

These non-pharmacologic interventions maximize patients' safety, stimulation, and support, minimizing the need for pharmacologic intervention, and reducing factors which often lead to the continuation of CO.

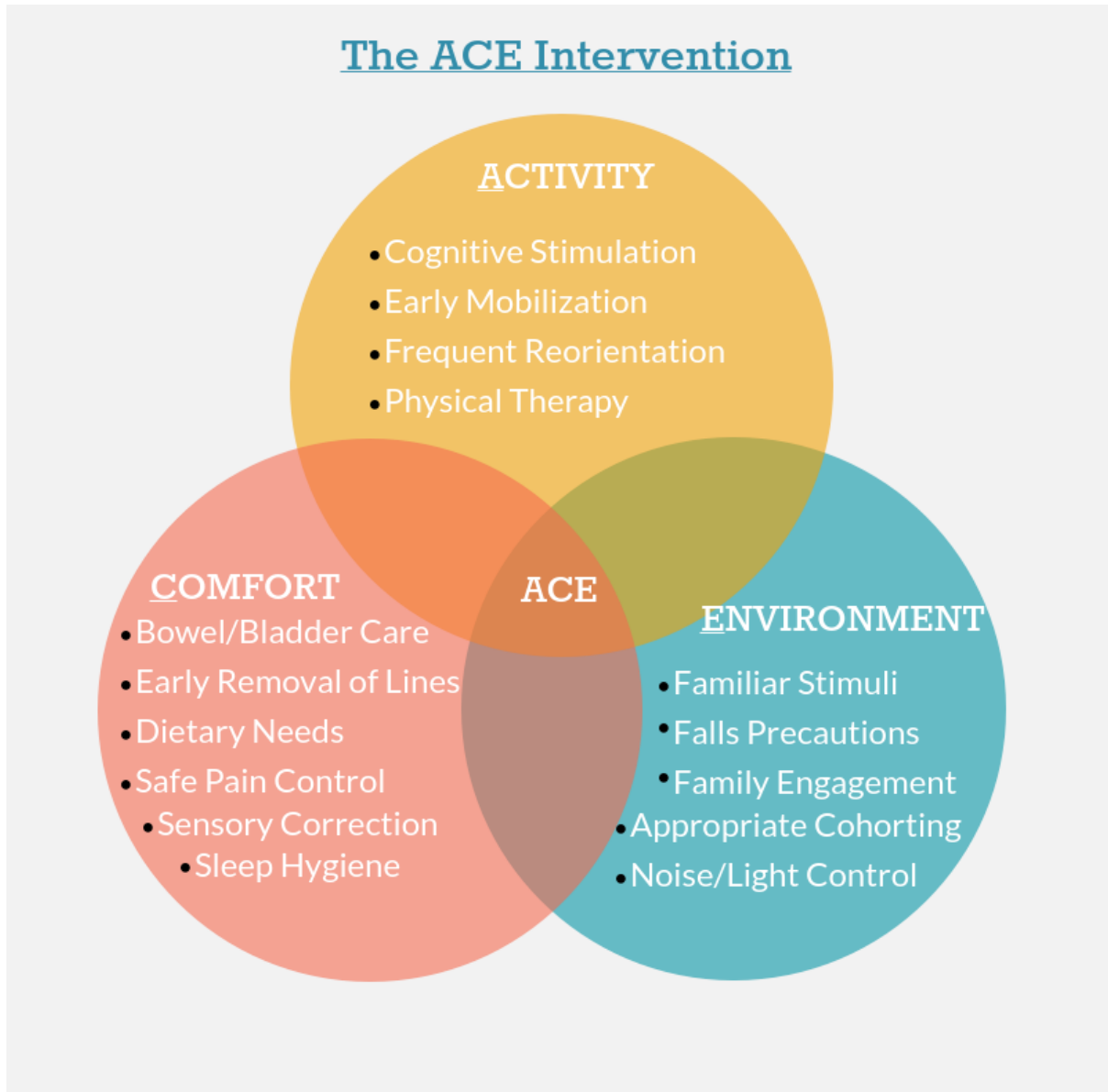


Table for Supplement with Legend:

**Table 1: Low Dose Antipsychotic Administration Schedule**

<b>Generic Name</b>	<b>Usual Dose Range (mg/day)</b>	<b>Route</b>	<b>Extrapyramidal symptoms</b>	<b>QTc prolongation</b>	<b>Orthostatic Hypotension</b>
Haloperidol	0.25-4	PO/IM/IV	+++	++ (more with IV use)	+
Quetiapine	12.5-100	PO	+/-	+++	+++
Risperidone	0.125-2	PO, ODT	++	+	++

Low dose antipsychotics were utilized only when nonpharmacologic measures were ineffective for agitation and/or psychosis. Please note that the FDA has issued a black box warning on the use of antipsychotics in elderly patients with dementia (US Food and Drug Administration: Information for Healthcare Professionals: Conventional Antipsychotics.

<https://www.fda.gov/Drugs/DrugSafety/ucm124830.htm> Published June 16, 2008. Accessed Aug 6, 2017)