

**McLaren Flint
HEMODIALYSIS ACUTE DIALYSIS ORDER SET**

Treatment Type:

- Hemodialysis Treatment Duration: _____ hours _____ L as tolerated
 Ultrafiltration Duration: _____ hours _____ L as tolerated Dry Wt: _____

Dialyzer:

- F160 BFR 500 mL/min BFR _____ mL/min
 F180 DFR 800 mL/min DFR _____ mL/min
 Other _____

Standard Dialysis Bath:

- 2 K⁺
2.5 Ca⁺
35 mEq Bicarb

Custom Dialysis Bath:

- _____ K⁺
_____ Ca⁺
_____ mEq Bicarb

Check labs, follow protocol:

- K⁺ less than 3.4..... use 4K⁺ bath, check Dr.
K⁺ 3.5 to 4.4 use 3K⁺ bath
K⁺ 4.5 to 5.5 use 2K⁺ bath
K⁺ 5.6 to 6.0 use 2K⁺ bath, check Dr.
K⁺ greater than 6..... check Dr.

Standard Dialysate Prescription:

- Na⁺ 140
Temp 36.5 °C
Crit-Line

Custom Dialysate Prescription:

- Na⁺ _____
 Cold Dialysate - 35.5 °C
 No Crit-Line

Ultrafiltration Profile:

- #1 #2
 #3 #4
 N/A

Sodium Program:

- Step
 Linear
 Exponential
 N/A

Heparin:

- No heparin, use 0.9% NS flushes, 100 ml every 30 minutes Heparin 1000 units/mL post dwell per Catheter lengths
 Low dose 1000 unit IVP, then 500 units per hour Sodium Citrate, post dwell per Catheter lengths
 Regular dose 2000 unit IVP, then 1000 units per hour Normal Saline, post dwell per Catheter lengths
 Tight dose 2000 unit IVP
 Other: _____

Medications:

- Darbeopetin Alfa (Aranesp) _____ mcg IVP during dialysis once per week, do NOT give if Hgb is greater than 10 g/dl
 Pericalcitol (Zemplar) _____ mcg IVP during dialysis
 Venofer _____ mg IVP during dialysis for _____ treatments
 Albumin _____ gm IVP or infusion during dialysis
 Ondansetron (Zofran) 4 mg IVP during dialysis for nausea/vomiting x 1 dose
 Diphenhydramine (Benadryl) 25 mg IVP during dialysis, other dose: _____ PRN
 Nitroglycerin 0.4 mg SL every 5 minutes x 3 for chest pain, if BP greater than 110/70
 Alteplase 2 mg per lumen (instilled for at least 30 minutes) for dialysis catheters with inadequate blood flow rate of 200mL/minute or less

Labs:

- Initial labs on all new patients (CPOE Dialysis Labs Initial): Albumin, BMP, CBCD, Ferritin, Hgb A1C Direct, Ionized Calcium, Iron, Iron Sat, Magnesium, Phosphorus, PTH intact, Hepatitis A IgM, Hepatitis B Surface Antigen, Hepatitis C
 Hepatitis Labs (Hepatitis A IgM, Hepatitis B Surface Antigen, Hepatitis C)
 BMP CBC Phosphorus Albumin PTH Intact Blood Cultures
 Other labs: _____

Other orders:

Physician Signature

Date (required)

Time (required)

Verbal/Telephone Orders by Nephrologist/RN

Date/Time

For TX Date



PT.

MR./P.M.

DR.