Corrected Sodium C	Calculator (DKA	(3 hours of therapy	uld rise by about 5 mmol/L in 1st /. If coma score falls and	
1st Glucose (mmol/L) 2nd Glucos		e (mmol/L) Give 2-3 m		la not rising assume cerebral oedema. nls/kg of 3% saline and note response :	
1st Na (mmol/L)	2nd Na (mm		Level conciousness should improve over 10-15 minutes		
1st Corrected Na (mmol/L) 2nd Correct		ted Na (mmol/L)		Corrected Na	
Corrected Na should rise as g Expected rate of rise is abou Corrected Na = Na + 0.4 ([Glucose] - 5.5) This is si	t 5 mmol/L over first implified adaptation of the Katz method	8 hours of therapy. Follow [*]	TREND in C	orrected Na	
Acid Base Calculato	r 				
ENTER CI (mmol/L)		Anion gap (with K)		Normal < 16 mEq/L	
ENTER K (mmol/L)		Albumin corrected anion gap		Normal < 16 mEq/L	
ENTER Albumin (g/dl)		Cl:Na ratio		\geq 0.80 = hyperchloraemia	
ENTER pH					
ENTER pCO2 (kPa)		Partitioned Base excess			
ENTER Bicarb (mEq/L)		Base excess due to chloride		= Na - Cl -32	
* Base excess is negative for acidosis		Base excess due to albumin		= 0.25 x (42 - Alb [g/dl])	
		Base excess from unknown anior	ns <i>)</i>	= SBE - (BEchloride + BEalb)	
		Negative partitioned BE values are acidifying]		

Positive partitioned BE vaues are alkalinizing