

UNIVERSITY OF MICHIGAN HOSPITALS & HEALTH CENTERS
DEPARTMENT OF PHARMACY SERVICES

ADULT CONTINUOUS RENAL REPLACEMENT THERAPY (CRRT) Orders

DATE: _____

TYPE OF TREATMENT: CVVHD

Blood Flow Rate (BFR) = 200 mL/min (specify if different than 200 mL/min _____)
 Note: in severe liver disease, lower BFR (\leq 150 mL/min) is advised to prevent high total calcium levels.

Dialysate Flow Rate (DFR) = 2 L/hr (specify if different than 2 L/hr _____)
 Note: in severe liver disease or catabolism, higher DFR (3 or 4 L/hr) is advised.

Initial Fluid Balance = _____ mL/hr
 Note: net hourly fluid loss for patient

CITRATE ANTICOAGULATION (SEE CITRATE PROTOCOL)	RATE
ACD-A CITRATE SOLUTION	Per protocol
CALCIUM CHLORIDE 20 MG/ML in 0.9% NACL	Per protocol
TITRATE BOTH INFUSIONS PER PROTOCOL	

STANDARD CRRT DIALYSATE Duosol 4553, B. Braun	CONCENTRATIONS	CONTENTS
Sodium Total	136 mEq/L	Na = 136 mEq/L
Potassium	2 mEq/L	K = 2 mEq/L
Magnesium	1.5 mEq/L	Mg = 1.8 mg/dL
Chloride	115 mEq/L	Cl = 115 mEq/L
Bicarbonate	25 mEq/L	HCO ₃ = 25 mEq/L
Sterile Water	qs ad 5000 mL	
FINAL VOLUME	5000 mL	
<input type="checkbox"/> Sodium phosphate	<input type="checkbox"/> 0.75 mmol/L	Phosphate = 2.35 mg/dL
	<input type="checkbox"/> 1.5 mmol/L	Phosphate = 4.7 mg/dL
<input type="checkbox"/> Additional Potassium (K⁺) to above amount	<input type="checkbox"/> 1 mEq/L (3 mEq/L total)	3 mEq/L
	<input type="checkbox"/> 2 mEq/L (4 mEq/L total)	4 mEq/L

- Systemic ionized Ca⁺⁺ target:** _____ to _____ mM.
 CaCl₂ infusion per protocol using this max & min range; **default range is 1 – 1.2 mM.**
- ECMO Patient:** NaHCO₃ 150mEq per 1000mL D5W, initial rate 60mL/hr for each 1000 mL per hr of UF, titrate subsequent rate on the basis of ECMO HCO₃ parameters.
******* Renal consult will be obtained at initiation of CRRT *******

Verbal <input type="checkbox"/>	Print name/title of person giving order	Signature/ title of person taking order	Date	Time
Telephone <input type="checkbox"/>				
Physician Signature		Dr. #	Date	Time