

Economic Plan

This document identifies the areas prioritised for de Novo economic analysis. The final analysis may differ from those described below. The rationale for any differences will be explained in the guideline

1 Guideline

Intravenous fluid therapy in adults in hospital

2 List of Modelling Questions

Clinical questions by scope area	<p>Monitoring, Assessment, and Re-evaluation of fluid and electrolyte status: Clinical Assessment</p> <p>In people in hospital receiving IV fluids, what is the clinical and cost effectiveness of measuring and recording serial body weight?</p> <p>In people in hospital receiving intravenous fluids, what is the clinical and cost effectiveness of measuring and recording urine output in addition to recording standard parameters stated in NEWS to determine the need for intravenous fluid administration?</p>																				
Population	Hospitalised patients receiving intravenous fluid therapy (for reasons other than resuscitation)																				
Interventions considered for inclusion	<p style="text-align: center;">Fluid Balance Chart</p> <p style="text-align: center;">None Fluid balance chart completed</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: right;">Weight</td> <td>None</td> <td>Strategy 1</td> <td>Strategy 5</td> </tr> <tr> <td></td> <td>Twice</td> <td></td> <td></td> </tr> <tr> <td></td> <td>Weekly</td> <td>Strategy 2</td> <td>Strategy 6</td> </tr> <tr> <td></td> <td>Daily</td> <td>Strategy 3</td> <td>Strategy 7</td> </tr> <tr> <td></td> <td>Twice a day</td> <td>Strategy 4</td> <td>Strategy 8</td> </tr> </table>	Weight	None	Strategy 1	Strategy 5		Twice				Weekly	Strategy 2	Strategy 6		Daily	Strategy 3	Strategy 7		Twice a day	Strategy 4	Strategy 8
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Type of analysis	Cost Analysis																				

Clinical questions by scope area	Type of fluid for intravenous fluid therapy What is the most clinical and cost effective fluid for resuscitation in hospitalised patients?
Population	In-hospital patients needing fluid resuscitation
Interventions considered for inclusion	<ul style="list-style-type: none"> a) Crystalloids <ul style="list-style-type: none"> i. Sodium Chloride 0.9% ii. Hartmann’s Solution iii. Plasmalyte iv. Ringer’s Lactate b) Gelatin <ul style="list-style-type: none"> i. Volplex ii. Isoplex iii. Gelofusine iv. Geloplasma c) Tetrastarch <ul style="list-style-type: none"> i. Tetraspan 6% ii. Tetraspan 10% iii. Volulyte 6% iv. Voluven 6% v. Venofundin 6% d) Albumin <ul style="list-style-type: none"> i. Albumin 4.5% ii. Albumin 5%
Type of analysis	Cost Analysis

Clinical questions by scope area	What is the most clinical and cost effective fluid for intravenous fluid maintenance in hospitalised patients?
Population	In-hospital patients needing fluid maintenance (70kg patient, requiring 2 litres per day)
Interventions considered for inclusion	<p>a) sodium chloride 0.9%</p> <p>b) sodium chloride 0.9% with potassium(2G/27mmol)</p> <p>c) glucose 5%</p> <p>d) glucose 5% with potassium (2G/27mmol)</p> <p>e) Hartmann's solution</p> <p>f) Plasmalyte</p> <p>g) Ringer's lactate</p> <p>h) sodium chloride 0.18% in glucose 4%</p> <p>i) sodium chloride 0.18% in glucose 4% with potassium (2G/27mmol)</p> <p>j) sodium chloride 0.45% in glucose 5%</p> <p>Also, strategies that combine the above fluids by alternating between different types for the same patient. As with the other strategies, fluid was limited to 2L per patient per day but in the following ratios:</p> <p>k) 1L sodium chloride 0.9% to 2L glucose 5%</p> <p>l) 1L sodium chloride 0.9% to 2L glucose 5% with potassium (2G/27mmol)</p> <p>m) 1L Hartmann's solution to 1.5L glucose 5% with potassium (3G/40mmol)</p> <p>n) 1L Ringer's lactate to 1.5L glucose 5% with potassium (3G/40mmol)</p> <p>o) 2L sodium chloride 0.45% in glucose 5% with potassium to 0.5L sodium chloride 0.45% in glucose 5%</p>
Type of analysis	Cost Analysis