



**NEPHROLOGY PROGRAM
DEPARTMENT POLICIES AND PROCEDURES**

**Hemodialysis - Section 07 - Medication - Neph 7-13
Administration of Intravenous Pamidronate Post Hemodialysis
No.: 00776 (TOH Standardized Policy Number)**

ISSUED BY:

Hemodialysis Clinical Practice Committee

DATE OF APPROVAL:

N/A

APPROVED BY:

Nephrology Steering Committee /
Pharmacy & Therapeutics Committee

LAST REVIEW/REVISION DATE:

2018/03

CATEGORY:

Medication

IMPLEMENTATION DATE:

2004/02

POLICY STATEMENT:

- Pamidronate is administered IV post hemodialysis after the patient's blood is returned
- The usual dose is 60 mg infused over 1 hour. Pamidronate is mixed in 250 mL of 0.9% NaCl and infused at 250 mL/hour
- Doses of 30 or 90 mg, may be ordered. A dosage of 90 mg is administered over 90 minutes

PURPOSE:

- To ensure the safe administration of prescribed IV Pamidronate post hemodialysis

BACKGROUND STATEMENTS:

- Pamidronate is classified as a bone metabolism regulator (Bisphosphonate)
- This medication inhibits bone resorption and lowers blood calcium level in patients with hypercalcemia
- Pamidronate is normally excreted by the kidneys and is partially removed by hemodialysis
- Pamidronate is part of the standard treatment regime in patients with multiple myeloma
- This medication is effective in controlling hypercalcemia in patients on hemodialysis with secondary hyperparathyroidism, however its role in this situation is uncertain because of potential adverse effects on bone histology
- Serum calcium levels should be monitored monthly or more frequently as prescribed

SUPPLIES:

- 30, 60 or 90 mg vials of Pamidronate (as per required dose)
- 1 x 10 ml syringe
- 2 x 18 gauge, blunt needles
- 1 x 250mL bag of 0.9% Sodium Chloride
- Clearlink Continu-Flo Non Vented Intravenous Infusion Pump Tubing
- Baxter Intravenous Infusion Pump
- Alcohol Swabs

DEFINITION(S): N/A**NURSING ALERTS:**

1. Not to be given as a bolus or quickly because of possible fluid overload. Although not directly applicable, a too rapid rate of infusion has also been associated with acute renal failure
2. Watch for infusion site reactions (e.g. induration and pain on palpation, redness, swelling) and fever

PROCEDURE:

1. Process physician order
2. Explain to patient rationale for infusion of medication post dialysis
3. Prepare the IV infusion: add prescribed dose to a 250 ml bag of 0.9% Sodium Chloride and add medication label.
4. Program and load the IV pump with infusion being given over 60-90 minutes

DOCUMENTATION:

Document medication administration and patient outcome according to program standard

RELATED POLICIES / LEGISLATION: N/A**REFERENCES:**

1. Gahart BL, Nazareno AR. 2011 Intravenous Medications. 27th edition. St-Louis (Missouri): Mosby Inc; 2011
2. The Ottawa Hospital Parenteral Drug Therapy Manual. 38th ed
3. Torregosa JV et al. Usefulness of pamidronate in severe secondary hyperparathyroidism in patients undergoing hemodialysis. *Kidney Int Suppl.* 2003 June;(85):88-90
4. McEvoy G, ed. AHFS Drug information 2012 Bethesda (MD): American Society of Health System Pharmacists Inc; 2012. (accessed through online TOH source)

COMMENTS / SIGNIFICANT REVISIONS: N/A