

HNE AREA Intensive Care

Approved For: JHH ICU only

CALCIUM GLUCONATE 10%

Trade Name:

Presentation: .2mmol of calcium in 10ml (10%w/v solution i.e. 1gm in 10ml)

Indications: Hypocalcaemia, Electophysiological antagonist in hyperkalaemia or hypermagnesaemia,
Treatment of calcium channel blocker overdose

Administration: Acute hypocalcaemia: 2.2 mmol given slowly. This may be followed by an infusion based on patient's serum calcium. **Maximum of 35mmol daily**

examples:

iCa 1-1.12mmol/L 2 g of calcium gluconate over 2 hours

iCa<1mmol/L 4g Calcium gluconate over 4 hours

Serum iCa will achieve plateau by 10 hrs after completion of the infusion**

** Dose -dependent characteristics of iv calcium therapy for hypocalcaemic critically ill trauma patients. R Dickerson et al Nutrition 23: 9-15

Resuscitation: 0.5ml (10%w/v sol'n)/kg/dose, maximum 20ml, repeat as needed after 10 minutes

Dose

Precautions Hypotension, cardiac dysrhythmias, bradycardia particularly with rapid infusion

Vein irritation, marked tissue sloughing and necrosis can occur with extravasation. **Should be administered via central line unless urgent and care taken to avoid extravasation**

Compatibilities: Incompatible with Adrenaline, dobutamine, sodium bicarbonate, cephalothin,, potassium phosphate, sodium phosphate

Created: 01-Sep-01 by Dr M Rowley Reviewed: 01-Dec-07 by Dr A Mullens Guideline to be reviewed before : 18-Nov-09
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