GOAL-DIRECTED SEDATION: Is patient comfortable and at goals?

**STEP #1: ASSESS & MANAGE PAIN**
Goal: NRS ≤3 (preferred) or CPOT≤2
Treat pain first!

1. **OPIOID-TOLERANT/HIGH START**
   - OPIOID INFUSION

2. **PAIN ABOVE GOAL**
   - OPIOID BOLUS FOR ACUTE PAIN
   - REASSESS
   - ≥4 PRN doses within 4 hours
   - INCREASE OPIOID INFUSION RATE

3. **PAIN AT GOAL**
   - OPIOID INFUSION ONLY
   - HOLD OPIOID INFUSION UNTIL RASS AT GOAL.
   - RESUME AT ½ PREVIOUS RATE IF PAIN
   - REASSESS

**STEP #2: ASSESS & TREAT AGITATION**
Goal: RASS 0 to -1

1. **OPIOID-INFUSION ONLY**
   - OPIOID INFUSION + SEDATIVE
   - WEAN SEDATIVE FIRST
   - WEAN SEDATIVE OFF AND RASS STILL BELOW GOAL
   - OPIOID INFUSION PER PROTOCOL

2. **RASS BELOW GOAL**
   - OPIOID INFUSION ONLY
   - OPIOID INFUSION + SEDATIVE
   - WEAN SEDATIVE AS ABLE
   - WEAN OPIOID INFUSION PER PROTOCOL
   - ADD & TITRATE SEDATIVE Notify Provider

3. **RASS AT GOAL**
   - OPIOID INFUSION ONLY
   - OPIOID INFUSION + SEDATIVE
   - WEAN SEDATIVE AS ABLE
   - WEAN OPIOID INFUSION PER PROTOCOL
   - ASSESS CAM-ICU Notify Provider if CAM-ICU Positive

**PREVENT & DETECT DELIRIUM**
Goal: CAM-ICU negative

**EARLY MOBILITY FAMILY EMPOWERMENT**

**Friendly Reminders**
- SAT and SBT daily for eligible patients
- If SAT failure and infusion(s) need to be restarted, please resume at one-half of previous rate 😊