

## CMO/MD/DPH MEETING – 2 MARCH 2009

### HYPONATRAEMIA AND FLUID GUIDELINES

Dr McBride, Dr C Harper and Dr H Livingston met with Ian Young and Peter Maxwell in December 2008 re the GAIN guidelines on hyponatraemia / fluid prescribing in adults.

Following discussion it was agreed that GAIN would proceed with adult guidelines for patients age 16+ and they hope to have those ready early in 2009.

Dr McAloon who chaired the paediatric group has confirmed that the paediatric guidelines from 2007 are intended for up to the 16th birthday and therefore the adult guidelines will apply from the 16th birthday. The age cut-off for the paediatric and adult guidelines will be clarified when the guidelines are issued & they will be issued together.

To support medical staff in adult wards in prescribing fluids using the paediatric guidelines (mostly for the age group 13 to up to the 16th birthday), it was agreed that :

1. Trusts would be asked to admit children up to their 16th birthday and likely to need IV fluids, to paediatric wards as much as possible, recognising that some hospitals will not have capacity to accommodate all <16 yr olds in paediatric wards
2. Within adult wards, Trusts would be asked to cohort 13 to <16 year olds as much as possible, recognising that their clinical condition/requirements is the overriding priority re placement
3. Senior advice should be readily available to any junior doctor seeking advice in prescribing fluids, particularly for those <16 but also for adults, whatever ward they may be in
4. Undergraduate medical training should include fluid prescribing in children as well as adults, emphasising the need to seek senior advice
5. The medical school should be asked to consider ways in which to expose future F1s to fluid prescribing during work shadowing

6. Induction for F1 doctors should include prescribing fluids in 13-<16 year olds, emphasising the need to seek senior advice

7. Clinical teams should audit compliance with GAIN guidelines on hyponatraemia/fluid prescribing routinely on randomly selected cases and on all near misses and adverse incidents relating to fluid prescription, particularly for those under 16

Subsequent to the meeting and in discussion with Jim Livingstone and Karen Campbell, the following were also agreed:

8. The issue of training nurses in the administration of fluids should be raised with relevant organisations to explore if further action is required

9. When the adult guidelines are available, GAIN will be asked to issue the paediatric (under 16) and adult (16 and over ) guidelines together.

The paediatric guidelines will be clarified to show that they apply up to the 16th birthday and the adult guidelines will show that they apply from the 16th birthday.

10. SQS will coordinate the follow-up action outlined above, through relevant colleagues as appropriate.

DR JIM LIVINGSTONE

Safety Quality and Standards Directorate