

Form Title **Management of Acetaminophen Toxicity Acetylcysteine (NAC) Regimen
Adult - Pediatric Order Set**

Form Number **21761**

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Management of Acetaminophen Toxicity Acetylcysteine (NAC) Regimen Adult - Pediatric Order Set

Select orders by replacing a (✓) in the associated box

Last Name (Legal)		First Name (Legal)	
Preferred Name <input type="checkbox"/> Last <input type="checkbox"/> First		DOB (dd-Mon-yyyy)	
PHN	ULI <input type="checkbox"/> Same as PHN	MRN	
Administrative Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Non-binary/Prefer not to disclose (X) <input type="checkbox"/> Unknown	

Weight				
Weigh Patient <input type="checkbox"/> _____ kg actual <input type="checkbox"/> _____ kg estimate				
Guidance				
Antidote Consider calling Poison & Drug Information Service at 1-800-332-1414 <i>Two Step Acetylcysteine PADIS-13 (albertahealthservices.ca):</i> https://ahsweb.ca/HEE/Two Step Acetylcysteine PADIS-13 <ul style="list-style-type: none"> Most patients with potentially toxic APAP concentrations and/or evidence of hepatic injury regardless of the nature of the APAP ingestion (acute or chronic, early or late presentation, hepatic failure) should have IV NAC administered for a minimum 21 hours using the one concentration, 2-step regimen. There is a small subset of patients who may be eligible for stopping acetylcysteine at 12 hours. Please review the entire PADIS guideline for more details, consult PADIS as required and modify the infusion and lab orders accordingly. Acetylcysteine is most effective if administered within 8 hours of ingestion. Refer to the AHS Acetaminophen Nomogram: https://ahsweb.ca/HEE/Acetaminophen Nomogram For dosing and infusion instructions see the pharmacy parenteral monograph: https://ahsweb.ca/HEE/Acetaminophen Parenteral Monograph 				
2 step regimen: total intended dose of 450mg/kg infused over at least 21 hours (see guidance above for additional detail)				
Initial Loading Dose <input type="checkbox"/> acetylcysteine (150 mg/kg IV bolus from bag) _____ mg once over 60 minutes. MAX initial dose for 100 kg or more is 15,000 mg (15g)				
Followed by <input type="checkbox"/> acetylcysteine (15 mg/kg/hour IV) _____ mg/hr over a minimum of 20 hours. MAX rate for 100 kg or more: of 1500 mg/hour (1.5 g/hour). Dosage must be initiated immediately following loading dose. Infuse over a minimum of 20 hours (or earlier as per MRHP). Continue until required criteria met and infusion discontinued by MRHP. <ul style="list-style-type: none"> At the completion of 21 hours, stop acetylcysteine if all of the following criteria are met: <ul style="list-style-type: none"> Serum acetaminophen concentration is undetectable Aminotransferases (ALT +/- AST) normal or declining on at least one measurement INR less than 2 Serum creatinine normal or declining Patient clinically well (no evidence of encephalopathy) <p>If the above criteria are not met, NAC should be continued at the rate of 15 mg/kg/hour and terminated when all of the above criteria are met.</p>				
<table border="1"> <tr> <td>Prescriber Name</td> <td>Prescriber Signature</td> <td>Date (dd-Mon-yyyy)</td> <td>Time (hh:mm)</td> </tr> </table>	Prescriber Name	Prescriber Signature	Date (dd-Mon-yyyy)	Time (hh:mm)
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Gastrointestinal Decontamination

If patient presents within four hours of a known or suspected acetaminophen ingestion equal to or greater than 7.5 g or equal or greater than 150 mg/kg, should consider activated charcoal, unless there are contraindications such as unable to protect airway, depressed mental status, concern for a possible intestinal obstruction or decreased peristalsis, or any need for endoscopy.

☐ activated charcoal 1g/kg _____ PO once (up to maximum of 50 g)

Laboratory Investigations

Stat

Chemistry

☐ Creatinine

☐ Alanine Amino Transferase (ALT)

☐ Aspartate Amino Transferase (AST)

Coagulation

☐ INR

Therapeutic Drug Monitoring and Toxicology

☐ Acetaminophen Level (ideally 4 hours after ingestion, if time known)

12 hours post initiation of acetylcysteine loading dose

Monitoring of electrolytes due to the high volume of fluid administered is recommended.

☐ Sodium

☐ Potassium

☐ Chloride

☐ Carbon Dioxide

To be drawn at least 1 hour before acetylcysteine infusion complete *(goal is to have results back before the end of the 21-hour infusion so it can be determined whether ongoing NAC treatment is required).*

☐ Creatinine

☐ ALT

☐ AST

☐ INR

☐ Acetaminophen Level

Patient Care

Analgesics and Antipyretics

☐ Avoid acetaminophen

☐ Avoid nonsteroidal anti-inflammatory (NSAIDs) agents

Consults

Inpatient Specialty Consults

☐ Inpatient Consult to _____

☐ Inpatient Consult to _____

☐ Poison & Drug Information Service at 1-800-332-1414

Prescriber Signature	Date <i>(dd-Mon-yyyy)</i>	Time <i>(hh:mm)</i>
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