Update date: February 1, 2024

Group No. 21: Electrolyte Solutions and Plasma Substitutes

INJECTABLE WATER Clue Description Diluent Route of administration and dosage Intravenous and intramuscular. INJECTABLE SOLUTION Indications medicines. When it is required Each vial contains: to lower the tonicity of Adults and children: solutions to be used. Injectable water 5 mL After adding the appropriate solutes 010.000.3673.00 Container with 100 vials with 5 mL. to make it isotonic. INJECTABLE SOLUTION Each vial contains: Injectable water 10 mL 010.000.3674.00 Container with 100 vials with 10 mL.

Generalities

Adverse effects

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Transparent, odorless liquid, free of microbial agents and pyrogens.

Hemolysis.

	Contraindications and Precautions	
Contraindications: Direct intravenous administration produces hemolysis.		
	Interactions	
None of clinical importance.		

Risk in Pregnancy

SODIUM CHLORIDE

Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION AT 0.9%	Hypotonic administration (with real hyponatremia).	Intravenous.
	Each 100 mL contains: Sodium		Adults and children:
	chloride 0.9 g Water for injection	Maintenance of	
	100 mL	electrolyte balance.	To recover or maintain hydroelectrolyte balance,
			depending on age, body weight and
010.000.3608.00	Container with 250 mL.	Hypochloremic alkalosis.	cardiovascular or renal condition.
	Contains:		
	Sodium 38.5 mEq	To solubilize and apply	
		medications for	
	0.9% INJECTABLE SOLUTION	Venociyaia.	
	Each 100 mL contains: Sodium		
	chloride 0.9 g Water for		
	injection 100 mL		
010.000.3609.00	Container with 500 mL.		
	Contains:		
	Sodium 77 mEq		
	Chioride // mEq		

Generalities

Sodium is the most important cation of the intracellular fluid, in combination with chlorine it maintains the osmotic pressure, the acid-base balance, and the water balance.

Risk in Pregnancy		то
<i>a</i> .	(**	
	Adverse	effects

Administered in appropriate quantities it does not produce adverse reactions. If applied in doses above what is required, edema, hyperosmolarity and hyperchloremic acidosis occur.

Contraindications and Precautions

Contraindications: Hypernatremia or fluid retention, renal failure, intracranial hypertension, cardiopulmonary disease.

Precautions: Preeclampsia and eclampsia.

None of clinical importance.

Interactions

SODIUM CHLORIDE AND GLUCOSE

Ciue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	State changes	Intravenous.
		hydroelectrolyte and	
	Each 100 mL contains:	satisfaction of	Adults and children:
	Sodium chloride 0.9 g	caloric needs.	
	Anhydrous glucose or glucose 5.0 g		According to the patient's needs, age, body
	-		weight, cardiovascular and renal conditions.
	Glucose monohydrate equivalent to 5.0 g of		
	glucose.		
010 000 3611 00	Container with 250 mL		
010.000.0011.00			
	Contains:		
	Sodium 38.5 mEq		
	Chloride 38.5 mEq		
	Glucose 12.5 g		
	INJECTABLE SOLUTION		
	Fach 100 ml container		
	Each 100 mL contains:		
	Annyarous glucose of glucose 5.0 g of		
	Glucose monohydrate equivalent to 5.0 g of		
	alucose.		
010.000.3612.00	Container with 500 mL.		
	Contains:		
	Oblasida 77 mEq		
	Chioride // mEq		
	Giucose 20 g		
i	I	l	ļ
		Generalities	7

Sterile solution containing sodium chloride and glucose. The daily requirements for sodium and chlorine are respectively 80 and 100 mEq. Parenteral administration should not exceed this amount. One gram. NaCl provides 17.1 mEq of both ions; while each gram of glucose is a source of 4 calories and helps reduce excessive nitrogen loss and the production of ketone bodies.

Risk in Pregnancy TO

Adverse effects

Hyperosmolarity, hyperchloremic acidosis. Local injuries due to poor administration, hypernatremia, edema.

Contraindications and Precautions

Contraindications: DM2 and decompensated DM1, hyperglycemic coma, overhydration, hyperosmolarity and hyperchloremic acidosis.

Precautions: Heart or kidney disease and edema with sodium retention.

None of importance.

Interactions

	Clue	Description	Indications	Route of administration and dosage
Γ		POWDER (Osmolarity Formula	Oral rehydration in cases of	Oral.
		Low)	diarrhea and dehydration	
L			with:	Adults and children:
L		Each sachet with powder contains:		
L		Anhydrous glucose or glucose 13.5 g	Hyponatremia.	
L		Potassium chloride 1.5 g		

	Sodium chloride 2.6 g Trisodium citrate dihydrate 2.9 g	Hypochloremia.	According to the patient's needs, body weight, age and dehydration condition.
010.000.3622.00	Container with 20.5 g.	Typokalomia.	
	SOLUTION		Dilute the contents of the sachet in a liter of cold,
	Each sachet with powder contains: Glucose 20.0 g Potassium chloride 1.5 g Sodium chloride 3.5 g Trisodium citrate dihydrate 2.9 g		boiled water. When preparing the dilution, add the powder to the water, not the water to the powder.
010.000.3623.00	Container with 27.9 g		
		Generalities]

Excessive losses of water and electrolytes (vomiting, diarrhea, fever, etc.) produce isotonic dehydration; Early oral rehydration is very effective in reducing morbidity and mortality from these conditions. Low osmolarity solutions improve net water absorption in the body and restore electrolyte balance in the body.

Risk in Pregnancy

Adverse effects

Nausea and vomiting, electrolyte imbalance, hypernatremia and hyperkalemia with normal osmolarity formula. Hyponatremia in patients with cholera administered the low-osmolarity formula.

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Contraindications and Precautions

Contraindications: Severe dehydration as basic therapy. Precautions: Intestinal obstruction of any etiology and in the presence of uncontrollable vomiting, paralytic ileus, perforation and intestinal obstruction. In patients with cholera, the low osmolarity formula is recommended

None of clinical importance.

GLUCOSE

Clue	Description	Indications	Route of administration and dosage
	5% INJECTABLE SOLUTION	Caloric intake.	Intravenous.
	Each 100 mL contains:	Hypertonic	Adults and children:
	Anhydrous glucose or glucose 5 g	dehydration.	According to the potient's deily energy
	Glucose monobydrate equivalent to 5.0 g of	Water deficiency	requirements body weight age cardiovascular and
	glucose.		renal condition and degree of dehydration.
		Energy supplement.	
010.000.3601.00	Container with 250 mL.		
	Contains: Glucose 12.5 g	Hypoglycemia induced by	
	5% INJECTABLE SOLUTION	insulin or oral	
	Each 100 mL contains:	nypoglycemic agents.	
	Anhydrous glucose or lucose 5 g		
	-		
	Glucose monohydrate equivalent to 5.0 g of		
	glucose.		
010.000.3630.00	Container with 500 mL.		
	Contains: Glucose 25.0 g	4	
	5% INJECTABLE SOLUTION		
	Each 100 mL contains:		
	Anhydrous glucose or glucose 5 g		
	Glucose monohydrate equivalent to 5.0 g of		
	glucose.		
010.000.3603.00	Container with 1,000 mL.		
	Contains: Glucose 50.0 g		
	50% INJECTABLE SOLUTION		
	Each 100 mL contains:		
	Anhydrous glucose or glucose 50 g		
	Glucose monohydrate equivalent to 50.0 g		
	or giucose.	1	I

010.000.3607.00 Container with 50 mL. Contains: Glucose 25.0 g				
Glucose is the main source of energy in 5%) are a source of calories; They cover	Generalities Ving organisms. Injectable solutions with this nutrient (glucose water needs and are useful in rehydrating the body.			
Risk in Pre	gnancy TO			
Adverse effects Uncommon: local venous irritation, hyperglycemia and glycosuria.				
Contraindications and Precautions Contraindications: 50% solution in osmotic diuresis, intracaneal or intraspinal hemorrhage, delirium tremens.				

Precautions: restrict its use in edema with or without hyponatremia, heart or kidney failure, hyperglycemia, diabetic coma.

Interactions

Hyperglycemia is favored with medications such as corticosteroids, thiazide diuretics, and furosemide.

HARTMANN SOLUTION

Clue	Description		Indications	Route of administration and dosage
	INJECTABLE SOLUTION		Isotonic dehydration and moderate	Intravenous.
			acidosis due to: Vomiting.	
	Each 100 mL contains:		g.	Adults and children:
	Sodium chloride	0.600g	Diarrhea.	
	Potassium chloride	0.030g	Fistulas.	According to the patient's needs, age, body weight, kidney
	Calcium chloride	0	Exudates.	and cardiovascular conditions and functioning.
	dihydrate	0.020g	Trauma.	-
	sodium lactate	0.310g	Burns.	
			State of shock.	
010.000.3614.00	Container with 250 mL.		Surgery.	
	Milliequivalents per liter:		Maintenance of hydroelectrolyte	
	Sodium	130	balance.	
	Potassium	4		
	Calcium	2.72-3		
		109		
	Lactate	28		
	IN JECTABLE SOLUTION			
	Each 100 mL contains:			
	Sodium chloride	0.600g		
	Potassium chloride	0.030g		
	Calcium chloride	0.000g		
	dihydrate	0.020g		
	sodium lactate	0.310g		
		0		
010.000.3615.00	Container with 500 mL.			
	Milliequivalents per liter:			
	Sodium	130		
	Potassium	4		
	Calcium	2.723		
	Chloride	109		
		20		
	INJECTABLE SOLUTION			
	Each 100 mL contains:			
	Sodium chloride	0.000~		
	Botassium chlorido	0.000g		
	Calcium chloride	0.030g		
	dihydrate	0.020a		
	sodium lactate	0.310g		
		5.6109		
010.000.3616.00	Container with 1000 mL.			
	Milliequivalents per liter:			
	Sodium	130		
	Potassium	4		
	Calcium	2.72-3		

I		Chloride Lactate	109 28		
	Sterile liquid also used when there i	known as lactated ringe is loss of water and base	r's solution. Its es, as well as t	Generalities pH is 6 to 7.5 and it contains o maintain hydroelectrolyte b] s essential electrolytes in the body. It is palance.
		Risk in Pre	egnancy	то	
			A	dverse effects	Т
1	ts excess produce do not occur.	es pulmonary edema in	patients with c	ardiovascular and kidney dis	eases. In adequate doses these effects
			Contraindic	cations and Precautions	1
	Contraindications: Precautions: pulm and lactation.	severe alkalosis and hy nonary edema, cardiopul	percalcemia. monary and ki	dney diseases, high blood pi	 ressure, heart failure, toxemia of pregnancy
				Interactions]
IN	None of clinical im	WATER			
L	Clue	Description	า	Indications	Route of administration and dosage
	010.000.3675.00	INJECTABLE SOLUTION Each container contains: Injectable water 500 mL Container with 500 mL.		Diluent medicines. When it is required to lower the tonicity of solutions by be used. To carry out irrigation	Intravenous. Adult: After adding the solutes, it is convenient to make it isotonic.
				processes (cleaning and surgical dressings, etc.).	
				Generalities]
	Transparent, odor	less liquid, free of micro	bial agents and	d pyrogens.	
		Risk in Pr	regnancy	TO TO	-
I	Hemolysis.				
			Contraindic	cations and Precautions]
0	Contraindications:	Direct intravenous adm	inistration proc	luces hemolysis.	7
	None of clinical im	nportance.			1
S7	TARCH			1	, ,

Ciue	Description	Indications	Route of administration and dosage
	10% INJECTABLE SOLUTION. Each 100 mL contains: Poly (o-2 hydroxyethyl) starch or pentalstarch or hydroxyethyl starch (200/0.5) 10 g	Prophylaxis and therapy of hypovolemic states.	Intravenous. Adult: 20 mg/kg body weight/hour.
010.000.3663.00	Container with 250 mL.		
010.000.3663.01	Container with 500 mL.		
	6% SOLUTION FOR INJECTION		Intravenous infusion.
	Each 100 mL contains:		Adult:
	Poly(o-2 hydroxyethyl)-starch (130,000 daltons) — hydroxyethyl starch (130/0.4) 6 g		10-50 mL/kg/hour.
010.000.3666.00	Container with 250 mL.		

010.000.3666.01 Container with 500 mL.		
	Generalities	
Synthetic colloid from a waxy starch, con	sisting entirely of amylopectin. Increases	plasma volume up to 100% of the infused
volume. It can improve hemormeological	contaitions.	
Risk in Pre	egnancy c	
		-
	Adverse effects	
Anaphylactic reactions, prolonged bleedin	ng due to the dilution effect, and a tempo	rary increase in serum amylase values
may occur without being associated with	pancreatitis.	
	Contraindigations and Dressutions	7
	Contraindications and Precautions	
Contraindications: Hypersensitivity to the	drug, chronic heart and kidney failure, c	pagulation disorders, cerebral hemorrhage,
intracellular dehydration and overhydratic	on.	-
	Interactions	7
None of clinical importance.		_

SODIUM BICARBONATE

Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION AT 7.5%	Metabolic acidosis.	Intravenous.
	Each vial contains: Baking soda 0.75 g	Assist in cardiac arrest.	Adults and children over 2 years:
	-		The dose depends on the values
010.000.3619.00	Container with 50 10 mL vials. Each vial with 10 mL contains: Sodium bicarbonate 8.9 mEq	Alkalinization of local anesthetics.	blood levels of CO2, pH and patient conditions.
			Cardiac arrest: 1 mEq/kg body weight, if the
	7.5% INJECTABLE SOLUTION		arrest continues, 0.5 mEq/kg body weight every 10 min.
	Each vial contains: Baking soda 3.75 g		
010.000.3618.00	Container with 50 mL vial. The 50 mL container contains: Sodium bicarbonate 44.5 mEq.		

Generalities

The solution in an aqueous medium dissociates into sodium and bicarbonate ions. Bicarbonate is a normal ion in the body that accepts protons. Its deficiency produces metabolic acidosis (decrease in blood pH, due to an increase in the concentration of hydrogen ions).

Risk in Pregnancy	b

Adverse effects

Excessive doses or rapid administration cause dry mouth, thirst, tiredness, muscle pain, irregular pulse, restlessness, bloating, irritability.

Contraindications and Precautions

Contraindications: Do not mix with calcium salts, hypocalcemia. Precautions: Monitor pH and CO2 values, total CO2 may be low in respiratory alkalosis, administration of bicarbonate or acetate worsens alkalosis, anuria, oliguria, hypertension, edema, intracranial hemorrhage in neonates and infants due to rapid application.

Interactions

Do not mix with calcium salts for administration. Prolongs the duration of effects of quinidine, amphetamines, ephedrine and pseudoephedrine. Increases renal elimination of tetracyclines, especially doxycycline.

POTASSIUM CHLORIDE

Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Arrhythmias due to ectopic focus of digitalis poisoning.	Intravenous.
	Each vial contains:	. . .	Adults:

010.000.0524.00	Potassium chloride 1.49 g (20 mEq potassium, 20 mEq chlorine). Container with 50 vials with 10 mL.	Hypokalemia.	20 mEq/hour of a concentration of 40 mEq/liter. Maximum dose: 150 mEq/day. Children: 3 mEq/kg body weight.		
		Generalities	1		
Essential electrol corticosteroids.	yte for cardiac and cellular function. Re	duces the risk of hypokalemi	a in patients receiving diuretics and		
	Risk in Pregnancy	то			
	Α	dverse effects	1		
Paresthesias, me	ntal confusion, cardiac arrhythmias, hy	potension, flaccid paralysis a	nd abdominal pain.		
Contraindications and Precautions Contraindications: Renal failure, Adison's disease, acute dehydration, Hyperkalemia, hypocalcemia, heart disease.					
Hyperkalemia is f	avored with potassium-sparing diuretic	Interactions s.]		

SODIUM CHLORIDE

Clue	Description		Indications	Route of administration and dosage
	INJECTABLE SOLUTION 0.9%		Dissolution and reconstitution	Intravenous.
	Each 10 mL vial contains: Sodium chlor	oride	of medications for	Adults and children:
	0.09 g (Sodium 1.54 _{mEq})		intravenous administration.	Vahiala for discoluting and applying
	(Chloride 1.54 mEq)			medications.
010.000.3671.00	Container with 100 10 mL vials.			The volume should be adjusted according to the patient and type of medication
	0.9% INJECTABLE SOLUTION			
	Each 100 mL contains: Sodium chloride injectable water 10	0.9g 00mL		
010.000.3626.00	Container with 50 mL			
	INJECTABLE SOLUTION			
	Each 100 mL contains: Sodium chloride 90 injectable water 10	00 mg 00mL		
010.000.3633.00	Container with 50 mL bag and vial adapter.			
	INJECTABLE SOLUTION			
010.000.3634.00	Each 100 mL contains: Sodium chloride 90 injectable water 10 Container with 100 mL bag and vial	00 mg 00mL		
	0.9% INJECTABLE SOLUTION		Hypotonic dehydration with	Intravenous.
010.000.3627.00	Each 100 mL contains: Sodium chloride injectable water 10 Container with 100 mL.	0.9g 00mL	hyponatremia. To recover or maintain the hydroelectrolyte balance.	Adults and children: The volume should be adjusted according to the patient's age, body weight, cardiovascular or renal conditions
	0.9% INJECTABLE SOLUTION			
010.000.3610.00	Each 100 mL contains: Sodium chloride injectable water 10 Container with 1,000 mL.	0.9g 00mL		
	Contains: Sodium 154 mEq Chloride 154 mEq			

010.000.5386.00	INJECTABLE SOLUTION AT 17.7% Each mL contains: Sodium chloride 0.177g Container with one hundred 10 mL vials.	Normalizer of severe sodium depletion. Shock due to hemorrhage and burns.	Intravenous. Adults: The volume should be adjusted according to the patient's age, body weither, cardiovascular or renal conditions and judgment of the specialist.	
Sodium is the mo base balance, an	ost important cation of the extrace d water balance. It contributes to	Generalities Ilular fluid, in combination with on nerve conduction, neuromuscu	chlorine it maintains osmotic pressure, acid- lar function and glandular secretion.	
	Risk in Pregnancy	то		
		Adverse effects	7	
Administered in a edema, extracellu	ppropriate quantities it does not p ular hyperosmolarity and hyperchl	oroduce adverse reactions. If ap oremic acidosis occur.	plied in doses above what is required,	
	Contra	aindications and Precautions		
Contraindications Precautions: Sev	s: Hypernatremia or fluid retention rere renal dysfunction, cardiopulm	<u>onary disease, intracranial hype</u> Interactions	ertension with or without edema.	
None of clinical in	mportance.		_	
	LORIDE AND GLUCO	SE I Indications	Route of administration and dosage	Ĩ
	INJECTABLE SOLUTION	State changes	Intravenous.	1
	Each 100 mL contains: Sodium chloride 0.9 g Anhydrous glucose	of caloric needs.	Adults and children: According to the patient's needs, age, body weight.	
	or glucose 5.0 g or Glucose monohydrate equivalent to 5.0 g of glucose.		cardiovascular and renal conditions.	
010.000.3613.00	Container with 1,000 mL. Contains:			
	Sodium 154.0 mEq Chloride 154.0 mEq Glucose 50.0 g			
	·	Generalities		•
Sterile solution co 100 mEq. One gr reduce excessive	ontaining sodium chloride and glu ram of NaCl provides 17.1 mEq of loss of Na+ and the production o	cose. The daily sodium and chl both ions; while each gram of f ketone bodies.	orine requirements are respectively 80 and glucose is a source of 4 calories and helps	
	Risk in Pregnancy	то		
		Adverse effects	7	
Hyperosmolarity,	hyperchloremic acidosis. Local ir	juries due to poor administratio	n, hypernatremia, edema.	
Contraindications acidosis.	Contra S: DM2 and decompensated DM1,	aindications and Precautions , hyperglycemic coma, overhydi	ration, hyperosmolarity and hyperchloremic	
None of alimination		Interactions		
	nponance.			
JEX I RAN	Description	Indications	Route of administration and dosage	1
	10% INJECTABLE SOLUTION		Hypovolemia due to loss of whole blood and plasma.	Intravenous.
	Every 100 milliliters contain:			Adults:

010.000.0641.00 Co	ntainer with 500 mL.			Prophylaxis: 10 mL/kg (10% solution) on the surgical day; continue for two or three days.
				Hypovolemia: The volume and speed must be established according to the patient's conditions administered: adults 20 10 mL/kg/day.
				Do not exceed 1 g/kg/day, days.
Water-soluble po liquids from the ir venous pressure decrease in plate	lysaccharide whose main effect is the ex nterstitial space in a ratio of double the a , blood pressure, urinary output, capillary let adhesiveness.	Generalities (pansion of plasma volumo mount administered. It pro perfusion and a decrease	e by colloidal osmotic action that extracts duces an increase in cardiac output, central e in heart rate and blood viscosity due to a	
	Risk in Pregnancy	то		
	A	dverse effects	7	
Anaphylactic sho	ck (rare), increased intraoperative bleed	ing.	_	
	Contraindic	ations and Precautions		
Contraindications (thrombocytopen	s: Hypersensitivity to the drug, severe he ia, use of anticoagulants).	art or kidney failure, hemo	rrhagic disease	
None of clinical in		Interactions		
OTASSIUM	PHOSPHATE			_
Clue		Indications	Route of administration and dosage	
	Each vial contains:	Decompensated	Adults:	
	Monobasic potassium phosphate 1,550 g Monobasic potassium phosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq)	underes meintus.	Individualize the dose. In general 60 mEq for 24 hours.	
010.000.3617.00	Monobasic potassium phosphate 1,350 g Monobasic potassium phosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq) Container with 50 vials with 10 mL.		Individualize the dose. In general 60 mEq for 24 hours. Children:	
010.000.3617.00	Monobasic potassium phosphate 1,350 g Monobasic potassium phosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq) Container with 50 vials with 10 mL.		Individualize the dose. In general 60 mEq for 24 hours. Children: 1 mEq/kg body weight/24 h.	
010.000.3617.00	Monobasic potassium phosphate 1,350 g Monobasic potassium phosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq) Container with 50 vials with 10 mL.	Generalities	Individualize the dose. In general 60 mEq for 24 hours. Children: 1 mEq/kg body weight/24 h.	
010.000.3617.00 Essential electrol corticosteroids.	Monobasic potassium phosphate 1,350 g Monobasic potassium phosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq) Container with 50 vials with 10 mL.	Generalities duces the risk of hypokaler	Individualize the dose. In general 60 mEq for 24 hours. Children: 1 mEq/kg body weight/24 h.	
010.000.3617.00 Essential electrol corticosteroids.	Monobasic potassium phosphate 1,350 g Monobasic potassium phosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq) Container with 50 vials with 10 mL.	Generalities	Individualize the dose. In general 60 mEq for 24 hours. Children: 1 mEq/kg body weight/24 h.	
010.000.3617.00 Essential electrol corticosteroids.	Monobasic potassium phosphate 1,350 g Monobasic potassium phosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq) Container with 50 vials with 10 mL.	Generalities duces the risk of hypokaler	Individualize the dose. In general 60 mEq for 24 hours. Children: 1 mEq/kg body weight/24 h.	
010.000.3617.00 Essential electrol corticosteroids.	Monobasic potassium phosphate 1,350 g Monobasic potassium phosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq) Container with 50 vials with 10 mL. Lyte for cardiac and cellular function. Rec Risk in Pregnancy Addression Cardiac arrhythmias, hypertal confusion, cardiac ar	Generalities	Individualize the dose. In general 60 mEq for 24 hours. Children: 1 mEq/kg body weight/24 h. nia in patients receiving diuretics and and abdominal pain.	
010.000.3617.00 Essential electrol corticosteroids.	Monobasic potassium phosphate 1,350 g Monobasic potassium phosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq) Container with 50 vials with 10 mL. general confusion, cardiac arrhythmias, hype Contraindic	Generalities Generalities duces the risk of hypokaler To dverse effects potension, flaccid paralysis ations and Precautions	Individualize the dose. In general 60 mEq for 24 hours. Children: 1 mEq/kg body weight/24 h. nia in patients receiving diuretics and and abdominal pain.	
010.000.3617.00 Essential electrol corticosteroids. Paresthesias, me	Monobasic potassium phosphate 1,350 g Monobasic potassium phosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq) Container with 50 vials with 10 mL.	Generalities Generalities To To dverse effects potension, flaccid paralysis ations and Precautions e dehydration, hyperkalem	Individualize the dose. In general 60 mEq for 24 hours. Children: 1 mEq/kg body weight/24 h. nia in patients receiving diuretics and and abdominal pain.	
010.000.3617.00 Essential electrol corticosteroids. Paresthesias, me Contraindications	Monobasic potasistin prosphate 1,350 g Monobasic potasistin prosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq) Container with 50 vials with 10 mL. Question of the second seco	Generalities Generalities To	Individualize the dose. In general 60 mEq for 24 hours. Children: 1 mEq/kg body weight/24 h. nia in patients receiving diuretics and and abdominal pain.	
010.000.3617.00 Essential electrol corticosteroids. Paresthesias, me Contraindications	Monobasic potassium phosphate 1,350 g Monobasic potassium phosphate 0.300 g (Potassium 20 mEq) (Phosphate 20 mEq) Container with 50 vials with 10 mL. Let for cardiac and cellular function. Rec Risk in Pregnancy Addental confusion, cardiac arrhythmias, hyp Contraindic s: Renal failure, Addison's disease, acute	Generalities Generalities Guces the risk of hypokaler To To Overse effects Dotension, flaccid paralysis ations and Precautions e dehydration, hyperkalem	Individualize the dose. In general 60 mEq for 24 hours. Children: 1 mEq/kg body weight/24 h. nia in patients receiving diuretics and and abdominal pain.	

Hyperkalemia is favored with potassium-sparing diuretics.

CALCIUM GLUCONATE

Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Tetany due to hypocalcemia. BV	Intravenous.
	Each vial contains:	Polytransfusions.	Adults and children:
	0.093 g of ionizable calcium	To prepare multiple solutions	According to the severity of the condition,
			age, body weight, kidney and cardiovascular
010.000.3620.00 010.000.3620.01	Container with 50 10 mL vials.	Pancreatitis.	condition of the patient.
	Container with foo fo the viais.	Heart attack.	

Generalities

Essential electrolyte that maintains the integrity of biological membranes, participates in skeletal, smooth and cardiac muscle contraction, nervous excitability and blood coagulation.

Γ	Risk in Preç	gnancy	b	
	Г	Adverse	effects]
Hypercalcemia, bradycardia,	, depression of th	he central nervous s	system, hyporeflexia and	d hypotonia, abdominal pain, arterial
hypotension and vasomotor	collapse.			

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, primary hyperparathyroidism, hypercalcemia and hypercalciuria, acute and chronic renal failure, kidney stones.

Intera	ctions
	14 <i>0</i> 00 6 1

Interactions Do not mix with baking soda. With digitalis the risk of toxicity increases. With warfarin and heparin their anticoagulant effect decreases.

GLUCOSE

Clue	Description		Indications	Route of administration and dosage
	10% INJECTABLE SOLUTION		Plasma volume deficiency	Intravenous.
			and	
	Each 100 mL contains:		electrolyte concentration.	Adults and children:
	Anhydrous glucose or glucose 10 g		Hyportonia dobydration	According to the patient's peeds, body weight, age
	monohydrata aguivalant to 10.0 g of		(hypernatremic)	actionary to the patient's needs, body weight, age,
	ducose		(hypernationite).	dehydration
	gidobee.		Start infusion.	donyardaoni
	Container with 500 mL			
010.000.3604.00	Contains: Glucose 50.0 g.		Need to increase caloric intake.	
-			4	
	10% INJECTABLE SOLUTION			
	Each 100 mL contains:			
	Anhydrous alucose or alucose or	10a		
	·····, -··· g····· g····· .			
	Glucose monohydrate			
	equivalent to	10.0g		
	glucose.			
010.000.3605.00	Container with 1,000 mL			
	Contains: Glucose 100.0 g			
	5% INJECTABLE SOLUTION		1	
	Each 100 mL contains:			
	Anhydrous glucose or glucose or	5g		
	Glucose monohydrate			
	equivalent to	5.0a		
	glucose.			
010.000.3625.00	Container with 100 mL.			
3	Contains: Glucose 5.0 g		4	
	570 INJECTABLE SOLUTION			
	Each 100 mL contains:			
	Anhydrous glucose or glucose or	5g		
		5		
	Glucose monohydrate			
	equivalent to	5.0g		

	E.	1	
	of glucose.		
010.000.3624.00	Container with 50 ml		
01010001012	Contains: Glucose 2.5 g		
	INJECTABLE SOLUTION 50%	Hypoglycemia.	Intravenous.
	Each 100 mL contains:	Insulin shock.	Adults and children:
	ducose 50g	Energy supplement.	According to the patient's needs, body weight, age,
	injectable water 100mL	Lingy supportent.	
		Total parenteral nutrition	cardiovascular and renal condition and degree of
	Glucose monohydrate	by central catheter.	dehydration.
	equivalent to oug alucose.	Mix with amino acid and lipid	
	g.uooc	solution.	
010.000.3606.00	Container with 250 mL.		
	Contains: Glucose 125 g	Disactution and reconstitution of	Intravenous
	5% INJECTABLE SOLUTION	Dissolution and reconstitution or medications for intravenous	Intravenous.
	Each 100 mL contains:	administration.	Adults and children:
	Anhydrous glucose or glucose or 5g		
			Vehicle for dissolving and applying
	Glucose monohydrate		medications.
	equivalent to 5g		
	glucose.		
010.000.3631.00	Container with 50 mL bag and vial adapter.		
	5% INJECTABLE SOLUTION		
	Fach 100 mL contains:		
	Anhydrous alucose or alucose or 5g.		
	Glucose monohydrate		
	equivalent to 5g		
	glucose.		
010.000.3632.00	Container with 100 mL bag and vial		
	adapter.		
		Constralition	
			• • • • • • •
Glucose is the m	ain source of energy in living organism	ns. Injectable solutions with the	is nutrient (glucose
5%) are a source	of calories, cover water needs and an	e userul in renyarating the bo	dy.
Γ	Pick in Programov	h	
<u> </u>	RISK IN Fregnancy	and labor due to fetal hypogl	veenia)
		and iabor due to retai hypogr	ycemia)
	Ac	dverse effects	
Uncommon: local	Lyenous irritation, hyperalycemia and	dvcosuria	
Uncommon. icca	renous initiation, hyporgryconna and	giyeosuna.	
	Contraindic	eations and Precautions	
Contraindications: The	50% colution in comotic diurasis, intracranial or in	alloris and incoducions	
Contrainuications. me	50% Solution in Osmotic didresis, intracramaror in	itraspinal nemormage, demound remer	IS
Precautions: Res	trict its use in patients with edema with	h or without hyponatremia, he	eart or kidney failure, hyperglycemia.
diabetic coma.	the no use in patiente man edente	Tor Wallout Hyportation ite,	art of Marley failure, hypergrycenia,
0.000.000000000000000000000000000000000			
		Interactions	
Hvperalvcemia is	promoted with medications such as c	orticosteroids. thiazide diuret	ics and furosemide.
1,1,20,3,,			
MONESILIN			
	I Description	Indications	
Olue		Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Hypomagnesemia.	Intramuscular or intravenous.
	Each vial contains: Magnesium	Prevention and control of	Adults:
	sulfate 1g	seizures in preeclampsia	4 a in 250 mL of glucose solution
	(Magnesium 8.1 mEq sulfate 8.1 mEq).	or eclampsia.	5%, at a rate of 3 mL/min and according to serum

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Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Hypomagnesemia.	Intramuscular or intravenous.
010.000.3629.00	Each vial contains: Magnesium sulfate 1g (Magnesium 8.1 mEq sulfate 8.1 mEq). Container with 100 10 mL vials with 1 g (100 mg/1 mL).	Prevention and control of seizures in preeclampsia or eclampsia.	Adults: 4 g in 250 mL of glucose solution 5%, at a rate of 3 mL/min and according to serum magnesium values. Intramuscular: 1 to 5 g, every 4 or 6 hours, do not exceed 40 g/day. Children: Over 6 years old 2 to 10 mEg/day.

			Generalities]				
Restore and preserve magnesium values. As an anticonvulsant, it decreases muscle contractions by interfering with the release of acetylcholine in the neuromuscular plate.								
	Risk in Pregnancy b							
		Α	dverse effects	l				
	Decreased or absent deep tendon reflexes, drowsiness, flaccid paralysis, hypothermia, hypocalcemia (paraesthesias, tetany seizures). Blushing and sweating. bradycardia, arterial hypotension, cardiac arrhythmias. respiratory paralysis.							
		Contraindic	cations and Precautions]				
Contraindications: Kidney failure, myocardial injury, heart blocks, labor. Precautions: Intravenous administration should be done slowly to avoid cardiorespiratory arrest, verifying vital signs, deep tendon reflexes and calcium concentration.								
			Interactions]				
	With neuromuscular blockers (pancuronium, vecuronium) the duration of effects increases. Extreme caution should be used							
٨								
N	IANITOL Clue	Description	Indications	Route of administration and dosage				
		20% INJECTABLE SOLUTION	Cerebral edema.	Intravenous.				
	010.000.2306.00	Each container contains Mannitol 50g Container with 250 mL	Prophylaxis of acute renal failure. Diagnostic test for acute renal failure.	Adults and kids older than 12 years old: 50 to 100 g for 2 to 6 hours. Cerebral edema 1.5 to 2 g/kg. Diagnostic test 200 mg/kg.				
	· ·		Conoralities	1				
	Osmotic diuretic t	hat increases water flow into the intrav	ascular space by increasing	J u plasma osmolarity.				
				, p				
	Risk in Pregr	iancy c						
		A	dverse effects]				
	Hyponatremia, hydroelectrolyte imbalance, cerebral edema, tachycardia.							
	Contraindications and Precautions							
Contraindications: Hypersensitivity to the drug, congestive heart failure, acute pulmonary edema, chronic renal failure, cerebral bemorrhage								
Interactions								
	None of clinical in	nportance.						
~								
	Gide	INJECTABLE SOLUTION	Plasma substitute in	Intravenous.				
		Fach 400 mL container	states of decreased blood					
		Poligeline 3.5a	volume.	Adults and children:				
	010.000.3661.00	Container with 500 mL with or without		According to the patient's needs, body weight, age, cardiovascular and renal condition and				

 Each 100 mL contains:

 gelatin polymerization

 degraded succinylated
 4.0g

 010.000.3664.00
 Container with 500 mL.

 Generalities

 It has an adequate osmotic pressure to be used as a circulating volume expander.

 Risk in Pregnancy

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equipment for administration. INJECTABLE SOLUTION

Adverse effects

degree of dehydration.

Hypersensitivity including anaphylactoid reactions, acute renal failure. Too much can speed up bleeding time.



Interactions

The calcium ions contained in the solution make it incompatible with citrated blood and it should also be used with caution in patients under treatment with digitalis.

HUMAN SERUM ALBUMIN OR HUMAN ALBUMIN

Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Hypoalbuminemia with	Intravenous.
		serious physiological	
	Each container contains:	repercussion.	Adults and children:
	human serum albumin or		Assorting to the potient's people had
	numan abumin 10g	Shock states.	According to the patient's needs, body
010.000.4552.00	Container with 50 mL.	Liver failure.	weight, age, cardiovascular and renal condition.
	INJECTABLE SOLUTION		
		Nephrotic syndrome.	
	Each container contains:		
	human serum albumin or	Burns.	
	numan abumin 12.5g		
010.000.3662.00	Container with 50 mL.		

Generalities

Normal serum albumin provides an intravascular oncotic pressure in a 5:1 ratio, diverting extracellular fluid to the intravascular space. It is useful as a plasma expander. Increases protein in circulation.

С

Risk in Pregnancy

Adverse effects

Vascular overload, heart rhythm disturbances. salivation, nausea, vomiting, chills and fever.

Contraindications and Precautions Contraindications: Hypersensitivity to the drug, severe anemia and heart failure. Interactions

None of clinical importance.