SODIUM BICARBONATE

ACTION: Alkalinizing Agent

- Acts as a buffering agent when administered to neutralize hydrogen ions resulting in carbon dioxide as a byproduct.
- Alkalinization of blood results in shifting of potassium into the intracellular space, lowering serum potassium levels.

INDICATIONS:

- Known or suspected hyperkalemia
- Cardiac arrests associated with tricyclic antidepressants or hyperkalemia**.**
- Crush syndrome

CONTRAINDICATIONS:

- None

POTENTIAL SIDE EFFECTS:

- Hypotension
- Headache and flushing
- Syncope
- Fluid overload
- Tachycardia
- Alkalosis

ADULT DOSE/ROUTE:

⇨ **Suspected Hyperkalemia:**50mEq IV/IO one time dose

⇨ **QRS widening (QRS>100) from Tricyclic Antidepressant Overdose**: 50mEq IV/IO. Repeat q5 min until ECG changes improve (QRS<100) and/or to a total of 150 mEq.

⇨ **Crush Syndrome**:1mEq/kg (max 50mEq) push immediately prior to extrication.

PEDIATRIC DOSE/ROUTE:

⇨ **Suspected Hyperkalemia:** 1mEq/kg (max 50mEq) IV/IO one time dose. If <2 years dilute 1:1 with sterile water.

⇨ **QRS widening from Tricyclic Antidepressant**: 1mEq/kg IV/IO, (max of 50mEq per dose). Repeat q5 min until ECG changes improve (QRS<100) and/or to a total of 150 mEq. If <2 years, dilute 1:1 with sterile water.

⇨ **Crush Syndrome**: 1mEq/kg (max 50mEq) push immediately prior to extrication. If <2 years, dilute 1:1 with sterile water.

NOTES: Thorough 20 cc IV/IO flush before administration of other medications to avoid precipitation.