



Fax: \_\_\_\_\_ Phone: \_\_\_\_\_

Name _____
DOB _____
ID# _____
Weight _____ Date _____

## Rehydration in Sterile Water plus Amino Acids

Diagnosis: (ICD-10 code) \_\_\_\_\_ - Description \_\_\_\_\_

### For Provider

(Circle all that apply)

- Request macronutrients lab test
- Request CBC
- Request BMP
- Request G6pd deficiency (Required for any infusion involving vitamin C)

### Infusion Medication

- Sterile Water 500ml
- Vitamin C 5ml (2.5 grams)
- Calcium Chloride 6ml (8.16 mEq)
- Magnesium Chloride 10ml (19.7mEq)
- Potassium Chloride 4ml (8 mEq)
- 8.4% Sodium Bicarbonate 15ml
- B6 1ml (100mg)
- B complex 3ml (300mg)
- B5 2ml (500mg)
- L methylfolate (5MTHF) 0.5ml (2.5mg)
- Methyl-B12 2ml (10mg)
- Aminosyn 8.5% 50ml

**Infuse at 4ml/min**

**Osmolarity: 285mosm/L**

\_\_\_\_\_ Initial if Provider Approves the Mixture

### Pre-Meds

If no pre medications needed please leave blank

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

### Additional Orders

Provider Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_