



PHYSICIAN'S PREPRINTED ORDERS

TITLE: ELECTROLYTE REPLACEMENT PROTOCOL
PHYSICIAN/GROUP: EIRMC HOSPITALIST SERVICE

\*Electrolytes to be assessed and appropriate correction administered as follows with every electrolyte panel\*
Not to be used for patients < 15 years old, anuric patients or patients on dialysis.
If calculated GFR is <= 20 ml/min, contact MD before using protocol.

Check applicable boxes:

Potassium

- 1. Use oral replacement if serum potassium is <= 3.5 but >= 3.0 and is able to take oral. Potassium Chloride tablets - 40 mEq PO daily prn
2. Use IV replacement if serum potassium is < 3.0 or patient is unable to take oral. Potassium Chloride 60 mEq in 250 ml of diluent, and give by infusion pump over >= 6 hrs. Do not exceed 10 mEq/hr. Add Lidocaine per pharmacy protocol prn injection site pain. If patient has central line, may dilute in 100 ml of diluent. Recheck serum potassium level in AM or \_\_\_\_\_.

Phosphorous

- 1. Use oral replacement if phosphorous level is <= 2.5 but >= 2.0 and is able to take oral. NeutraPhos - 2 packets PO daily prn
2. Use IV replacement if phosphorous level is < 2.0 or patient is unable to take oral. Give 20 mmol of phosphorous as the sodium salt in 100 ml of diluent over 2 hrs. Recheck serum phosphorous level in AM or \_\_\_\_\_.

Magnesium

- 1. Use oral replacement if magnesium level is <= 2.0 but >= 1.7 and is able to take oral. Magnesium oxide 400 mg PO BID. Do not give if magnesium is >2.0 or if <1.7, or if patient is NPO
2. Use IV replacement if magnesium levels are < 1.7 or patient is unable to take oral. Magnesium sulfate 2 grams in 100 ml of diluent IV over 1 hr. Recheck serum magnesium level in AM or \_\_\_\_\_.

EASTERN IDAHO REGIONAL MEDICAL CENTER
Electrolyte Replacement Protocol - EHS

Signature

Date

Time



Patient Identification