

**APPENDIX A: PAIN, ANXIETY (SEDATION) AND DELIRIUM GUIDELINES**

		<b>Intubated Hemodynamically Unstable or severe ARDS</b>	<b>Intubated Hemodynamically Stable, adequate gas exchange</b>	<b>Not Intubated Stable</b>
<b>Background</b>	Pain	<b>Goals:</b> Minimize pain, patient safety RASS -3 to -4, no sedation holiday, consider paralysis  <i>Option 1:</i> Ketamine drip <i>Option 2:</i> Intermittent Narcotic (*Option 1 for TBI) <i>Option 3:</i> Fentanyl or drip or equivalent if tolerated	<b>Goals:</b> Minimize pain, patient safety RASS -1 to -2, daily sedation holiday or continuously interactive patient  <i>Option 1:</i> fentanyl drip or equivalent <i>Option 2:</i> Ketamine Drip <i>Option 3:</i> Intermittent Narcotic (*Option 1 for TBI)	<b>Goals:</b> Minimize pain, patient safety RASS 0, continuously interactive patient  <i>Option 1:</i> Scheduled Enteral or Parenteral Narcotic <i>Option 2:</i> Intermittent as needed enteral or parenteral narcotic
	Sedation	<i>Option 1:</i> Ketamine drip <i>Option 2:</i> Intermittent Benzodiazepine <i>Option 3:</i> Propofol drip if tolerated (*Option 1 for TBI)	<i>Option 1:</i> Propofol Drip <i>Option 2:</i> Demedetomidine Drip <i>Option 3:</i> Intermittent Benzodiazepines	NA
	Adjuncts	Consider first: Axial or regional anesthetic by catheter or injection Consider also: <ul style="list-style-type: none"> <li>- scheduled acetaminophen or paracetamol</li> <li>- gabapentin and/or TCA for amputees</li> </ul>		

<b>Breakthrough</b>	Pain	<i>Option 1:</i> Intermittent/bolus ketamine <i>Option 2:</i> Intermittent/bolus narcotic	<i>Option 1:</i> Intermittent/bolus narcotic <i>Option 2:</i> Intermittent/bolus ketamine	<i>Option 1:</i> PCA <i>Option 2:</i> Intermittent as needed enteral or parenteral narcotic
	Sedation	<i>Option 1:</i> Intermittent/bolus ketamine <i>Option 2:</i> Intermittent/bolus benzodiazepine	<i>Option 1:</i> Intermittent/bolus benzodiazepine <i>Option 2:</i> Intermittent/bolus ketamine	<i>Option 1:</i> As needed enteral or parenteral benzodiazepine
	Adjuncts	Consider: <ul style="list-style-type: none"> <li>- Dim, calm environment, reassurance, music, presence of friends/family</li> <li>- Give bolus and/or adjust dose of axial or regional anesthetic</li> </ul>		

<b>Procedural</b>	Pain	<i>Option 1:</i> Intermittent/bolus ketamine <i>Option 2:</i> Intermittent/bolus narcotic	<i>Option 1:</i> Intermittent/bolus ketamine <i>Option 2:</i> Intermittent/bolus narcotic	<i>Option 1:</i> Planned pre-procedural enteral or parenteral narcotic <i>Option 2:</i> Pre-procedural ketamine <i>Option 3:</i> Demedetomidine
	Sedation	<i>Option 1:</i> Intermittent/bolus ketamine <i>Option 2:</i> Intermittent/bolus benzodiazepine	<i>Option 1:</i> Increase dose of background propofol +/- propofol bolus <i>Option 2:</i> Intermittent/bolus benzodiazepine <i>Option 3:</i> Intermittent/bolus ketamine	<i>Option 1:</i> Pre-procedural ketamine +/- benzodiazepine <i>Option 2:</i> Planned pre-procedural enteral or parenteral benzodiazepine <i>Option 3:</i> Demedetomidine

<b>Delirium</b>	Prevention & Management	<ul style="list-style-type: none"> <li>- Maintain day night cycles</li> <li>- Consider afternoon naps</li> <li>- Consider ear plugs at night</li> <li>- Consider less sedation and avoid benzodiazepines</li> <li>- Prioritize early mobility and patient interaction</li> </ul>		
	Treatment	Consider dexmedetomidine for sedation and/or at night for sleep Consider quetiapine		