## ADDING POTASSIUM TO CRRT SOLUTIONS

Pharmacy will provide KCl 40 mmol/100 ml (0.4 mmol/ml) mini-bags with a coupler inserted under a sterile hood. These will be kept ward stock in all 3 fridges. If you are using a lot of potassium, please call pharmacy to increase supply.

The bags are sterile for 9 days in the fridge. Once accessed to add potassium to the CRRT solution bags, dispose of any remaining potassium solution (you can mix multiple bags during the initial access, but you will need a new bag for the next time you mix solutions. Have a second nurse perform an independent double check of the calculation and volume.

Monitor glucose/insulin infusions closely when switching between Prismasol 0 or PrismaCAL (each have zero K and zero potassium at baseline) and Prismasol 4 (has 4 mmol/L potassium and 6.1 mmol/L of glucose).

BASELINE PRODUCT: PRISMASOL 0 OR PRISMACAL 0 (contains 0 mmol/L of potassium AND 0 glucose)		
Final KCI Concentration	Amount of Potassium to add to PrismaSol 0	mL from a 40 mmol/100 ml bag of KCl (0.4 mmol/ml solution)
2 mmol/L	2 mmol X 5 L bag = 10 mmol	25 ml
3 mmol/L	3 mmol X 5 L bag = 15 mmol	37.5 ml
4 mmol/L	4 mmol x 5 L bag = 20 mmol	50 ml
5 mmol/L	5 mmol x 5 L bag = 25 mmol	62.5 ml
6 mmol/L	6 mmol x 5 L bag = 30 mmol	75 ml
BASELINE PRODUCT: PRISMASOL 4 (contains 4 mmol/L of potassium and 6.2 mmol/L glucose)		
Final KCI Concentration	Amount of Potassium to add to	mL from a 40 mmol/100 ml bag
	PrismaSol 4	of KCI (0.4 mmol/ml solution)
5 mmol/L	1 mmol x 5 L bag = 5 mmol	12.5 ml
6 mmol/L	2 mmol x 5 L bag = 10 mmol	25 ml

