

CRYSTALLOID: NORMAL SALINE

DRUG CLASSIFICATION	Sodium Chloride Salt Sterile / Nonpyrogenic Isotonic Crystalloid Solution Parenteral Electrolyte Supplement
MECHANISM OF ACTION	Sodium is the principal cation of the extracellular fluid, while chloride is the principal anion. Both ions are physiologically important. Sodium functions as the primary osmotic determinant in extracellular fluid regulation and tissue hydration. Additionally, sodium regulates the membrane potential of cells and the active transport of molecules across cell membranes. Chloride is also responsible for maintaining fluid balance, but it is also essential in the maintenance of acid-base balance. Low plasma chloride levels cause an increase in bicarbonate, producing alkalosis. Sodium is a unique electrolyte because water balance is directly related to its concentration.
CLINICAL INDICATIONS	Intravascular Volume Replenishment Pre-catheterization hydration for STEMI patients Ocular or Wound Irrigation
STANDARD CONTRAINDICATIONS	Hypersensitivity to sodium chloride or any component of the formulation. Hyponatremia and/or fluid retention (dosage form specific).
POTENTIAL ADVERSE EFFECTS	Acid-Base Imbalance / Electrolyte Disorder / Hyponatremia / Hyperchloremia / Hyperkalemia / Decreased Renal Blood Flow
GENERAL RISKS & PRECAUTION	1) Use with caution in patients with cirrhosis. 2) Use with caution in patients with edema. 3) Use with caution in patients with heart failure. 4) Use with caution in patients with hypertension. 5) Use with caution in patients with kidney impairment.
PROTOCOL INDEX	Abdominal Pain / Vomiting / Diarrhea (UP-3) Back Pain (UP-5) Syncope (UP-16) Behavioral Hyperactive Delirium with Severe Agitation (UP-19) Adult Asystole / Pulseless Electrical Activity (AC-1) Bradycardia; Pulse Present (AC-2) Chest Pain: Cardiac and STEMI (AC-4) Mechanical Circulatory Support: LVAD, RVAD, AND BI-VAD (AC-14) Total Artificial Heart (AC-15) Allergic Reaction / Anaphylaxis (AM-1) Diabetic; Adult (AM-2) Dialysis / Renal Failure (AM-3) Hypotension / Shock (AM-5) Newly Born (AO-2) Chemical and Electrical Burn (TB-2) Crush Syndrome Trauma (TB-3) Extremity Trauma (TB-4) Radiation Incident (TB-7) Thermal Burn (TB-9) Pediatric Asystole / PEA (PC-1) Pediatric Bradycardia with Poor Perfusion (PC-2) Pediatric Allergic Reaction (PM-1) Pediatric Diabetic (PM-2) Pediatric Hypotension / Shock (PM-3) Hyperthermia (TE-4) Hypothermia / Frostbite (TE-5) Scene Rehabilitation: Responder (SO-2)
MEDICATION ADMINISTRATION	
ADULT	
PEDIATRIC	
SEE SPECIFIC PROTOCOL	SEE SPECIFIC PROTOCOL