

## **CRRT Magnesium – Protocol**

## **Medical Advisory Committee Approved: 25JUN2019**

□ Harmonized

A printed copy of this document may not reflect the current, electronic version on Lakeridge Health's Intranet, 'The Wave.' Any copies of this document appearing in paper form should ALWAYS be checked against the electronic version prior to use.

#### Authorized to

 Critical Care Nurses trained in Continuous Renal Replacement Therapy (CRRT) at Lakeridge Health

## **Patient Population Description**

 Critical care patients receiving CRRT using CRRT Using Low Concentration 18/0 Citrate Solution and The Prismaflex System Order Set.

## **Contraindications to Implementing the Protocol**

- Patients less than 16 years of age
- Patient unwilling or unable to provide a blood sample for bedside or laboratory testing
- Refusal of patient/family consent for treatment; notify Most Responsible Practitioner (MRP) immediately

# **Protocol Description**

Upon receipt of an order for CRRT Intravenous Magnesium Protocol the authorized implementer will follow the nomogram in Table 1:

#### Table 1

Magnesium Level (mmol/L)	IV Magnesium Dose (peripheral or central)	Repeat Magnesium Level and follow this nomogram
0.65 - 0.74	2 g/50 mL over 1 hour	With usual CRRT lab work
0.55 – 0.64	4 g (2 g/50 mL over 1 hour q1h X 2)	4 hours after magnesium infusion completed
Less than 0.55	6 g (2 g/50 mL over 1 hour q1h X 3) and call nephrologist	2 hours after magnesium infusion completed

## **Review/Evaluation Process**

Every 2 years

Lakeridge Health Page 1 of 2

# Lakeridge Health

# **CRRT Magnesium – Protocol**

# **Medical Advisory Committee Approved: 25JUN2019**

### **Related Documents**

- CRRT Low Concentration 18/0 Citrate Solution Infusion Protocol
- CRRT Calcium Chloride Solution Infusion Protocol
- CRRT Using Low Concentration 18/0 Citrate Solution and The Prismaflex System Order Set

Lakeridge Health Page 2 of 2