

## Hydration Protocol

(Recommended for eGFR $\leq$ 45 cc/min or eGFR  $\leq$  60 IF comorbid conditions include diabetes, CHF or cirrhosis.)

Allergies: \_\_\_\_\_

Exam date: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Code Status:  Full Code  No Code  Partial Code (specify): \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

1. Admit as observation:  under Hospitalist Service  other: \_\_\_\_\_

2. Nursing to order specific CT scan in Meditech (CT tech will provide the mnemonic the night before procedure).

3. N-Acetylcysteine (Mucomyst) 600 mg (3 ml) PO (mixed with juice or cola).

Dosing options:

- a.  1<sup>st</sup> dose 12 hours before the contrast infusion; 2<sup>nd</sup> dose 30 minutes before infusion, and 3<sup>rd</sup> dose 12 hours after contrast infusion. If **not** taken please call CT prior to scan.
- b.  600 mg bid day prior to contrast infusion, and 600 mg bid day of contrast infusion (with the 1<sup>st</sup> dose on the day of the contrast infusion to be taken PRIOR to contrasted procedure). If **not** taken please call CT prior to scan.

4. Start peripheral IV.

5. IV Fluid options:

- a.  Normal Saline at 3 ml/kg/hr for 1 hour before procedure. Cap IV during procedure. After procedure completed, resume NS infusion at 1 ml/kg/hr for 6 hours. Then discontinue IVF and IV. **Hold IVF if patient develops SOB, rales or pulse oximetry saturation <90%.**
- b.  ½ Normal Saline at 3 ml/kg/hr for 1 hour before procedure. Cap IV during procedure. After procedure completed, resume ½ NS infusion at 1 ml/kg/hr for 6 hours. Then discontinue IVF and IV. **Hold IVF if patient develops SOB, rales or pulse oximetry saturation <90%.**
- c.  150 meq of NaHCO<sub>3</sub> in 1000 ml of sterile water (obtain from pharmacy) at 3 ml/kg/hr for 1 hour before procedure. Cap IV during procedure. After procedure completed, resume sodium bicarbonate infusion at 1 ml/kg/hr for 6 hours. Then discontinue IVF and IV. **Hold IVF if patient develops SOB, rales or pulse oximetry saturation <90%.**
- d.  **IF patient has CHF, SLOW THE ABOVE INITIAL RATE of IVF down to 1.5 ml/kg/hr for the 1<sup>st</sup> hour of IV infusion.**

6. Routine vital signs with continuous pulse oximetry monitoring post procedure.
7. NPO pre-procedure. Post procedure resume home diet.
8. Activity as is at home.
9. See Home Medication Reconciliation form.
  - Hold all diuretics day of procedure (unless SOB with hydration develops).
  - Hold ACE inhibitors and Angiotensin Receptor Blockers day prior to procedure, day of procedure, and day after procedure.
10. For diabetic patients: hold for 48 hours prior to procedure any medication containing metformin (including Avandament, Glucophage or Glucophage XR, Glucovance, Metaglip, Riomet, Fortamet, Actoplus Met).
11. Discharge to home after IV hydration.
12. BMET to be obtained two days after iodinated contrast procedure. Send result to this ordering clinician.
13. Home Medication instruction for discharge is as per Discharge Medication Reconciliation Form.

Date/Time: \_\_\_\_\_ MD Signature: \_\_\_\_\_