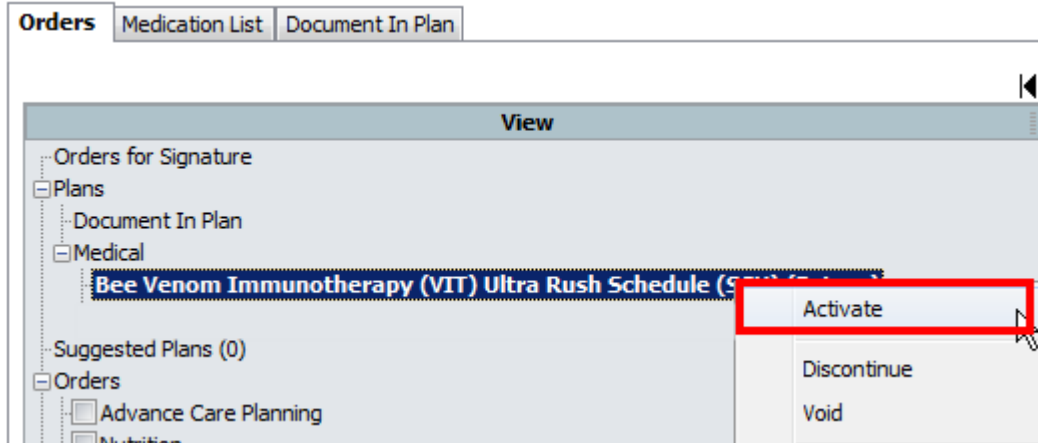
- Orders for Signature
- Plans
 - Document In Plan
 - Medical

Bee Venom Immunotherapy (VIT) Ultra Rush Schedule (SCH) (Future)

Activating the VIT PowerPlan

Once the patient is admitted, the PowerPlan may be activated. This will place the prescriptions on the MAR for administration.

- To activate the plan right click and select activate



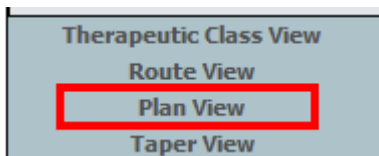
- Orders for signature
- Sign
- Refresh

Administering VIT

- To view the VIT plan, enter MAR



- Enter Plan view



- The medications will appear in the order they are due.
- The PRN medications will appear in green at the bottom of the page
- To administer, click on the task tile
- Enter required information

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- Click the green tick to sign
- Refresh the MAR
- Once administered, the order will discontinue. Completed/discontinued orders will show at the bottom of the MAR in grey

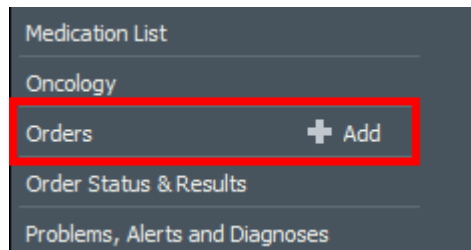
Discontinued Scheduled									
<p>paper wasp venom (paper wasp venom 100 microg/mL) 0.5 mL, Subcutaneous, VIT-once, Paper wasp VIT, Stop Date: 27-Nov-19 10:00:00</p>									
paper wasp									0.5 mL

31 October 2019 13:58 - 05 November 2019 13:58 (Clinical Range)									
Medications	02/11/2019 09:00	02/11/2019 09:30	02/11/2019 10:00	02/11/2019 11:00	02/11/2019 12:00	02/11/2019 13:00	02/11/2019 14:00	02/11/2019 15:00	03/11/2019 09:00
bee venom									
bee venom (bee venom 10 microg/mL) 0.1 mL, Subcutaneous, VIT-once, Bee VIT, Stop Date: 02-Nov-19 11:00:00				0.1 mL Last given: 01/11/2019 08:11					
bee venom									
bee venom (bee venom 100 microg/mL) 0.1 mL, Subcutaneous, VIT-once, Bee VIT, Stop Date: 02-Nov-19 12:00:00					0.1 mL Last given: 01/11/2019 08:11				
bee venom									
bee venom (bee venom 100 microg/mL) 0.2 mL, Subcutaneous, VIT-once, Bee VIT, Stop Date: 02-Nov-19 13:00:00						0.2 mL Last given: 01/11/2019 08:11			
bee venom									
bee venom (bee venom 100 microg/mL) 0.3 mL, Subcutaneous, VIT-once, Bee VIT, Stop Date: 02-Nov-19 14:00:00							0.3 mL Last given: 01/11/2019 08:11		
bee venom									
bee venom (bee venom 100 microg/mL) 0.4 mL, Subcutaneous, VIT-once, Bee VIT, Stop Date: 02-Nov-19 15:00:00								0.4 mL Last given: 01/11/2019 08:11	
bee venom									
bee venom (bee venom 100 microg/mL) 0.5 mL, Subcutaneous, VIT-once, Bee VIT, Stop Date: 03-Nov-19 9:00:00									0.5 mL Last given: 01/11/2019 08:11
bee venom									
bee venom (bee venom 100 microg/mL) 0.5 mL, Subcutaneous, VIT-once, Bee VIT, Stop Date: 03-Nov-19 10:00:00									
bee venom									
desloratadine 2.5 mg, Oral, daily, PRN allergic reaction, Allergic reaction	PRN 2.5 mg Not given within 5 days.								
desloratadine									

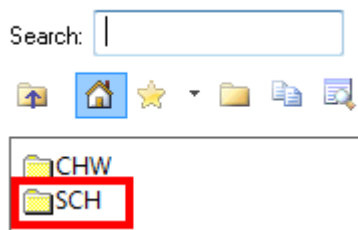
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Adjustments to VIT plan

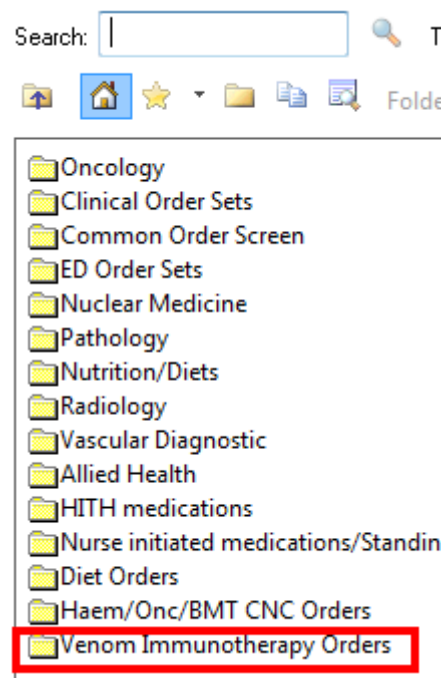
- For additional doses click on Orders + Add



- Enter the SCH folder



- Open the Venom Immunotherapy Orders folder



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- Enter the appropriate VIT folder
- All venom dilutions have pre-created order sentences

Search: Type:

Folder: Venom Immunothe.Sea

- Bee Venom Immunotherapy Orders
- Paper Wasp Venom Immunotherapy Orders
- Yellow Jacket Wasp Venom Immunotherapy Orders

- Click on the required order sentence

Folder: Search within: All

yellow jacket wasp venom
 yellow jacket wasp venom 0.0001 microg/mL
yellow jacket wasp venom 0.0001 microg/mL mL, Subcutaneous, VIT-once, Yellow Jacket Wasp VIT
 yellow jacket wasp venom 0.001 microg/mL
 yellow jacket wasp venom 0.001 microg/mL mL, Subcutaneous, VIT-once, Yellow Jacket Wasp VIT
 yellow jacket wasp venom 0.01 microg/mL
 yellow jacket wasp venom 0.01 microg/mL mL, Subcutaneous, VIT-once, Yellow Jacket Wasp VIT
 yellow jacket wasp venom 0.1 microg/mL
 yellow jacket wasp venom 0.1 microg/mL mL, Subcutaneous, VIT-once, Yellow Jacket Wasp VIT
 yellow jacket wasp venom 1 microg/mL
 yellow jacket wasp venom 1 microg/mL mL, Subcutaneous, VIT-once, Yellow Jacket Wasp VIT
 yellow jacket wasp venom 10 microg/mL
 yellow jacket wasp venom 10 microg/mL mL, Subcutaneous, VIT-once, Yellow Jacket Wasp VIT
 yellow jacket wasp venom 100 microg/mL
 yellow jacket wasp venom 100 microg/mL mL, Subcutaneous, VIT-once, Yellow Jacket Wasp VIT

- Enter the volume (in mL)
- Enter the time and date for the dose
- The VIT-once frequency pre-populates to allow a once off dose scheduled to the closes minute
- Click sign

Details for yellow jacket wasp venom (yellow jacket wasp venom 0.0001 microg/mL)

Remaining Administrations: 1 Stop: 01/11/2019 14:06:00

*Dose: *Route of Administration: Modified Release: Yes No

First Dose URGENCY: *FIRST DOSE Date/Time: *Frequency:

PRN: Maximum PRN dose in 24 hours: Duration:

*Indication: Special Instructions: Stop Date/Time:

Drug Form: Use Patient's Own Medication: Yes No Order for Future Visit: Yes No

Drug Dosage Guidelines: Dose Calculation: Dose Limit:

Pager:

- Refresh powerchart
- Enter the MAR or MAR Summary to ensure the schedule is appropriate