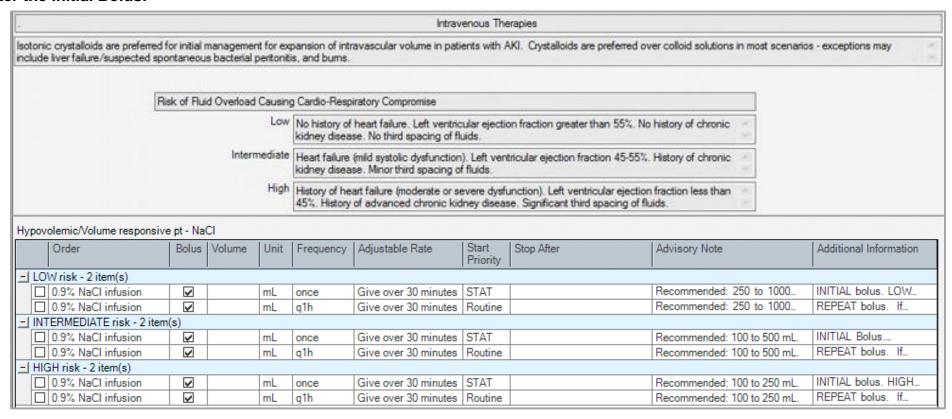
# **Acute Kidney Injury Order Set**



# Understanding intravenous fluid bolus orders and monitoring:

Intravenous fluid boluses may be ordered for AKI patients based on risk of volume overload.

The order will appear as an Initial Bolus +/- Repeat Bolus(es). The initial bolus volume should be given over 30 minutes. The Repeat Bolus is a <u>conditional order</u> that should be activated only if the safety parameters (defined below) have not been reached after the Initial Bolus.



It is important to monitor vital signs and output to avoid volume overload.

- Vital signs should be assessed for patients receiving IV boluses directly prior to the bolus infusion and 1 hour after <u>each</u> bolus.
- Output should be assessed for patients receiving IV boluses directly prior to the bolus infusion and 30 to 45 minutes after each bolus.

Physicians will specify safety parameters and may enter efficacy targets for patients.

- If <u>any</u> of the safety parameters are met in between or after the boluses, notify the attending physician and do not proceed with the next bolus.
- One or more efficacy targets may be entered by the physician. Notify the attending physician if <u>all</u> of the efficacy targets are met and do not proceed with next bolus.

		Order	Who	When	Frequency	Additional Information
■ Monitoring - 2 item(s)						
	$\overline{\mathbf{Z}}$	Vital Signs			q1h	Perform directly prior to bolus infusion
	✓	Monitor Output			q1h	Perform directly prior to bolus infusion
Safety Parameters - 2 item(s)						
	$\overline{\mathbf{Z}}$	Clinical Communication				Safety Parameters: Stop bolus infusion if
	$\overline{\mathbf{Z}}$	Notify	Attending Physician	Immediately - when Volume Administration Safety Concerns are		
	Efficac	y Targets - 2 item(s)				
		Clinical Communication				Efficacy Targets: Stop bolus infusion if
		Notify	Attending Physician	Immediately - when Volume Administration Efficacy Targets are		
Notify - 1 item(s)						
		Notify	Attending Physician	To re-assess patient if boluses are completed and efficacy targets		

#### Monitorina

Vital Signs - Pulse, Respirations, Oxygen Saturation, Blood Pressure, q1h, -- Perform directly prior to bolus infusion and 1 hour after completion of each bolus. Notify attending physician and do not proceed with next bolus if safety parameters have been reached or exceeded between bolus'.

Monitor Output - , Type of Output: Urine, q1h, -- Perform directly prior to bolus infusion and 30 to 45 minutes after completion of each bolus.

### **Safety Parameters**

Clinical Communication - Physician to Nurse, -- Safety Parameters: Stop bolus infusion if Volume Administration Safety Concerns are identified.

- Respiratory rate increases by 4 breaths/minute from baseline vital signs
- Heart rate increases by 10 beats/minute from baseline vital signs
- Oxygen requirement increase by 2 liters/minute from baseline vital signs

Notify - , Who: Attending Physician, When: Immediately - when Volume Administration Safety Concerns are identified.

#### **Efficacy Targets**

Clinical Communication - Physician to Nurse, -- Efficacy Targets: Stop bolus infusion if Volume Administration Efficacy Targets are met.

- Urine output greater than \_20\_ mL/hour
- Systolic blood pressure greater than \_90\_mmHg
- Heart rate less than \_100\_ beats/minute

Notify - , Who: Attending Physician, When: Immediately - when Volume Administration Efficacy Targets are met.

## HIGH risk

0.9% NaCl infusion - Bolus 250 mL IV once Give over 30 minutes

Access: Peripheral Line, --INITIAL bolus. HIGH risk of fluid overload. Stop bolus infusion if Volume Administration Safety Concerns are identified

0.9% NaCl infusion - Bolus 100 mL IV g1h Give over 30 minutes

Access: Peripheral Line, --REPEAT bolus. If safety parameters have not been reached or exceeded and until efficacy targets reached. HIGH risk of fluid overload,, Stop After 2 Times

? REPEAT bolus. If safety parameters

have not been reached or exceeded

and until efficacy targets reached.

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