Inclusion Checklist
If any of the following are answered with NO, DO NOT ADMINISTER Ibutilide (Corvert):
1) Continuous bedside cardiac monitoring in place and to be performed during ibutilide (Corvert) administration, Crash Cart with defibrillator must be readily accessible and external defibrillator pads applied to the patient
2) Cardiologist or designated physician present to monitor patient during the administration
3) ACLS certified RN present to monitor the patient during and following ibutilide (Corvert) administration
4) Potassium level greater than or equal to 4 mmol/L within the past 24 hours
5) Magnesium level greater than or equal to 2 mg/dL within the past 24 hours
6) Baseline QTc less than 450 ms (female) or 470 ms (males) as evaluated by a previous 12-lead ECG in sinus rhythm
7) Patient remains in atrial fibrillation/flutter
NOTE : Ibutilide (Corvert) usage restricted to cardiologists or designated physician MUST BE PRESENT FOR ADMINISTRATION

Height_____________________
Weight_____________________
Allergies___________________

General
Level of Care
[X] Admit to Inpatient
Diagnosis: ___________________________ Required
Expected length of stay (days): _________________ Required
Certification: I reasonably expect the patient will require inpatient services that span a period of time over two-midnights. (See Rationale Section in the order for options) Additional documentation will be found in progress notes and admission history and physical. Must be completed by Physician for Inpatient Admissions:
Rationale for Inpatient Admission: _________________ Required
Plans for post hospital care: See Discharge Summary/Progress Note
Level of Care: ___________________________ Required

[ ] Other

Vital Signs
[X] Vital signs- Baseline
Routine, Once, Starting today For 1 Occurrences, Baseline Vitals Signs

[X] Vital signs
Routine, Every hour, Starting today For 4 Hours, After administration.

[ ] Other
**Physician Orders**

**Ibutilide (Corvert)**

**Notify Provider**

- **Notify provider**
  - Routine, Until discontinued, Starting today
  - Pulse greater than:
  - Respiratory rate less than:
  - Respiratory rate greater than:
  - Temperature greater than (celsius):
  - Urine output less than (mL/hr):
  - Systolic BP greater than:
  - Systolic BP less than:
  - Diastolic BP greater than:
  - Diastolic BP less than:
  - Other:
    - If arrhythmias, hypotension or status changes for four hours after Ibutilide (Covert) Administration.

- **Notify provider**
  - Routine, Until discontinued, Starting today
  - Four hours after completion of administration for discharge instructions.

**Diet**

- **Diet NPO**
  - Diet effective now, Starting today
  - NPO Except:
  - Diet Comments:

**Nursing Communication During Administration**

- **Nursing communication**
  - Routine, Until discontinued, Starting today
  - Crash Cart with defibrillator must be readily accessible and external defibrillator pads applied to patient during the administration of Ibutilide (Corvert).

- **Nursing communication**
  - Routine, Until discontinued, Starting today
  - Obtain 12-lead ECG 5 minutes into each administration of ibutilide (Corvert) and at completion of each dose during the administration of Ibutilide (Corvert).

- **Nursing communication**
  - Routine, Until discontinued, Starting today
  - Continuous QTc monitoring during the administration of Ibutilide (Corvert).

- **Nursing communication**
  - Routine, Until discontinued, Starting today
  - If QTc interval is greater than 0.5 seconds, if sustained or non-sustained ventricular tachycardia occurs, alert the prescribing cardiologist and stop the Ibutilide (Corvert) administration.

- **Nursing communication**
  - Routine, Until discontinued, Starting today
  - Discontinue ibutilide (Corvert) administration when presenting arrhythmia has converted and been evaluated.

**Nursing Communication Monitoring after Administration**

- **Provider Initial:**

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**Franciscan Health System**
- St. Joseph Medical Center
- St. Francis Hospital - St. Clare Hospital
- St. Elizabeth Hospital - St. Anthony Hospital
- Highline Medical Center
- Harrison Medical Center
- Franciscan Medical Group
- Harrison HealthPartners
- Regional Hospital

**Patient Information**

**Physician Orders**

**Ibutilide (Corvert)**
### PHYSICIAN ORDERS

**IBUTILIDE (CORVERT)**

| [X] Cardiac monitoring | Routine, Continuous, Starting today For 4 Hours, Continuous ECG monitoring after administration. |
| [ ] Other |

### Labs

#### Chemistry

| [X] Magnesium | Once, Starting today For 1 Occurrences Baseline (if not ordered within the past 24 hours). |
| [X] Potassium | Once, Starting today For 1 Occurrences Baseline (if not ordered within the past 24 hours). |
| [ ] Other |

### Imaging

#### Cardiac Studies

| [X] ECG 12 lead | Routine, Once, Starting today Baseline (if not ordered within the past 24 hours). |
| [X] ECG 12 lead | Routine, Once, Starting today Baseline (if not ordered within the past 24 hours). |
| [X] ECG 12 lead | Routine, Once, Starting today Baseline (if not ordered within the past 24 hours). |
| [X] ECG rhythm strip | Routine, Once, Starting today Baseline (if not ordered within the past 24 hours). |
| [ ] Other |

### Medications

**IBUTILIDE (CORVERT)**

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**Provider Initial:**

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**Franciscan Health System**

St. Joseph Medical Center  
St. Francis Hospital  
St. Clare Hospital  
St. Elizabeth Hospital-St. Anthony Hospital  
Highline Medical Center  
Harrison Medical Center  
Franciscan Medical Group  
Harrison HealthPartners  
Regional Hospital

**PATIENT INFORMATION**

**PHYSICIAN ORDERS**

**IBUTILIDE (CORVERT)**
[] ibutilide (CORVERT) IV bolus - Patient greater than or equal to 60 kg
1 mg, IntrAvenous, Once, For 1 Doses
Patient weight greater than or equal to 60 kg: Ibutilide (CORVERT) slow IV push over 10 minutes. If the arrhythmia does not terminate within 10 minutes after end of initial dose, a second 10-minutes dose of equal strength may be administered 10 minutes after the completion of the first dose. "K <4 or Mg < 2, QTc interval >450msec (females) or > 470 msec (males)" Weight >/= 60 kg give 1 mg. Weight <60 kg give 0.01 mg/kg.
Routine

[] ibutilide (CORVERT) IV bolus - Patient weight less than 60 kg
0.01 mg/kg, IntrAvenous, Once as needed, For 1 Doses
Slow IV push over 10 minutes. If the arrhythmia does not terminate within 10 minutes after end of initial dose, a second 10-minutes dose of equal strength may be administered 10 minutes after the completion of the first dose. "K <4 or Mg < 2, QTc interval >450msec (females) or > 470 msec (males)" Weight >/= 60 kg give 1 mg. Weight <60 kg give 0.01 mg/kg.
Routine

[] Other

Date: ______ Time: ______ Printed Name of Ordering Provider: __________________________________________________________
Provider Signature: ______________________________________________________________________________________________
Date: ______ Time: ______ RN Acknowledged: ______________________________________________________________