

# Sodium Bicarbonate

## Formulary

Douglas County Kansas EMS System

March 2021

**Approved Provider:** AEMT, Paramedic

**Referenced Protocols:** [CAPE](#), [Crush Syndrome](#), [Drug Overdose/ Poisoning](#)

Dosing and Administration	
<u>ADULT Medications:</u> <ul style="list-style-type: none"><li>• <b>Cardiac Arrest:</b> 1.0 meq/kg IV/IO Push</li><li>• <b>Hyperkalemia:</b> 1.0 meq/kg IV/IO Push</li><li>☎ <b>TCA OD:</b> 1.0-3.0 meq/kg IV/IO push</li><li>☎ <b>Crush Syndrome:</b> 50 mEq IV/IO slow push</li></ul>	<u>PEDIATRIC Medications:</u> <b>Refer to HandTevy</b> <ul style="list-style-type: none"><li>• <b>Cardiac Arrest:</b> 1.0 meq/kg IV/IO Push</li><li>• <b>Hyperkalemia:</b> 1.0 meq/kg IV/IO Push</li><li>☎ <b>TCA OD:</b> 1.0-3.0 meq/kg IV/IO push</li><li>☎ <b>Crush Syndrome:</b> 1.0 meq/kg IV/IO Push</li></ul>

### **Pharmacology and Actions:**

- Serves as a buffer for acidosis

### **Indications:**

- Consider use in prolonged downtime secondary to cardiac arrest
- Known or suspected hyperkalemia
- ☎ Known or suspected TCA (tricyclic antidepressant overdose)
- ☎ Prolonged compression of one or more extremities in patients suspected of suffering from crush syndrome

### **Contraindications:**

- None

### **Precautions:**

- Administration rapidly generates carbon dioxide which can result in tissue and cerebrospinal fluid acidosis
- Do not mix with other drugs, flush with a minimum of 50ml of NS before and after.

### **Administration:**

- Flush with a minimum of 50ml of NS before and after.
- Acceptable routes include IV and IO only
- Adequate ventilation is a major buffering agent and is essential prior to administration

### **Side Effects:**

- Alkalosis
- Hypokalemia