

## The right fluid for the right patient at the right time

### **Pocket-sized support:**

A summary of  
'Intravenous fluid therapy  
in adults in hospital',  
NICE clinical guideline 174

## Patient evaluation should incorporate IV fluid assessment

### **When prescribing IV fluids, be sure to remember the 5 R's:**

- Resuscitation
- Routine maintenance
- Replacement
- Redistribution
- Reassessment

### **When prescribing IV fluid therapy use the following protocol:\***

- Assess your patients' fluid and electrolyte needs
- Does your patient require fluids for fluid resuscitation?
- Does your patient need fluids for routine maintenance?
- Does your patient need IV fluids to address existing deficits or excesses, ongoing abnormal losses or abnormal fluid distribution?

### **After initial assessment, don't forget to make a fluid plan:**

- What is the fluid and electrolyte prescription over the next **24 hours**?
- What is the assessment and monitoring plan?
- Review IV management plan daily  
(less frequently for patients requiring longer-term IV fluid therapy and are stable)

### **Normal requirements for routine maintenance alone:†**

- 25–30 mL/kg/d water
- 1 mmol/kg/d sodium, potassium‡, chloride
- 50–100 g/d glucose

†This quantity will not address patients' nutritional needs.

‡Weight-based potassium prescriptions should be rounded to the nearest common fluids available. Potassium should not be added to intravenous fluid bags.

## Assessment

Use ABCDE – is patient hypovolaemic and needs fluid resuscitation?

yes

no

Assess fluid/electrolyte needs.  
Can patient meet needs orally or enterally?

yes

**Ensure nutrition/  
fluids needs are  
met**

no

Complex fluid or electrolyte  
replacement or abnormal  
distribution issues?

yes

no

## Fluid Resuscitation

Initiate treatment

Reassess. Do they still need fluid resuscitation?

no

yes

Signs of shock?

yes

**Seek expert help**

>2000 mL given?

yes

no

**Give further fluid bolus**

## Routine Maintenance

Give maintenance IV fluids  
as per normal requirements

**Reassess and monitor the patient  
Stop IV fluids when no longer needed**

## Replacement and Redistribution

Estimate deficits  
or excesses

Ongoing abnormal  
or electrolyte  
losses?

Redistribution  
and other  
complex issues?

Prescribe by adding to or subtracting from routine maintenance  
Adjust for other sources of fluid/electrolytes

**Monitor and reassess fluid and biochemical status**

[Please note that these guidelines are abridged – for full recommendations please see NICE guideline CG174]

**For more information contact  
your local Baxter representative.**

Content adapted from: 'Intravenous fluid therapy in adults  
in hospital', NICE clinical guideline 174 (December 2013.  
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