

ELECTROLYTE REPLACEMENT - ICU

REMINDER: DO NOT USE on patients with DKA, Re-feeding syndrome, receiving any form of dialysis, or in emergency situations.

NURSING

- Notify Physician and call for replacement orders if:
 - Potassium level < 2.5 mEq/L
 - Magnesium level < 0.8 mg/dL
 - Phosphorus levels < 1.1 mg/dL
- Electrolyte Replacement Labs
 - Draw Potassium level 2 Hrs after each IV dose or 4 Hrs after each Po dose
 - Draw Magnesium level 4 Hrs after last IV dose.
 - Draw Phosphorus level 4 Hrs after last IV dose.
 - May time labs to coincide with other labs to be drawn at/around the same time
- RN to order serum creatinine (SCr) lab STAT if no lab available today. Must be checked prior to replacing electrolytes

MEDICATIONS

REMINDER - These are standing orders unless discontinued and must be discontinued upon patient transfer out of critical care.

- Pharmacy to discontinue ALL previous standing Prn orders for potassium, magnesium, and phosphorus – starting ICU electrolyte replacement protocol.

PO POTASSIUM ORDERS

- Potassium Chloride (KDur) 60 mEq Po Prn potassium 2.5 – 3.4 mEq/L. If pt unable to take Po or NG Potassium Chloride, give IV (if ordered). *Hold and notify MD if SCr is > 1.8 mg/dL or if patient is receiving any form of dialysis or if patient has average urine output < 30 mL/Hr.* Must discontinue upon patient transfer out of critical care.
- Potassium Chloride (KDur) 40 mEq Po Prn potassium 3.5 – 3.8 mEq/L. If pt unable to take Po or NG Potassium Chloride, give IV (if ordered). *Hold and notify MD if SCr is > 1.8 mg/dL or if patient is receiving any form of dialysis or if patient has average urine output < 30 mL/Hr.* Must discontinue upon patient transfer out of critical care.

NG POTASSIUM ORDERS

- Potassium Chloride liquid (20 mEq/15 mL) 60 mEq NG Prn potassium 2.5 – 3.4 mEq/L. If patient is unable to take Po KCl (if ordered) and has an NG tube. *Hold and notify MD if SCr is > 1.8 mg/dL or if patient is receiving any form of dialysis or if patient has average urine output < 30 mL/Hr.* Must discontinue upon patient transfer out of critical care.
- Potassium Chloride liquid (20mEq/15 mL) 40 mEq NG Prn potassium 3.5 – 3.8 mEq/L. If patient is unable to take Po KCl (if ordered) and has an NG tube. *Hold and notify MD if SCr is > 1.8 mg/dL or if patient is receiving any form of dialysis or if patient has average urine output < 30 mL/Hr.* Must discontinue upon patient transfer out of critical care.

IV POTASSIUM ORDERS

- Potassium Chloride 40 mEq (20 mEq/100 mL premixed IVPB over 1 Hr x 2) Prn potassium 2.5 – 3.4 mEq/L. If pt unable to take Po or NG Potassium Chloride (if ordered). *Hold and notify MD if SCr is > 1.8 mg/dL or if patient is receiving any form of dialysis or if patient has average urine output < 30 mL/Hr.* Must discontinue upon patient transfer out of critical care.
- Potassium Chloride 20 mEq/100 mL premixed IVPB over 1 Hr Prn potassium 3.5 – 3.8 mEq/L. If pt unable to take Po or NG Potassium Chloride (if ordered). *Hold and notify MD if SCr is > 1.8 mg/dL or if patient is receiving any form of dialysis or if patient has average urine output < 30 mL/Hr.* Must discontinue upon patient transfer out of critical care.

ELECTROLYTE REPLACEMENT ICU V12_10.24.12 OK FOR PRINTING

MEDITECH NAME: ELECTROLYTE REPLACEMENT-ICU

MEDITECH MNEMONIC: RX.ELYTC

Zynx = None

NANCY CHRISTIANSEN/GHIASSI

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MAGNESIUM REPLACEMENT ORDERS

- Magnesium sulfate 4 Gm/100 mL premixed IVPB over 2 Hrs Prn magnesium 0.8 – 1.3 mg/dL. *Hold and notify MD if SCr is > 1.8 mg/dL or if patient is receiving any form of dialysis or if patient has average urine output < 30 mL/Hr.* Must discontinue upon patient transfer out of critical care.
- Magnesium sulfate 2 Gm/50 mL premixed IVPB over 1 Hr Prn magnesium 1.4 – 1.7 mg/dL. *Hold and notify MD if SCr is > 1.8 mg/dL or if patient is receiving any form of dialysis or if patient has average urine output < 30 mL/Hr.* Must discontinue upon patient transfer out of critical care.

PHOSPHORUS REPLACEMENT ORDERS

- Sodium phosphate 18 mmol IVPB in 150 mL D5W over 4 Hrs Prn phosphorus 1.1 – 1.6 mg/dL. *Hold and notify MD if SCr is > 1.8 mg/dL or if patient is receiving any form of dialysis or if patient has average urine output < 30 mL/Hr.* Must discontinue upon patient transfer out of critical care.
- Sodium phosphate 9 mmol IVPB in 100 mL D5W over 2 Hrs Prn phosphorus 1.7 – 2.3 mg/dL. *Hold and notify MD if SCr is > 1.8 mg/dL or if patient is receiving any form of dialysis or if patient has average urine output < 30 mL/Hr.* Must discontinue upon patient transfer out of critical care.

Other medications: _____