**Inclusion Criteria**
- All closed sternotomy cases

**Pain, Agitation, & Delirium Assessment Tools**
- FLACC (Pain/Agitation assessment) Q1 hr minimum
- SBS Q1 hr & 30 minutes after an intervention
- CAPD Q12 hr at 0400 & 1600

**Dexmedetomidine**
- Contraindications:
  - Severe bradycardia
  - Hypotension
  - Heart block

**Ketorolac**
- Contraindications:
  - Platelets <100K
  - Post-operative bleeding
  - SCr increased 2x baseline or >1.5 mg/dL
  - Increase in SCr ≥ 0.3 mg/dL from baseline
  - UOP <0.5 mL/kg/hr x 6 hrs

**Reversible Causes of Agitation**
- Correct environmental and physical factors that could be causing discomfort and/or agitation (see delirium preventative measures)

---

**Planned Extubation <48 Hours**
**Target SBS 0 to -1**

**Use Pain, Agitation, & Delirium Assessment Tools**

- **All patients >50 kg**
- **Dexmedetomidine IV**
  - Start infusion at 0.5 mcg/kg/hr
- **Acetaminophen NG**
  - 650 mg Q6 hr x 4 doses Max 4000 mg/day
- **Ketorolac IV**
  - 30 mg Q6 hr x 8 doses

**FLACC >4?**
- Morphine IV
  - 2-4 mg Q1 hr PRN pain
- **FLACC >4?**
  - Yes: Continue current therapy
  - No: Exclude reversible causes of agitation

**SBS 0 to -1?**
- Yes: Continue current therapy
- No: Reassess

**Titrate Dexmedetomidine IV**
- If SBS is +1 or +2, increase by 0.2 mcg/kg/hr Q15 min (Max 1.5 mcg/kg/hr) until SBS reaches goal (0 to -1)
- If SBS is -2 or -3, decrease by 0.2 mcg/kg/hr Q15 min until SBS reaches goal (0 to -1)

**FLACC >4?**
- **SBS 0 to -1?**
  - Yes: Continue current therapy
  - No: Reassess

**Morphine IV**
- 2-4 mg Q1 hr PRN pain
- Consider use of an alternative opioid

**SBS 0 to -1?**
- Yes: Continue current therapy
- No: Reassess reversible causes of agitation

---

*Developed through the efforts of Children's Healthcare of Atlanta and physicians on Children's medical staff in the interest of advancing pediatric healthcare. This is a general guideline and does not represent a professional care standard governing providers' obligation to patients. Ultimately, the patient's physician must determine the most appropriate care.*

© 2018 Children's Healthcare of Atlanta, Inc.