UVA Health

1000000

PLACE LABEL HERE.

IF LABEL NOT AVAILABLE, WRITE IN PT NAME & MR#

RENAL SERVICES — DOWNTIME CONTINUOUS RENAL REPLACEMENT THERAPY (CRRT) FLOWSHEET

									THERAPY FLUID	ACCESS PRESSURE POD	FLUID WARMER	FILTER HEAD
DATE		MACHINE	PRESSURES		FLUIDS (mL PER HOUR)		EXTRA FLUID					
TIME	BFR	EFFLUENT (20-300)	ACCESS (-50 - -200)	VENOUS (20-300)		DIALYSATE (RATE)	CITRATE/ CACL	ICa				

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KEY
BFR = BLOOD FLOW RATE
BOLUS = ALL EXTRA FLUID
NOT TO BE REMOVED
DEFICIT = IF (F) - (G) = NEGATIVE #
ADD IN COL(E)
IF (F) - (G) = POSITIVE #
SUBTRACT IN COL(E)

CRRT FLOWSHEET

A	B =	C +	D +	E =	F	G	COMMENTS/ INITIALS
INTAKE INCLUDE CITRATE/CACL INFUSIONS	OUT	NET	DESIRED FLUID LOSS	DEFICIT FROM PREVIOUS HR. (F - G)	SET FLUID REMOVAL FOR NEXT HOUR	ACTUAL FLUID REMOVED	
							DLS 98

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	Initials / Name

Print Name / Signature / Title / Initials / Shift

Print Name / Signature / Title / Initials / Shift

Print Name / Signature / Title / Initials / Shift

Print Name / Signature / Title / Initials / Shift

Print Name / Signature / Title / Initials / Shift

Print Name / Signature / Title / Initials / Shift

PLACE LABEL HERE.

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Emergency Numbers:

Renal Physician on call **PIC #** _____

Renal Nurse on Call **PIC #** _____