Sodium bicarbonate tab

**Class:** Alkalinizing Agent; Antacid; Electrolyte Supplement, Oral; Electrolyte Supplement

**Indications:**
Management of metabolic acidosis; gastric hyperacidity; as an alkalinization agent for the urine; treatment of hyperkalemia; management of overdose of certain drugs, including tricyclic antidepressants and aspirin

**Available dosage form in the hospital:**
SODIUM BICARBONATE 500MG TAB

**Dosage:**

- **Chronic renal failure:** Oral: Initiate when plasma HCO³⁻ < 15 mEq/L. Start with 20-36 mEq/day in divided doses, titrate to bicarbonate level of 18-20 mEq/L.

- **Renal tubular acidosis:** Oral:
  - *Distal:* 0.5-2 mEq/kg/day in 4-5 divided doses
  - *Proximal:* Initial: 5-10 mEq/kg/day; maintenance: Increase as required to maintain serum bicarbonate in the normal range

- **Urine alkalinization:** Oral: Initial: 48 mEq (4 g), then 12-24 mEq (1-2 g) every 4 hours; dose should be titrated to desired urinary pH; doses up to 16 g/day (200 mEq) in patients < 60 years and 8 g (100 mEq) in patients > 60 years

- **Antacid:** Oral: 325 mg to 2 g 1-4 times/day

**Common side effect:**
Frequency not defined.
Cardiovascular: Cerebral hemorrhage, CHF (aggravated), edema
Central nervous system: Tetany
Gastrointestinal: Belching, flatulence (with oral), gastric distension
Endocrine & metabolic: Hypernatremia, hyperosmolality, hypocalcemia, hypokalemia, increased affinity of hemoglobin for oxygen-reduced pH in myocardial tissue necrosis when extravasated, intracranial acidosis, metabolic alkalosis, milk-alkali syndrome (especially with renal dysfunction)
Respiratory: Pulmonary edema

**Pregnancy Risk Factor:** C