ADULT INTRAVENOUS FLUID PRESCRIPTION CHART

NHS		
WARD	HOSPITAL	
CONSULTANT		
DATE OF ADMISSION	WEIGHT	HEIGHT
DATE WRITTEN CHART ..... of	DATE REWRITTEN	

Write patient details or affix identification label

Hospital Number:
Name:
Address:

Date of Birth:
NHS Number:

Daily Assessment

1. Does the patient need IV fluids?
2. Check U &Es done in last 24 hours
3. Check fluid balance

Date:				
Na				
K				
Urea				
Creatinine				

Approximate daily healthy adult fluid and electrolyte requirements

Sodium: 50-100 mmol/day
Potassium: 40-80 mmol/day
Fluid requirement: 1.5-2.5 litres/day

Fluid prescription guidance
0.9% Saline: Na=154mmol/litre; 4% dextrose/0.18%saline: Na= 30mmol/litre
Hartmann's: Na= 131mmol/litre; K= 5mmol/litre.

- Hartmann's is a safe 1st choice in the initial 24 hours following surgery and for initial volume replacement (except in liver failure)
- Replace abnormal GI losses with additional premixed bags of 0.9% saline and KCL
- For maintenance and standard diabetic sliding scale fluid regimens: consider the use of premixed bags of 4% dextrose/0.18% saline and KCl according to daily assessment, at a maximum rate of 1 litre/12 hours (83mls/hour) in order to reduce the risk of hyponatraemia
- Never use 4% dextrose/0.18% saline for a fluid challenge/ resuscitation

						Commenced				
Date	**Fluid**	**Additives**	**Volume**	**Duration**	**Signature and bleep number**	**Date**	**Time**	**Batch Number**	**Signature 1**	**Signature 2**