Riverbend Medical Center Regional Infusion Center (RIC)
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IV Hydration Protocol for Hyperemesis gravidarum (v. 11/14/2025)

Diagnosis/Indication (ICD-10): __Hyperemesis gravidarum (021.0)_____

Medications:

- Normal saline 1000 mL with multivitamin 10 mL, thiamine 50 mg, folic acid 1 mg. Infuse over 2 hours _____ time(s) weekly

- Optional: additional 1000 mL of _____ normal saline (NS) or ___ lactated ringer (LR) over 1 hour

- Optional: Ondansetron 4 mg IV x 1 dose for nausea or vomiting if not taken in the last 8 hours

- Optional: Promethazine 12.5 mg PO or PR if nausea or vomiting persists after ondansetron

- Optional: Prochlorperazine (Compazine) 5mg IV if nausea or vomiting persists after ondansetron

Labs:

- Weekly complete blood count (CBC) with auto differential, complete metabolic panel (CMP)

Nursing communications:

- Vital signs: As needed during infusion

Access:

- Insert peripheral IV
  - Okay to leave peripheral IV in for duration of daily therapy. Flush with normal saline before and after use. Remove after IV daily treatment complete

Emergency Medications:

- DiphenhydrAMINE (BENADRYL) 25 to 50 mg IV as needed for mild to moderate drug reactions (flushing, dizziness, headaches, diaphoresis, fever, palpitations, chest discomfort, blood pressure changes (>/= 20 points in SBP), nausea, urticaria, chills, pruritic). Administer 25 mg IV once, if reaction does not resolve in 3 minutes may repeat 25 mg IV dose for a total of 50 mg and contact provider.

- MethylPREDNISolone sodium succinate (Solu-MEDROL) 125 mg IV once as needed for shortness of breath, continued symptoms of mild to moderate drug reaction (flushing, dizziness, headaches, diaphoresis, fever, palpitations, chest discomfort, blood pressure changes (>/= 20 points in SBP), nausea, urticaria, chills, pruritic) that worsen or persist 5 minutes after administration of diphenhydramine (Benadryl). Contact provider if given.

- Epinephrine 0.3 mg IM once for anaphylaxis. If reaction does not resolve in 3 minutes may repeat 0.3 mg IM dose for a total of 0.6 mg. Avoid use of hand, foot, leg veins in elderly patient and those with occlusive vascular disease. Contact provider if given.

- Famotidine (PEPCID) 20 mg IV once as needed for infusion/ allergic reaction.

- May give emergency medications IM if IV route unavailable

Patient name: _____

DOB: _____

Height _____ Weight _____

Provider printed name: _____

Provider signature: _____

Date: _____   Time: _____