|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Tufts Medicine Care at Home** | | | | |
| **IV Medication Clinical Fact Sheet** | | | | |
| IV Medication: | Hydration, PPN, TPN / Magnesium | | Risk Level: | n/a |
| Med Class: | Hydration/ Nutrition | |  |  |
|  |  | Common Uses: | Short term hydration |  |
|  |  | Labs to Monitor: | CMP |  |
|  |  | Instructions/Precautions: | Flushing, sweating, hypotension, tetany | |
| **\*\*Notes for all TPN Products: TPN patients need a double lumen for labs. If no double lumen available, draw peripheral labs; TPN patients must be on a stable cycle for 24 hours before discharge home; Diabetic patients must be on stable cycle for 48 hours before discharge home** | | | | |
|  |  | First Dose Allowed: | Y |  |
|  |  | Central Line Only: | N |  |
|  |  | IV Push: | N |  |
|  |  | Vesicant: | N |  |
|  |  | See Procedure Manual: | n/a |  |
| Notes: | Only drugs listed as First Dose Allowed may be given in the home as a first dose and are | | |  |
| considered for a first dose on a case by case basis by the Manager | | | | |
| The IV Manager and/or Clinical Director must be consulted before a first dose referral is accepted | | | | |
| Risk Levels: | n/a = | Routinely given; Clinician must be approved to administer IV medications | |  |
|  | 1= | Mgr or Clinical Director approval before referral is accepted | |  |
|  | 2= | Mgr notification; Clinicians must review Special Instructions | |  |