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MCH
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Unité de soins intensifs néonataux (USIN)
Atrio-septostomie auriculaire au ballonnet à l'USIN

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Neonatal Intensive Care Unit (NICU)
Atrial Balloon Septostomy in the NICU

ALLERGIES _____

Poids / Weight _____ **kg** **Taille / Height** _____ **cm** **Surface corporelle / BSA** _____

Initiales du prescripteur pour chaque ordonnance <small>Prescriber's initials for each order</small>	ORDONNANCE DU PRESCRIPTEUR/ PRESCRIBER'S ORDERS	Initiales de l'infirmier(ère) notées <small>Nurse's initials noted</small>
	Preparation (Prior to Arrival of Patient)	
	Prepare all medications, infusions, and material prior to arrival of the patient, based on last estimated weight: _____ kg Preparation Checklist: <ul style="list-style-type: none"> <input type="checkbox"/> Medications for intubation (see Upon Admission section) <input type="checkbox"/> Maintenance fluid (see Infusions section) <input type="checkbox"/> Medication infusions (see Infusions section) <input type="checkbox"/> Medications for procedural sedation and paralysis (see Balloon Septostomy Procedure section) <input type="checkbox"/> Fluids and materials in room for septostomy via catheterization (see Balloon Septostomy Procedure section) <input type="checkbox"/> Bring Crash Cart near admission room for rapid access to resuscitation medications (see Resuscitation section) NOTE: For reasons of sterility, medications prepared at the bedside should be disposed of after one hour.	
	Upon Admission	
	<ul style="list-style-type: none"> • Initiate continuous cardiorespiratory monitoring 	
	<ul style="list-style-type: none"> • Initiate pre- and post-ductal saturation monitoring Target saturations: • Pre-ductal – above 70% (*increasing FiO2 will not help to meet this target and should not be used because of risk of closing the ductus arteriosus; if pre-ductal saturation consistently below this range, pre-ductal alarms can be lowered until procedure is complete) • Post-ductal – above 70% 	
	<ul style="list-style-type: none"> • Place blood pressure cuff on left upper arm 	
	<ul style="list-style-type: none"> • Vital signs Q 15 minutes before septostomy procedure 	
	<ul style="list-style-type: none"> • Keep patient NPO 	
	<ul style="list-style-type: none"> • Strict intake and output 	
	<ul style="list-style-type: none"> • Insert peripheral intravenous access (note that if IV access not obtainable, intubation medications can be given by IM route). Consider intraosseous access for septostomy if IV access not possible. 	
	<ul style="list-style-type: none"> • If patient requires intubation, administer intubation medications as directed by medical team: Atropine 0.02 mg/kg = _____ mg IV/IM x1 FentaNYL 5 mcg/kg = _____ mg IV/IM x1 Succinylcholine 2 mg/kg = _____ mg IV/IM x1 	
	<ul style="list-style-type: none"> • Other: 	



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ALLERGIES _____

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Initiales du prescripteur pour chaque ordonnance Prescriber's initials for each order	Infusions	Initiales de l'infirmier(ère) notées Nurse's initials noted
	<p>Immediately start infusions:</p> <p><input type="checkbox"/> Start Dextrose 10% at _____ mL/h for a total total fluid intake (TFI) of 65 mL/kg/day with the infusions prescribed below</p> <p><input type="checkbox"/> Alprostadiol (PGE₁) diluted in D5W to 10 mcg/mL and infuse IV at _____ mcg/kg/minute</p> <p><input type="checkbox"/> FentaNYL diluted in D5W to 12.5 mcg/mL and infuse IV at _____ mcg/kg/hour</p> <p><input type="checkbox"/> DOPamine diluted in D5W to 1600 mcg/mL and infuse IV at _____ mcg/kg/minute</p> <p><input type="checkbox"/> Other:</p>	
	If echocardiography deems that balloon septostomy is necessary, continue with sections below	
	Balloon Septostomy Procedure	
	<p><u>PATIENT POSITIONING</u></p> <ul style="list-style-type: none"> • Place roll under hips to raise hips slightly • Immobilize patient as if for umbilical line insertion (legs and arms secured in place). 	
	<p><u>CATHETERIZATION FLUIDS</u> Ensure cardiologist has access to:</p> <p><input type="checkbox"/> NaCl 0.45% + heparin 1 unit/mL, 1000 mL bag (unopened)</p> <p><input type="checkbox"/> NaCl 0.45% + heparin 1 unit/mL, 50 mL syringe (unopened)</p> <p><input type="checkbox"/> Other:</p>	
	<p><u>PROCEDURAL SEDATION and PARALYSIS</u></p> <p><input type="checkbox"/> Administer FentaNYL bolus of _____ mcg/kg = _____ mcg using infusion pump, run over 15 minutes; can be repeated Q 10 minutes PRN during the procedure</p> <p><input type="checkbox"/> Administer Rocuronium 1 mg/kg = _____ mg IV/IM x 1 prior to the procedure; can be repeated Q 30 minutes PRN during the procedure to maintain paralysis</p> <p><input type="checkbox"/> Other:</p>	
	Vital signs Q 5 minutes	
	Other:	



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Initiales du prescripteur pour chaque ordonnance <small>Prescriber's initials for each order</small>	Post-Procedure				Initiales de l'infirmier(ère) notées <small>Nurse's initials noted</small>
	After septostomy, proceed to post-operative vital sign monitoring: <ul style="list-style-type: none"> • Vital signs Q 15 minutes x 1 hour, then • Vital signs Q 30 minutes x 2 hours, then • Vital signs Q hour <p><i>**Note: If femoral approach was used, follow post-catheterization protocol for neurovascular signs monitoring.</i></p>				
	Target saturations: <ul style="list-style-type: none"> • Pre-ductal – greater than 70% • Post-ductal – greater than 70% • Other: 				
	<input type="checkbox"/> Insert NG or OG tube and place to straight drainage OR <input type="checkbox"/> Insert gastric drainage tube and place to low wall suction				
	Advise medical team if: <ul style="list-style-type: none"> • Heart rate is less than _____ bpm or greater than _____ bpm • Blood pressure (systolic / mean) is less than _____ mmHg or greater than _____ mmHg • Pre-ductal saturation is less than _____% or greater than _____% • Post-ductal saturation is greater than 10% above pre-ductal saturation • Urine output less than _____ mL/kg/h 				
	Laboratory tests (to be entered into clinical information system): <ul style="list-style-type: none"> <input type="checkbox"/> CBC <input type="checkbox"/> Blood gas (arterial or capillary) <input type="checkbox"/> Electrolytes (Cl⁻, K⁺, Na⁺) <input type="checkbox"/> BUN and creatinine <input type="checkbox"/> AST and ALT <input type="checkbox"/> Other: 				
	Resuscitation				
	Have available during procedure but not prepared: <ul style="list-style-type: none"> • Epinephrine 0.1 mg/ml (1:10 000) • NaCl 0.9% for boluses • O negative packed red blood cells (should be kept in birthing center blood fridge until needed) 				
	Nom en lettres moulées <small>Name in print</small>	Signature	N° Permis <small>License No.</small>	Heure / Time <small>00:00</small>	Date <small>AAYY/MM/JD</small>
Médecin <small>Physician</small>					
	Nom en lettres moulées et/ou numéro de permis <small>Name in print and/or license number</small>		Initiales <small>Initials</small>	Heure / Time <small>00:00</small>	Date <small>AAYY/MM/JD</small>
Infirmier(ère) <small>Nurse</small>					
Pharmacien(ne) <small>Pharmacist</small>					