Home Health VNA
IV Medication Clinical Fact Sheet

IV Medication: Clinolipid Risk Level: 2

Med Class: Nutrition

Common Uses: Short or long term nutrition support or replacement - source of calories and essential fatty acids

Labs to Monitor: Serum triglycerides, electrolytes, serum osmolality, blood glucose, liver and kidney function, blood count, including platelets, coagulation parameters

Instructions/ Precautions:

Recommended Dosage: Dosage based on patient energy expenditure, clinical status body weight, tolerance, ability to metabolize Clinolipid, and additional oral or enteral intake expectations. Dosage not established for children

Usual dose: 1 to 1.5 g/kg/day and should not exceed 2.5 g/kg/day (adults)

• **Recommended infusion rate** is between 12 and 24 hours.

Route of Administration: Central or peripheral line if given alone.

• If given in combination with dextrose and amino acids, choice of central or peripheral line depends on osmolality of final product

Administration Instructions:

• Should be evenly distributed milky appearance with no visible oil droplets at the surface prior to administration.

• Use contents immediately after opening the bag. Discard unused portion.

• Before opening overwrap check the color of the oxygen indicator to ensure that reference color next to OK symbol corresponds to bag contents – do not give if color is different than reference color next to OK symbol.

• Check for precipitates and do not give if present.

• Do not connect flexible bags in series to avoid air embolism due to possible residual gas contained in the primary bag

• Use only a 1.2 micron pore size in-line filter to administer CLINOLIPID. DO NOT use any size less than 1.2 micron pore size in-line filter.

• Do not use administration sets and lines that contain di-2-ehtylhexyl phthalate (DEHP).

• Patient should be observed for any immediate allergic reactions (eg, dyspnea, cyanosis, and fever).

Excreted: In kidneys – 5-6 hours after lipids infused

Adverse Reactions/Side effects – Common

Hives; difficulty breathing; edema of face.kips, tongue and throat; severe vertigo; nausea and vomiting; hyperlipidemia; hyperglycemia; hyperproteinemia; septicemia; fever; urinary tract infection; diarrhea; pruritis; fat overload syndrome; and abnormal liver function tests

Caution: Known hepatic impairment

Contraindications: Egg or soybean allergy, Hypertriglyceridemia (serum triclyceride > 1000mg/dL)

Interactions:

• Vitamin K content may antagonize anticoagulants – monitor

• High lipid levels in plasma may interfere with blood tests if blood tests taken before lipids are fully excreted

• No drug interactions noted

First Dose Allowed:	Y	If previously on lipids
Central Line Only:	Y	
IV Push:	N	
Vesicant:	N	

See Procedure Manual: Infusion Therapy TPN, Anaphylaxis & First Dose Precedure

Notes: Only drugs listed as First Dose Allowed may be given in the home as a first dose and are considered for a first dose on a case by case basis by the IV Program Manager. Follow Anaphylaxis &First Dose Procedure.
The IV Manager and/or Clinical Director must be consulted before a first dose referral is accepted

Risk Levels:

n/a = Routinely given; Clinician must be approved to administer IV medications

1= IV Program Mgr or Clinical Director approval before referral is accepted

2= Clinicians must review Special

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