

UWHC- PREVENTION OF CONTRAST INDUCED ACUTE KIDNEY INJURY ORDERS

Patient Weight: _____ Kg Allergies: _____

DAY BEFORE CONTRAST ADMINISTRATION

- Provider ordering test review current medications for nephrotoxicity- Hold the following medications the AM of contrast administration and resume normal medication schedule immediately following the procedure. _____
- Hold scheduled Metformin containing medications AM of procedure and for 48 hrs after procedure. Check creatinine before resuming on _____.
- OPTIONAL: Acetylcysteine 800 mg PO- TWO doses at 1600 and 2200 the day before the procedure. Dilute in 30 mL of cola to disguise the taste.

AM OF PROCEDURE

- Place 2 Peripheral Intravenous lines. One IV for bicarbonate infusion and Second IV run _____ fluid at _____ mL/hour **OR** cap IV line and flush per IV protocol.
- Order infusion from pharmacy. **D5W 1000 mL with sodium bicarbonate 200 mEq total volume 1250 mL, Pharmacist: USE CENTRICITY CODE "BICDEX+"**.
- Outpatients: Schedule patient to arrive at least **ONE** hour before the procedure to begin IV hydration.
- Inpatients: Infusion to be started ONE hour before scheduled test.

EXCEPTIONS:

- ** Patients going to Heart & Vascular Prep & Recovery Center, send infusion with patient to be started there.
 - ** For patients with history of CHF/ Fluid Volume Overload, infusion rate should be no greater than 1mL/kg/hr, with upper limit of 100 mL/hr. NO BOLUS should be administered.
 - ** **For any patient at risk for CHF/Fluid Volume Overload, Consult with the patient's Cardiologist or Nephrologists before ordering Bicarbonate infusion.**
 - Initiate infusion at: _____ mL/hr (3mL/kg/hr, max 330 mL/hr) for ONE HOUR.
 - Following bolus- reduce rate to _____ mL/hr. (1mL/kg/hr, max 110 mL/hr). Run at this rate for 6 hrs after first contrast injection administration. Initial injection given at _____.
 - After completion of bicarbonate infusion, discontinue IV fluids, cap peripheral line and flush per IV protocol.
 - OPTIONAL: Acetylcysteine 800 mg PO times 2 doses given 6 hrs apart. Dilute in 30 mL cola.
 - Arrange follow- up creatinine level 3 days post IV contrast administration.
- MD _____ Pager # _____ Verbal Order Taken By _____
 Date _____ Time _____ DATE & TIME _____