

Formula	Answer
<p>Total in 24 hours of each opioid</p> <p>Calculate the total amount of each route of each opioid given in the previous 24 hours, including regular and prn doses.</p>	
<p>Consider cross tolerance and calculate the reduction if applicable.</p> <p>To account for the lack of cross tolerance, calculate and subtract 30 % to 50% reduction of the 24hr dose of any opioid being rotated to a new (different) opioid. Clinical judgement is used in determining the degree of reduction. Always confirm with a resource expert if you are unsure.</p>	
<p>One route</p> <p>Using ROUTE conversion ratio (i.e., PO to SC /IV of 2:1), convert to one route of administration.</p>	
<p>One Drug Current Total</p> <p>Using DRUG conversion ratio (i.e., morphine 10 mg PO = hydromorphone 2 mg PO), convert to one drug. Choose the medication you plan to use for regular dosing, convert and add together for 24 hour total</p>	
<p>Choose scheduled dosing times.</p> <p>To choose new regular (ATC) dose, divide total 24hr amount by appropriate interval based on product to be used. For example: divide by 6 for q4hr dose, divide by 2 for q12hr dose, divide by 24 for hourly infusion</p>	
<p>Calculate the breakthrough dose: (BT) Calculate approximately 10% of the total daily dose of the scheduled opioid Example calculations for breakthrough opioids delivered by:</p> <p>Mouth: morphine 15 mg PO q12hr = 30 mg PO/ 24hr 10% of 30 mg = 3 mg (max dose) PO q1hr prn</p> <p>SC: morphine 10 mg q4hr SC = 60 mg SC /24hr 10% of 60 mg = *6 mg (max dose) SC q1hr prn</p> <p>CSCI: morphine 2.5 mg q1hr SC continuous infusion = 60 mg SC /24hr 10% of 60 mg = *6 mg (max dose) SC q1hr prn or *3 mg SC q1/2hr prn or *1.5 mg q15 min</p> <p>*clinical judgment may indicate the need to lower the calculated dose</p>	