Sickle Cell Disease Children **Pain Pathway Ketamine/Dexmedetomidine ED** * Contraindications: **Ketamine** Inclusion Criteria: Allergy to ketamine • Admission for Sickle . • Liver failure Cell VOC • Myocardial ischemia Not intubated . Age < 3 yrs . Age > 3 yrs . Pregnancy • Unresolved pain with Schizophrenia/ short-term opioids schizoaffective disorder Poor side effect profile . Bipolar disorder with opioid use Concern for increased ICP Patient needs advanced pain • **Uncontrolled HTN** management Cerebral vascular disease . Severe hypovolemia Cardiac failure **Pulmonary HTN** . Seizure history Thyrotoxicosis Patient/family refusal **Dexmedetomidine** Admit patient to PICU Allergy to dexmedetomidine Does the patient have a Consult Acute Pain Significant bradycardia -No contraindication* to ketamine or Yes Service Significant hypotension dexmedetomidine? Consult Hem/Onc Patient/family refusal **ED Actions:** Use "CKI" order set to place Admit to Hem/Onc floor. following orders: management by Hem/Onc Service Place 2 PIVs Initiate HR, BP, SpO2 monitoring Has patient received any Yes ketamine within the past 2 hours? No Use "CKI" order set to order ketamine infusion Use ONLY infusion and monitoring orders (do not order non-narcotic or side effect medications) Consider IV ketamine bolus Begin low dose ketamine at 0.15 mg/kg/hr (MAX 15 Complete transfer to PICU of 0.2 mg/kg (MAX 15 mg) mg/hr) Consider dose reduction for renal impairment Order dexmedetomidine infusion and begin at 0.25 mcg/kg/hr (MAX 25 mcg/hr)



Disclaimer: Pathways are intended as a guide for practitioners and do not indicate an exclusive course of treatment nor serve as a standard of medical care. These pathways should be adapted by medical providers, when indicated, based on their professional judgement and taking into account individual patient and family circumstances.