Physician Orders ADULT: Hydration Protocol Plan

Care Sets/Protocols/PowerPlans

Cath/PCI Hydration Orders

NOTE: Do not hydrate using these orders if patient has active Pulmonary Edema, is on Hemodialysis or has severe Valvular Heart Disease. DO NOT use NSAIDS for pain control. Hold ACE inhibitors, ARB, and Diuretics on the day of Procedure. Notify Cardiologist if serum creatinine is greater than 25% of baseline.(NOTE)*

☐ Initiate Powerplan Phase

  T;N, Phase: Pre-Cath Hydration Orders, When to Initiate: When patient arrives to unit, On Day of Cath/PCI.

☐ Initiate Powerplan Phase

  T;N, Phase: Post-Cath Hydration Orders, When to Initiate: Other-See Special Instructions, When patient arrives in Post Cath Recovery area.

Pre-Cath Hydration Phase

Nursing Communication

☐ Nursing Communication

  T;N, Verify that ACE Inhibitors, ARB, Diuretics and NSAIDS were held the day of procedure. Notify Cardiologist if medications not held.

☐ Nursing Communication

  T;N, OUTPATIENT ONLY: Notify Cardiologist if serum creatinine is greater than 25% of baseline.

Continuous Infusion

Normal Renal Function (GFR greater than 60 mL/min)- OUTPATIENT(NOTE)*

☐ Sodium Chloride 0.9%

  1,000 mL, IV, Routine, 3 mL/kg/hr

  Comments: Infuse at 3mL/kg/hr at least 1 hr prior to procedure

Normal Renal Function (GFR greater than 60 mL/min) and Normal LVEF (or unknown) -- INPATIENT(NOTE)*

☐ Sodium Chloride 0.9%

  1,000 mL, IV, Routine, 1 mL/kg/hr

  Comments: Begin infusion at 1mL/kg/hr (maximum rate 75 mL/hr) 12 hrs prior to procedure

Normal Renal Function (GFR greater than 60 mL/min) and Mild to Moderate LV dysfunction (30-40%)-- INPATIENT(NOTE)*

☐ Sodium Chloride 0.9%

  1,000 mL, IV, Routine, 0.75 mL/kg/hr

  Comments: Begin infusion at 0.75mL/kg/hr (maximum rate 50 mL/hr) 12 hrs prior to procedure

Normal Renal Function (GFR greater than 60 mL/min) and Severe LV dysfunction (EF less than 30%)-- INPATIENT(NOTE)*

☐ Sodium Chloride 0.9%

  1,000 mL, IV, Routine, 20 mL/hr

  Comments: Begin infusion at 20mL/hr on call to cath lab

Impaired Renal Function (GFR greater than 30 mL/min and less than 60 mL/min)(NOTE)*

☐ Sodium Chloride 0.9%

  1,000 mL, IV, Routine, 3 mL/kg/hr
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Comments: PRE-PROCEDURE Infuse at 3mL/kg/hr at least 1 hr prior to procedure - Not to exceed 500 mL/hr

Post-Cath Hydration Phase
Continuous Infusion

Normal Renal Function (GFR greater than 60 mL/min)(NOTE)*

☐ Sodium Chloride 0.9%
   1,000 mL, IV, Routine, 1.5 mL/kg/hr
   Comments: Infuse at 1.5mL/kg/hr post procedure until discharge OR maximum of 4 hr

Impaired Renal Function (GFR less than 60 mL/min and greater than 30 mL/min)(NOTE)*

☐ Sodium Chloride 0.9%
   1,000 mL, IV, Routine, mL/kg/hr
   Comments: Continue post-procedure fluids at same rate as intra-procedure fluids for 4 hours.

☐ Sodium Chloride 0.9%
   1,000 mL, IV, Routine, 1.5 mL/kg/hr
   Comments: Infuse at 1.5mL/kg/hr post-procedure until discharge OR maximum of 4 hr

Laboratory

☐ Creatinine
   Routine, T+1;0400, once, Type: Blood

☐ Creatinine
   Routine, T+2;0400, once, Type: Blood

Consults/Notifications/Referrals
Chronic Kidney Disease Stage IV - V (GFR less than 30 mL/min)(NOTE)*

NOTE: For OUTPATIENT ONLY: Order Physician Consult below.(NOTE)*

☐ Physician Consult
   T;N, Routine, Consult Nephrology
   NOTE: Consult or Notify Nephrologist. Hold Cath if serum Creatinine is greater than 25% of baseline. DO NOT resume ACE/ARB until 72 hr post cath. Monitor serum Creatinine at 24 hrs and 48 hrs post cath. No other contrast procedures within 72 hrs of Cath. Follow infusion guidelines as above for Impaired Renal Function.(NOTE)*

Date                    Time                    Physician’s Signature                    MD Number

*Report Legend:
DEF - This order sentence is the default for the selected order
GOAL - This component is a goal
IND - This component is an indicator
INT - This component is an intervention
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IVS - This component is an IV Set
NOTE - This component is a note
Rx - This component is a prescription
SUB - This component is a sub phase, see separate sheet
R-Required order