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## Nursing Services - Department of Radiology- Diagnostic Division

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**SUBJECT TITLE:** Protocol for oral diazepam and or lorazepam for outpatient adult MRI, Nuclear Medicine and Ultrasound patients with requiring oral sedation in the Radiology Department.

**PURPOSE:** To facilitate obtaining orders from a licensed independent practitioner (LIP) for oral diazepam or lorazepam to assure successful imaging of adult patients with sedation needs.

**TARGET POPULATION:** Adult MRI outpatients who require oral sedation to complete MRI studies.

**CLINICAL ASSESSMENT/SCREENING:**

- A. Allergies: to Diazepam, Lorazepam, Klonopin, Xanax or other benzodiazepines.
- B. Contraindications: Current use of narcotics, alcoholism, recreational drugs or benzodiazepines. Past history of narcotic or benzodiazepine abuse or addiction. Diagnosed with Myasthenia Gravis, severe liver disease, narrow-angle glaucoma, or severe breathing problems or sleep apnea.
- C. Patient with any contraindication related to PO medication administration, the RN or Paramedic will contact the provider who ordered the exam to discuss further treatment plans. If the ordering provider decides to proceed with PO medication, he or she will be responsible for placing the order.
- D. Patient must have a driver.

**DETAILS OF THE ORDER:** The RN/Paramedic will place an order in the EMR using the order mode "per protocol" for the following:

- A. Diazepam 5 mg po, once for MRI study or Lorazepam 1mg po, once for MRI study.
- B. For use with adult patients who have a need for an oral sedative for a successful MRI.

**CRITERIA FOR CALLING THE RAPID RESPONSE TEAM AND NOTIFYING A LIP:**

1. Two of the following:

Temperature less than or equal to 35° C	Temperature greater than or equal to 39° C
Respiratory rate (RR) less than 8 breaths per minute	RR greater than 28 breaths per minute
Oxygen saturation less than 90% while on FIO2 greater than 60%	Acute change in mental status
Systolic Blood Pressure (SBP) less than 90 mmHg	SBP greater than 40 mmHg change
Pulse (P) less than 40 beats per minute	P greater than 120 beats per minute
Urine output less than 50 ml in 4 hours	Staff caring for patient worried or unsure
White blood count (WBC) greater than 14 or serum carbon dioxide level (CO2) less than 16	

2. Any healthcare provider may call a Rapid Response. **ONCE A RAPID RESPONSE HAS BEEN CALLED, IT CANNOT BE CANCELLED.**

### **EQUIPMENT:**

#### [A-1e Rapid Response Team Record](#)

Crash Cart - for contents refer to [Crash Cart \(Locked Contents\) Checklist](#)

Defibrillator

### **DOCUMENTATION REQUIREMENTS:**

- A. Staff utilizing protocol must document an order to initiate the protocol in patient's electronic medical record per the "Protocol Orders" clinical protocol.
- B. Indicate location of documentation in medical record: Results Review
- C. The order will be signed by the LIP responsible for the patient's care in accordance with the P & P for Protocols, PC-PCI-05.53

### **RELATED POLICIES:**

[N-04.062](#)      Equipment Crash Cart, Defibrillator/Monitor Care and Check for Code Blue/Emergency Use

[N-04.063](#)      HeartStart MR.x Emergency Transport Equipment Use, Care and Checks

[N-04.064](#)      HeartStart MR.x Emergency Defibrillator/Monitor

### **REFERENCES:**

- L1      Eshed, I., Althoff, C., Hamm, B., Hermann, K. (2007). Claustrophobia and premature termination of magnetic resonance imaging examinations. *Journal of Magnetic Resonance Imaging* 26(2), 401-404. doi: 10.1002/jmri.21012
- L2      Heyer, C., Thuring, J., Lemburg, S., Kreddig, N., Hasenbring, M., Dohna, M., Nicolas, V. (2015). Anxiety for patients undergoing CT imaging: An underestimated problem? *Academic Radiology* 22(1), 105-112. doi: 10.1016/j.acra.2014.07.014

AHRQ Patient Safety Network: (2019) [Rapid Response Systems](#)

**APPROVED BY:**



9-4-20

Date

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