



Riverbend Medical Center Regional Infusion Center (RIC)
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Lidocaine INFUSION for Chronic Pain (v 08/07/2025)

Diagnosis/Indication (ICD-10): _____ Weight _____

Medication:

- Lidocaine _____ mg/ kg actual body weight IV over 60 minutes (max dose 500 mg) every _____ week x _____ doses

Nursing communications:

- Vital signs (heart rate, blood pressure, respiratory rate): Initial, 30 minutes after start of infusion, minimum 15 minutes post-infusion and as needed
- Patient may be discharged 15 minutes post-infusion if there is no evidence of adverse reaction and vital signs are stable
- Potassium, magnesium, serum creatinine and ALT need to be done within 1 month of first infusion (provider responsibility to order and send results prior to start)
- ECG needs to be done within 1 month of first infusion and repeated annually (provider responsibility to order and send result)
- Nursing assess for adverse events: numbness, tingling, lightheadedness, dizziness, nausea and vomiting

Labs:

- Complete metabolic panel, Magnesium repeated annually (to be drawn at Infusion Center if not otherwise available)

Access:

- .. Insert peripheral IV
 - Every visit, remove after IV administration complete
- .. Access & Use Central Line/ CVAD
 - Initiate Central Line (Non-PICC) Maintenance Protocol
 - Heparin, porcine (PF) 100 unit/mL flush 5 mL as needed for Port-a-Cath line care
 - Alteplase (Cathflo) 2 mg as needed for occluded catheter. For clearing central line catheter- retain in catheter for 30 minutes to 2 hours, instill a 2nd dose if occluded
- .. Access & Use PICC
 - Initiate PICC Maintenance Protocol
 - Normal saline flush 3 mL as needed for PICC/ Hickman line care
 - Alteplase (Cathflo) 2 mg as needed for occluded catheter. For clearing central line catheter- retain in catheter for 30 minutes to 2 hours, instill a 2nd dose if occluded

Emergency Medications:

- Diphenhydramine (BENADRYL) 25 to 50 mg IV as needed for mild to moderate drug reactions (flushing, dizziness, headaches, diaphoresis, fever, palpitations, chest discomfort, blood pressure changes (\geq 20 points in SBP), nausea, urticaria, chills, pruritic).
 - Administer 25 mg IV once, if reaction does not resolve in 3 minutes may repeat 25 mg IV dose for a total of 50 mg and contact provider.
- MethylPREDNISolone sodium succinate (Solu-MEDROL) 125 mg IV once as needed for shortness of breath, continued symptoms of mild to moderate drug reaction (flushing, dizziness, headaches, diaphoresis, fever, palpitations, chest discomfort, blood pressure changes (\geq 20 points in SBP), nausea, urticaria, chills, pruritic) that worsen or persist 5 minutes after administration of diphenhydramine (Benadryl). Contact provider if given.
- Epinephrine 0.3 mg IM once for anaphylaxis. If reaction does not resolve in 3 minutes may repeat 0.3 mg IM dose for a total of 0.6 mg. Avoid use of hand, foot, leg veins in elderly patient and those with occlusive vascular disease. Contact provider if given.
- Famotidine (PEPCID) 20 mg IV once as needed for infusion/ allergic reaction.

Patient name: _____

Provider printed name: _____

DOB: _____

Provider signature: _____

Height _____ Weight _____

Date: _____ Time: _____