

## **Athletic Drip-Ola**

**Activity:** no restrictions

**Diet:** no restrictions. Sip 1-2 bottles of water before, during and after infusion

**Venous access:** insert IV catheter using a 20g or 22g IV

**Monitoring:** obtain vital sign pre and post infusion

**Stop infusion for:**

**1. Patient request**

**2. Any sign or symptom of an adverse reaction (refer to adverse reaction order set)**

**A.** Skin reaction: rash, hives and new onset itching, swelling, swelling in tongue, throat or skin

**B.** Respiratory: difficulty of breathing, short of breath, fast breathing, wheezing, stoppage of breathing

**C.** Cardiac: increased or decreased heart rate, irregular pulse rate. Blood pressure change that is 20% or more different from pre infusion vital signs. Chest pain or pressure. No pulse

**D.** GI: nausea or vomiting

**F.** Neurological: new onset headache, confusion or disorientation. Lightheadedness or passing out, facial droop or slurred speech

**G.** General: dizzy, lightheadedness, or flushing

**H.** IV site: redness, swelling, pain or burning

**D/C criteria:**

Stable vital signs

Able to ambulate on their own without symptoms

**D/C order:**

Remove IV

Brief discharge assessment

Schedule net appt if indicated

**Infusion Athletic Drip-Ola:**

Mix in 500ml or 1000ml of NS or LR over 30-60 minutes:

**1ml slow push dilute 1:10 NS/LR Amino Blend** (glutamine 30mg, Ornithine 50mg, Arginine 100mg, Lysine 50mg, Citruline 50mg).

**400mg Magnesium IV only**

**Add on:**

**1ml IV, dilute 1:5 NS LR SLOW push or IM.** B Plex (B1, B2, B3, B4, B5, B6 100-2-100-2-2mg/ml). depending on the pH of the Bplex there can be precipitation with other additives, please visually check for particles. Patients can taste. Only choose 2

**3ml push.** Glutathione 200mg/ml-dilute 1:1 NS/LR, saline flush, Pushed slowly over 1-3 min, saline flush

**1000mcg B12 IM,** or slow IV push

**1ml dilute 1:1 slow push or IM** Taurine 50mg/ml

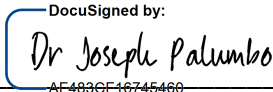
Disclaimer: Not to be used in pregnant, nursing

**This Population may benefit from the following-  
Consult Required For:**

**NAD IV or IM Consult required. Follow RX and Protocol,** If prescribed administer in separate IV or IM per Rx and protocol. Depending on pharmacy may or may not be patient specific

**Carnitine Consult required. Consult required. Follow RX and Protocol,** If prescribed administer in separate IV or IM per Rx and protocol. Depending on pharmacy may or may not be patient specific

**Sermorelin Consult required. Follow RX and Protocol**

Provider Signature:  DocuSigned by:  
AF489CF16745460... Date: 3/15/2024

Provider Name Printed: Dr Joseph Palumbo

**Note: This order is active for 1 year from the date signed**  
**All service providers must adhere to the 3-2-1 rule to be in compliance. 3=NS/LR+2 ingredients, 2= sticks, 1= 1 hour to start administration.**