3.12 Standing Order for supply of Oral Rehydration Solution

TITLE	Standing order for Oral Rehydration Solution
Trade Name(s)	E-Lyte; Gastrolyte; Gold Cross Gluco-lyte; HYDRAlyte, O.R.S.; Pedialyte
Presentation[1]	Oral Rehydration Solutions are generally available in 4 forms; • Soluble powder • Effervescent dissolvable tablet • Pre-made solution • Ice blocks. Composition of the available Oral Rehydration Solutions vary. For an overview comparison see GL2014_024 NSW Health Infants and Children – Acute Management of Gastroenteritis, Fourth Edition pages 8 - 9. http://www0.health.nsw.gov.au/policies/gl/2014/pdf/GL2014_024.pdf
Indication	Oral correction of fluid and electrolyte loss in infants, children and adults as a result of vomiting and / or diarrhoea
Contraindications[1]	Possible surgical intervention and / or a requirement to remain 'nil by mouth'
Precautions[1]	Strict fluid balance record. Input should exceed output. Further vomiting ≠ failed trial of fluid – worsening dehydration assessment status = failed trial of fluid
Dose[1]	0.5mL / kg
Dose frequency[1]	Every 5 minutes
Administration[1]	**To be administered in hospital only.** If required, reconstitute specific Oral Rehydration Solution as per manufactures instructions. Instruct patient / carer to administer Oral Rehydration Solution in small, frequent amounts (0.5mL / kg every 5 minutes). Provide patient / carer with appropriate measuring / administration equipment; syringe, measuring cup etc.
Storage	Must be stored out of patient and public access, preferably in a locked room or a locked cabinet securely attached to the wall or floor – see PD2013_043.
Adverse effects[1]	No clinically significant side-effects
Nursing Accreditation Requirements	An RN whose competency to practice Nurse Delegated Emergency Care and to comply with this Standing Order has been assessed and approved by a *Local Facilitator,* in accordance with the NDEC Education and Accreditation Framework.
Documentation	Administration record is to be documented by the administering nurse. Document on the "once only" section of the appropriate medication chart The record of administration must be checked and countersigned by a medical officer within 24 hours of initial administration
Related Documents	NDEC Nurse Management Guideline: Vomiting and Diarrhoea http://www.ecinsw.com.au/node/279

Local Standing Order Authorisation:

Date approved by _____ LHD Drugs and Therapeutics Committee: **Review Date:**	**Medical Officer Name:** **Signature:**

[1] The drug information provided is to act as a guide only, for further information reference should be made to the full product info available on MIMS or the Australian Medicines Handbook <accessible in NSW Health facilities via CIAP: > If contraindications, precautions or interactions are present refer to MO before administration