

Reporting triggers for potential adverse events related to the administration of intravenous fluids to children (1 month - 16<sup>th</sup> birthday).

a. Choice of IV fluid

- Bolus fluid: use of a solution with sodium content less than 131mmol/L for treatment of shock
- Maintenance fluid: use of a solution with sodium content less than 131mmol/L in a peri-operative patient (24 hours before – 24 hours after surgery)
- Deficit fluid: use of a solution with sodium content less than 131mmol/L for correction

b. Biochemical abnormalities

- any episode of symptomatic hyponatraemia while in receipt of IV fluids
- any episode of hypoglycaemia ( <3mmol/L) while in receipt of IV fluids
- any episode of severe acute hyponatraemia (i.e. sodium level dropping from 135mmol/L or above to less than 130mmol/L within 48hrs of starting IV treatment)

c. Assessment

- Electrolytes not checked at least once per 24 hours in any patient receiving IV fluids exclusively
- Failure to record the calculations for fluid requirements in the case notes/ on the prescription sheet
- Failure to note in the case notes/ prescription sheet a serum sodium less than 130mmol/L
- Failure to document in the case notes the steps taken to correct a serum sodium less than 130mmol/L