



# Class 3 IFT-Paramedic Treatment Protocol 3604

## Electrolyte / Nutrition Protocol

Page 1 of 1

- A. Potassium Chloride (KCl):** Used for potassium replacement in the patient with hypokalemia or related cardiac arrhythmias. **Must be on a pump and at a concentration of no more than 40 meq/1000ml. Must be given over no less than 2 hours.**
1. Perform **Class 3 IFTA Protocol 9201.**
  2. Continue infusion rate as **ordered by the sending physician.**
  3. Assess IV site for signs of infiltration.
  4. KCl infusions are **monitor only for the C3-IFT paramedic.**
  5. Monitor patient for arrhythmias, confusion, restlessness, and ECG changes.
  6. If symptoms occur, **contact medical command and consult MCP.**
- B. Magnesium Sulfate:** Used for prevention and treatment of hypomagnesemia and related cardiac dysrhythmias, management of obstetrical emergencies and preterm labor, and as an anticonvulsant.
1. Perform **Class 3 IFTA Protocol 9201.**
  2. Continue infusion rate as **ordered by the sending physician.**
  3. Assess IV site for signs of infiltration.
  4. Magnesium Sulfate infusions are **monitor only for the C3-IFT paramedic.**
  5. Monitor patient for arrhythmias, confusion, lack of muscle and reflex tone, restlessness, and ECG changes.
  6. If symptoms occur, **contact medical command and consult MCP.**
  7. For magnesium toxicity, perform C3-IFT Protocol 3903 Reversal Agent Protocol.
- C. Total Parenteral Nutrition (TPN):** Primary or supplemental nutrition that bypasses the gastrointestinal tract by being infused directly into the blood stream.
1. Perform **Class 3 IFTA Protocol 9201.**
  2. Continue infusion rate as **ordered by the sending physician.**
  3. Assess IV site for signs of infiltration.
  4. TPN infusions are **monitor only for the C3-IFT paramedic.**
  5. TPN should only be administered via central venous catheter.
  6. **Contact Medical Command** if questions or complications develop during transport.