

Sodium bicarbonate tab

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

Indications:

Management of metabolic acidosis; gastric hyperacidity; as an alkalization 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 $\text{HCO}_3^- < 15$ 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 alkalization: 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: Hyponatremia, 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