



COHESIVE HEALTHCARE MANAGEMENT & CONSULTING

Mangum Regional Medical Center

TITLE		POLICY	
Total Parenteral Nutrition Management		DRP-012	
MANUAL	EFFECTIVE DATE	REVIEW DATE	
Drug Room	10-1-2020	10-1-2020	
DEPARTMENT	REFERENCE		
Drug Room			

SCOPE

This policy applies to adult patients that require total parenteral nutrition (TPN) therapy at Mangum Regional Medical Center.

PURPOSE

Mangum Regional Medical Center is dedicated to ensuring the safe administration of TPN. TPN is considered a High Alert/High Risk medication.

DEFINITIONS

High Alert/High Risk Medications: medications known to be error-prone or which pose a significant hazard to the patient if not properly handled, and are designated as High Alert/High Risk medications by the Pharmacy and Therapeutics Committee.

PROCEDURE

Diet:

- NPO
- NPO except Ice Chips
- Other _____

Labs:

- Accucheck every 6 hours
- Accuchecks AC&HS
- Accuchecks As Needed
- CBC with Differential every 7 days
- Comprehensive Metabolic Profile every 7 days

- Lipid Panel every 7 days (if Lipids ordered as well)
- Pre-albumin every 7 days
- Renal Panel every 7 days
- Magnesium level every 7 days
- Phosphorus level every 7 days
- Triglycerides level every 7 days
- Other_____

Clinimix® Formulas:

- Clinimix® 4.25/10 1000mL/run at ____ mL/hr (use a 0.22 micron filter)
- Clinimix® E 4.25/10 1000mL run at ____ mL/hr (use a 0.22 micron filter)
- Clinimix® 5/15 1000mL/run at ____ mL/hr (use a 0.22 micron filter)
- Clinimix® E 5/15 1000mL run at ____ mL/hr (use a 0.22 micron filter)

Additional IV Supplementation:

- Fat Emulsion 20% 250mL run at 10 mL/hr on Tuesdays and Thursdays
- Multi-trace 5 Concentrate (MT5) three times a week (Mondays, Wednesdays, and Fridays).
Dilute 1mL of MT5 in at least NS 100mL and infuse over 4 hours.
- Infuvite Adult Multi Vitamin three times a week (Mondays, Wednesdays, and Fridays). Dilute 10mL in at least NS 500mL and infuse over 4 hours.

Maintenance IV Fluids:

- Dextrose 10% to run at ____ ml/hr (use D10W for any interruptions in TPN)
- Dextrose 5% to run at ____ ml/hr
- Dextrose 5% - Sodium Chloride 0.45% to run at ____ ml/hr
- Sodium Chloride 0.9% IV to run at ____ mL/hr

For any interruptions in the administration of TPN:

- Infuse D10W at same rate as TPN
- Recheck blood sugar prior to re-starting TPN
- Hold insulin dose(s) prior to any planned interruption in TPN

Treatment of Hypoglycemia:

- Follow hospital approved Hypoglycemia protocol

Electrolyte Supplementation:

- Magnesium Supplementation
 - Magnesium sulfate 1gm IVPB x 1 dose
 - Magnesium sulfate 2gm IVPB x 1 dose

- Phosphate Supplementation
 - Potassium phosphate 10mmol IV (Dilute in NS 250mL and infuse over 6 hours) x 1
 - Potassium phosphate 20mmol IV (Dilute in NS 250mL and infuse over 6 hours) x 1

- Potassium Supplementation
 - Potassium chloride 10mEq IV (Infuse no faster than 10mEq per hour) x 1
 - Potassium chloride 20mEq IV (Infuse no faster than 10mEq per hour) x 1

Stress Ulcer Prophylaxis:

- Carafate 1gm solution per Tube every 6 hours
- Famotidine 20mg IV daily
- Famotidine 20mg IV per Tube BID
- Protonix 40mg IV Push daily

REFERENCES

<https://onlinelibrary.wiley.com/doi/10.1002/jpen.1669>

<https://www.baxtermedicationdeliveryproducts.com/nutrition/clinimix.html>

ATTACHMENTS

None.

REVISIONS/UPDATES

Date	Brief Description of Revision/Change