

Hypernatremia Quick Approach

Water deficit and controlled correction

Electrolytes & ABG

PHYSICIAN REFERENCE

Assess

- Determine acuity, volume status, ongoing water losses and ability to access water.

Treat

- Restore circulation first if shocked, then replace free-water deficit plus ongoing losses.

Safety

- Chronic/unknown-duration hypernatremia generally requires gradual correction with frequent sodium checks; acute cases differ.

Clinical safety note

Use this as a memory aid, not a prescription. Verify current guidelines, local protocols, contraindications, renal/hepatic dosing, pregnancy status, interactions and patient-specific factors before treatment.