UMC Health System

ALBUMIN PLAN

	PHYSICIAN ORDERS						
Diagnos	is						
Weight	Allergies						
	Place an "X" in the Orders column to designate orders of choice ANE) an "x" in the specific ord	er detail box(es) where applicable.				
ORDER	ORDER DETAILS						
	Medications						
	Medication sentences are per dose. You will need to calculate a total daily dose if needed. Albumin Unapproved Indications Albumin Unapproved Indications						
	 Hypoalbuminemia/Intravenous nutrient Hypoproteinemic conditions associated with cirrhosis, malabsorption, protein losing enteropathies, pancreatic insufficiency and malnutrition Hypovolemia responsive to colloids Ascites responsive to diuretics Major trauma Abdominal compartment syndrome Acute or Chronic pancreatitis Acute normovolemic hemodilution in surgery Ovarian hyperstimulation syndrome 						
	Albumin Approved Indications						
	Ascites/Large volume paracentesis in patients with cirrhosis:						
	For ascites removal of greater than or equal to 5 liters. Administer albumin 25% (6-8 grams) for each liter of ascitic fluid removed. Crystalloids should be used for volume resuscitation for paracentesis less than 5 liters.						
	 albumin human (albumin human 25% intravenous solution) ☐ 50 g, IVPB, ivpb, ONE TIME, Infuse over 2 hr, Ascites/Lrg vol paracentesis & cirrhosis Administer immediately AFTER paracentesis 						
	Plasmapheresis:						
	For large volume plasma exchange of greater than 20 mL/kg in one session or repeated sessions. Replace volume of plasma removed with the infusion of the same volume of 5% albumin.						
	albumin human (albumin human 5% intravenous solution) 12.5 g, IVPB, ivpb, ONE TIME, Infuse over 1 hr, Plasmapheresis 25 g, IVPB, ivpb, ONE TIME, Infuse over 1 hr, Plasmapheresis						
	Spontaneous Bacterial Peritonitis (SBP):						
	For SBP, place BOTH of the following orders for albumin to be given on Day 1 (Max Dose = 150 g) and Day 3 (Max Dose = 100 g).						
	For Day 1: albumin human 25% intravenous solution) ☐ 1.5 g/kg, IVPB, ivpb, ONE TIME, Max Dose = 150 g, Spontaneous Bacterial Peritonitis (SBP) To be given on Day 1. Max dose of 150 g.						
	For Day 3:						
	albumin human (albumin human 25% intravenous solution) 1 g/kg, IVPB, ivpb, ONE TIME, Max Dose = 100 g, Spontaneous Bacterial Peritonitis (SBP) To be given on Day 3. Max dose of 100 g.						
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Order Taken by Signature:		Date	Time				
Physician Signature:		Date	Time				



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	Place an "X" in the Orders column to designate orders of choice AM	ID an "x" in the specific or	der detail box(es) where applicable.			
ORDER	ORDER DETAILS					
	Type I Hepatorenal Syndrome (HRS):					
	For DIAGNOSIS of HRS - Lack of improvement in renal function after stopping diuretics and administration of albumin 1 g/ kg (Max Dose = 100 g) daily for two consecutive days.					
	 albumin human (albumin human 25% intravenous solution) 1 g/kg, IVPB, ivpb, q24h, x 2 dose, Max Dose = 100 g, Type I Hepatorenal Syndrome (HRS) For diagnosis of Type 1 Hepatorenal Syndrome to be given on 2 consecutive days. Max dose is 100 g. 					
	For TREATMENT of Type I HRS - Beginning on Day 3, administer albumin 25% 25-50 g daily. Octreotide and midodrine should be ordered concomitantly with albumin. Stop albumin when octreotide and midodrine are no longer needed.					
	 albumin human (albumin human 25% intravenous solution) 25 g, IVPB, ivpb, q24h, Infuse over 1 hr, Type I Hepatorenal Syndrome (HRS) For Treatment of Type I HRS - Beginning on Day 3, administer albumin 25% 25-50 g daily. Octreotide and midodrine should be ordered concomitantly with albumin. Stop albumin when octreotide and midodrine are no longer needed. 50 g, IVPB, ivpb, q24h, Infuse over 2 hr, Type I Hepatorenal Syndrome (HRS) For Treatment of Type I HRS - Beginning on Day 3, administer albumin 25% 25-50 g daily. Octreotide and midodrine should be ordered concomitantly with albumin. Stop albumin when octreotide and midodrine are no longer needed. 					
	Major Hepatic Resection (greater than 40% resected):					
	May give in patients with serum albumin less than 2.5 g/dL, if crystalloids alone fail to achieve adequate intravascular volume. May give daily until albumin is greater than or equal to 2.5 g/dL (up to 4 days).					
	albumin human (albumin human 25% intravenous solution)					
	Shock					
	May use albumin after 4 L or more of crystalloid have been administered without desired response.					
	albumin human (albumin human 5% intravenous solution)					
	Acute Nephrosis					
	Approved for use after failure of diuretic alone.					
	albumin human (albumin human 25% intravenous solution)					
	Acute Lung Injury (ALI)/Acute Respiratory Distress Syndrome (ARDS)					
	The combination of albumin and diuretics may be considered in patients with hypo-oncotic ALI/ARDS. May give up to 72 hours.					
	albumin human (albumin human 25% intravenous solution)					
	Cerebral ischemia or hemorrhage as part of triple H therapy					
Пто	Read Back	Scanned Powerchart	Scanned PharmScan			
Order Taken by Signature:		Date	Time			
Physician Signature:		Date	Time			



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PHYSICIAN ORDERS						
	Place an "X" in the Orders column to designate orders of choice AND an "x" in the specific order detail box(es) where applicable.					
ORDER	ORDER DETAILS					
	Crystalloid and colloid may be used to maintain normovolemia or hypervolemia as follows:					
	Aneurysmal Subarachnoid Hemorrhage (SAH): Total fluids should be adjusted to maintain target CVP of 6 to 8 to decrease risk of vasospasm. If delayed vasospasm occurs, hypervolemia should be induced to maintain CVP goal of 8 to 12.					
	For acute ischemic stroke or TIA, use albumin if there is evidence of flow failure.					
	 albumin human (albumin human 5% intravenous solution) 12.5 g, IVPB, ivpb, q2h, PRN other, CV ischemia/hemorrhage- triple H therapy To be administered as instructed by provider for maintaining volume status. 					
	Cardiac Surgery Postoperative Volume Resuscitation					
	Replace volume as clinically indicated with 5% albumin in early post-op period (up to 3 hrs). If large volumes are required, change to normal saline after 1,500 mL of albumin have been given.					
	albumin human (albumin human 5% intravenous solution) 12.5 g, IVPB, ivpb, q2h, PRN hypovolemia, Card Surg (post-op volume resuscitation) For volume up to mL					
	Thermal Injury					
	Crystalloid solutions should be used for initial fluid resuscitation (within the first 24 hours). Colloids may be administered in conjunction with crystalloids if burn is greater than 50% BSA, 24 hours have passed since the burn occurrence, AND hypovolemia has not corrected with crystalloid alone. Initial dose of 25 grams of albumin (500 mL of 5% solution) is recommended; May be repeated one time.					
	albumin human (albumin human 5% intravenous solution) 12.5 g, IVPB, ivpb, q2h, PRN hypovolemia, x 4 dose, Thermal Injury					
	Dialysis associated hypotension					
	Albumin should only be used if fluid bolus fails or is contraindicated.					
	albumin human (albumin human 25% intravenous solution) 12.5 g, IVPB, ivpb, ONE TIME, Infuse over 1 hr, Dialysis associated hypotension 25 g, IVPB, ivpb, ONE TIME, Infuse over 1 hr, Dialysis associated hypotension					
	Other Indications					
	If albumin is needed for an indication other than those listed, please identify it within the order comments field for indication on the order.					
	albumin human (albumin human 5% intravenous solution)	25 g, IVPB, ivpb, ONE TI	ME, Infuse over 1 hr, Other			
	albumin human (albumin human 25% intravenous solution)	25 g, IVPB, ivpb, ONE TI	ME, Infuse over 1 hr, Other			
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Order Taken by Signature:		Date	Time			
Physician Signature:		Date	Time			

