

IV Fluid Bag Shortage: Rounding Checklist



Prescribers should conduct joint rounds with nurses and pharmacists to review all IV fluid and IV medication orders for every patient every shift.

- Review all orders for IV PRN medications (it may be part of a default order set). When appropriate:
 - Discontinue not acted upon active IV PRN medications (i.e. discontinue the 2 other PRN pressor orders if only one pressor is being used).
 - Providers should select only one prn order per IV medication class (i.e. pressors) when ordering from order sets.
- Switch from IV fluid to oral rehydration when appropriate using water, Gatorade, or Pedialyte
- Only bring IV fluid bags into patient rooms that are needed for immediate care. Do not store extra bags of IV fluids in patient rooms.
- Use oral preparations for all possible medications, particularly electrolyte repletion and antibiotics. Use MGB Provider Information Sheet: Oral Hydration Solutions as a guideline. If needed, consult with pharmacist for appropriate oral electrolyte repletion options.
- Order IM (intramuscular) routes of administration for medications when available (i.e. promethazine IM)
- Discontinue KVO orders, be aware some order sets may include this by default as a PRN order.
 - Providers, review order sets to ensure IV fluids or medications aren't automatically ordered if not needed
- Use syringe pumps, if available, whenever possible for pressors and other critical care medications.
- Do not pre-spike any IV Fluid Bag until it is needed (i.e. do not hang a bag in preparation for an intubation).



Pay close attention to order sets – many have defaults for KVO orders or multiple medications that may not be needed at this time

