

# Chemistry in Dialysis Technology

Joe Johnston

Sr. VP Biomedical  
Services

Fresenius Medical Care

John Sweeny

Hemodialysis Technical  
Consultant

St. Petersburg, FL

# The Starting Point

The role of the biomedical technician is to:

- a) protect patients, through proper practice in the operation, repair and maintenance of the technology used in the clinic,
- b) bring transparency to the technology, so clinical and medical professionals can deliver the best care possible.

For many in our industry, technical is a “black box”.

# The Starting Point

If technical is a “black box”.....

then chemistry is a “black hole”.

# The Starting Point

**Chemistry** is a branch of physical science that studies the composition, structure, properties, interaction and change of matter.

All the everyday objects that we can bump into, touch or squeeze are ultimately composed of matter, and therefore, chemicals.

# The Starting Point

The matter around us is constantly moving, colliding, interacting and reacting with other matter.

In a tank of RO water, the molecules are moving continuously at fantastic speeds, and countless chemical reactions are occurring every instant. The water is in a state called “dynamic equilibrium”.

# Why Do I Need to Know Chemistry

- Patients are in “chemical imbalance”
- Chemical activity is fundamental to the dialysis treatment process.
- Many tasks and responsibilities in the clinic are “chemical” in nature

The good news is, you already use these chemical concepts everyday.

The bad news is, we're going to tell you about them anyway ...

Using math, science and other evil arts.

How many think you know the answer to the following questions:

Why there are 2 parts to the concentrate?

Why do you put bleach through the machine?

Why do we have a 24 hr. limit on mixed bicarb?

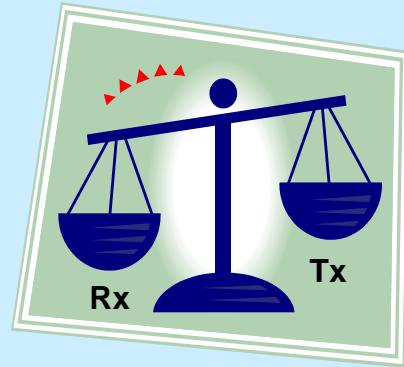
Why is the dialysate pH so important?



# Goals of this Workshop

Selected topics:

- Mixing concentrates from powder
- Dialysate chemistry
- Water quality and water purification systems
- Cleaning surfaces and equipment
- How Dialyzers and Machines Really Work



## Part 1

# Chemistry Principles and Mixing Concentrates

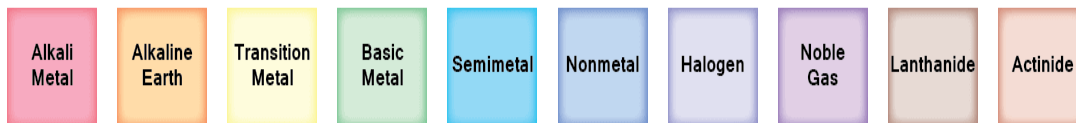
# Terminology

- Chemical Element – an atom or atoms all with the same atomic number (Hydrogen, Carbon, Oxygen, Gold)
- Atomic number – the number of protons in the nucleus.
- Atomic weight – The total weight of the atom including all neutrons, protons, and electrons.
- Molecule – a group of atoms (same or different elements), bonded together.
- Ion – an element or molecule that has gained or lost one or more electrons giving it an electrical charge

# Periodic Table of the Elements

1 1A 1A																	18 VIII A 8A
1 <b>H</b> Hydrogen 1.008	2 IIA 2A											13 IIIA 3A	14 IVA 4A	15 VA 5A	16 VIA 6A	17 VIIA 7A	2 <b>He</b> Helium 4.003
3 <b>Li</b> Lithium 6.941	4 <b>Be</b> Beryllium 9.012											5 <b>B</b> Boron 10.811	6 <b>C</b> Carbon 12.011	7 <b>N</b> Nitrogen 14.007	8 <b>O</b> Oxygen 15.999	9 <b>F</b> Fluorine 18.998	10 <b>Ne</b> Neon 20.180
11 <b>Na</b> Sodium 22.990	12 <b>Mg</b> Magnesium 24.305	3 IIIB 3B	4 IVB 4B	5 VB 5B	6 VIB 6B	7 VIIB 7B	8 VIII 8	9 VIII 8	10 VIII 8	11 IB 1B	12 IIB 2B	13 <b>Al</b> Aluminum 26.982	14 <b>Si</b> Silicon 28.086	15 <b>P</b> Phosphorus 30.974	16 <b>S</b> Sulfur 32.066	17 <b>Cl</b> Chlorine 35.453	18 <b>Ar</b> Argon 39.948
19 <b>K</b> Potassium 39.098	20 <b>Ca</b> Calcium 40.078	21 <b>Sc</b> Scandium 44.956	22 <b>Ti</b> Titanium 47.867	23 <b>V</b> Vanadium 50.942	24 <b>Cr</b> Chromium 51.996	25 <b>Mn</b> Manganese 54.938	26 <b>Fe</b> Iron 55.845	27 <b>Co</b> Cobalt 58.933	28 <b>Ni</b> Nickel 58.693	29 <b>Cu</b> Copper 63.546	30 <b>Zn</b> Zinc 65.38	31 <b>Ga</b> Gallium 69.723	32 <b>Ge</b> Germanium 72.631	33 <b>As</b> Arsenic 74.922	34 <b>Se</b> Selenium 78.971	35 <b>Br</b> Bromine 79.904	36 <b>Kr</b> Krypton 84.798
37 <b>Rb</b> Rubidium 84.468	38 <b>Sr</b> Strontium 87.62	39 <b>Y</b> Yttrium 88.906	40 <b>Zr</b> Zirconium 91.224	41 <b>Nb</b> Niobium 92.906	42 <b>Mo</b> Molybdenum 95.95	43 <b>Tc</b> Technetium 98.907	44 <b>Ru</b> Ruthenium 101.07	45 <b>Rh</b> Rhodium 102.906	46 <b>Pd</b> Palladium 106.42	47 <b>Ag</b> Silver 107.868	48 <b>Cd</b> Cadmium 112.411	49 <b>In</b> Indium 114.818	50 <b>Sn</b> Tin 118.711	51 <b>Sb</b> Antimony 121.760	52 <b>Te</b> Tellurium 127.6	53 <b>I</b> Iodine 126.904	54 <b>Xe</b> Xenon 131.294
55 <b>Cs</b> Cesium 132.905	56 <b>Ba</b> Barium 137.328	57-71	72 <b>Hf</b> Hafnium 178.49	73 <b>Ta</b> Tantalum 180.948	74 <b>W</b> Tungsten 183.84	75 <b>Re</b> Rhenium 186.207	76 <b>Os</b> Osmium 190.23	77 <b>Ir</b> Iridium 192.217	78 <b>Pt</b> Platinum 195.085	79 <b>Au</b> Gold 196.967	80 <b>Hg</b> Mercury 200.592	81 <b>Tl</b> Thallium 204.383	82 <b>Pb</b> Lead 207.2	83 <b>Bi</b> Bismuth 208.980	84 <b>Po</b> Polonium [208.982]	85 <b>At</b> Astatine 209.987	86 <b>Rn</b> Radon 222.018
87 <b>Fr</b> Francium 223.020	88 <b>Ra</b> Radium 226.025	89-103	104 <b>Rf</b> Rutherfordium [261]	105 <b>Db</b> Dubnium [262]	106 <b>Sg</b> Seaborgium [266]	107 <b>Bh</b> Bohrium [264]	108 <b>Hs</b> Hassium [269]	109 <b>Mt</b> Meitnerium [268]	110 <b>Ds</b> Darmstadtium [269]	111 <b>Rg</b> Roentgenium [272]	112 <b>Cn</b> Copernicium [277]	113 <b>Uut</b> Ununtrium unknown	114 <b>Fl</b> Flerovium [289]	115 <b>Uup</b> Ununpentium unknown	116 <b>Lv</b> Livermorium [298]	117 <b>Uus</b> Ununseptium unknown	118 <b>Uuo</b> Ununoctium unknown

Lanthanide Series	57 <b>La</b> Lanthanum 138.905	58 <b>Ce</b> Cerium 140.116	59 <b>Pr</b> Praseodymium 140.908	60 <b>Nd</b> Neodymium 144.243	61 <b>Pm</b> Promethium 144.913	62 <b>Sm</b> Samarium 150.36	63 <b>Eu</b> Europium 151.964	64 <b>Gd</b> Gadolinium 157.25	65 <b>Tb</b> Terbium 158.925	66 <b>Dy</b> Dysprosium 162.500	67 <b>Ho</b> Holmium 164.930	68 <b>Er</b> Erbium 167.259	69 <b>Tm</b> Thulium 168.934	70 <b>Yb</b> Ytterbium 173.055	71 <b>Lu</b> Lutetium 174.967
Actinide Series	89 <b>Ac</b> Actinium 227.028	90 <b>Th</b> Thorium 232.038	91 <b>Pa</b> Protactinium 231.036	92 <b>U</b> Uranium 238.029	93 <b>Np</b> Neptunium 237.048	94 <b>Pu</b> Plutonium 244.064	95 <b>Am</b> Americium 243.061	96 <b>Cm</b> Curium 247.070	97 <b>Bk</b> Berkelium 247.070	98 <b>Cf</b> Californium 251.080	99 <b>Es</b> Einsteinium [254]	100 <b>Fm</b> Fermium 257.095	101 <b>Md</b> Mendelevium 258.1	102 <b>No</b> Nobelium 259.101	103 <b>Lr</b> Lawrencium [262]



# Terminology

- Mole
  - International measure of quantity
  - $6.023 \times 10^{23}$  (about 600 septillion)
  - Known as Avogadro's Number
  - Used to measure a quantity of atoms or molecules
  - Generally expressed in moles per liter for aqueous solutions

# Terminology

- **Gram Atomic Weight**

- The weight of one mole of a particular atom expressed in grams.
- Gram Atomic Weights of dialysate atoms:

Sodium (Na) = 23.00

Chlorine (Cl) = 35.45

Potassium (K) = 39.10

Carbon (C) = 12.01

Hydrogen (H) = 1.008

Oxygen (O) = 16.00

Magnesium (Mg) = 24.31

Calcium (Ca) = 40.08

# Terminology

- **Gram Molecular Weight**

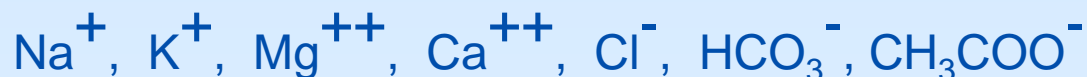
- The weight of one mole of a particular molecule expressed in grams.
- Molecular weights are the sum of the atomic weights of the atoms in the molecule.
- Sodium Chloride (NaCl) molecular weight =  
 $\text{Na} + \text{Cl} = 23.00 + 35.45 = 58.45 \text{ grams}$
- Sodium Bicarbonate ( $\text{NaHCO}_3$ ) =  
 $23.00 + 1.008 + 12.01 + 3(16.00) = 84.018 \text{ grams}$

# Terminology

- **Equivalent (Eq):**

- One mole of “activity” or charge (positive or negative).

- Charges of the dialysate ions:



- One mole of  $\text{Na}^+$  ions = 1 Equivalent

- One half mole of  $\text{Ca}^{++}$  ions = 1 Equivalent

- 1/1000 Equivalent = 1 milliequivalent = mEq

- 1 milliequivalent/liter = mEq/L

- The number of positive charges in a solution always equals the number of negative charges



# A Mixture vs. a Solution

- Mixture – a combination of components that are not in a fixed ratio. Different parts of the mixture may have different ratios of its components
  - These components can all be solids such as dirt or sand.
  - Liquid mixtures can contain solids that are insoluble but in suspension such a milk, beer, or some medications.
- Solution – a solid, liquid or gas where the components are distributed uniformly within the mixture
- Solution = Solvent + Solute
  - Solvent – larger component – the dissolver
  - Solute – smaller component – the dissolvee

# Dialysate Concentrate

- Created to simplify the preparation of dialysate.
- Solution made as concentrated as possible to reduce shipping costs and ease of handling.
- Sodium and Chlorides must be within  $\pm 2\%$  of the container label.
- All other compounds must be within  $\pm 5\%$  of the container label or 0.1 mEq/L, (whichever is larger).

# Albert Leslie Babb



- ▶ Univ. of British Columbia – 1948  
B.S. Chemical Engineering
- Univ. of Illinois – 1951  
PhD – Chemical Engineering
- Univ. of Washington – 1961-1981  
Head of Nuclear Engineering Dept.
- Created 1<sup>st</sup> Proportioning Dialysis  
Machine in 1963
- Created 1<sup>st</sup> Home Dialysis Machine  
in 1964
- ▶ Nominated for Noble Prize in 1977
- ▶ Professor Emeritus - 1992

# Concentrate Proportioning Ratios

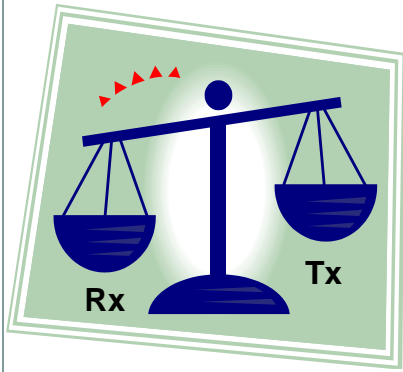
COMPANY	PARTS ACID	PARTS BICARB	PARTS WATER	PARTS DIALYSATE
Drake - Willock	1.00	1.83	34.00	36.83X
Cobe Laboratories	1.00	1.72	42.28	45X
Fresenius	1.00	1.225	32.775	35X
-----	1.00	1.10	34.00	36.1X

# Concentrate Dilution Factors

COMPANY	ACID DILUTION	BICARB DILUTION	BICARB CALCULATION
Drake - Willock	36.83X 1:35.83	20.13X 1:19.13	$36.83/1.83 =$ 20.13
Cobe Laboratories	45X 1:44	26.16X 1:25.13	$45/1.72 =$ 26.16
Fresenius	35X 1:34	28.57X 1:27.57	$35/1.225 =$ 28.57
-----	36.1X 1:35.1	32.81X 1:31.81	$36.1/1.10 =$ 32.81

The first proportioning ratio (34:1) for acetate dialysate was established by a Canadian Engineer, Albert L Babb in 1963 at the University of Washington in Seattle.

# Application Examples



## Part 1

- **Making a solution**
- **Concentrate label information**
- **Calculations for concentrates**
- **3 - stream proportioning**

# Application Lab

96 liters of water plus 7807 g. Sodium Bicarbonate

Does NOT equal

7807 g in 96 liter of solution

96 liters

Does not equal

25 gallons



# Bicarbonate Concentrate

**WARNING:** For use only with three-stream proportioning bicarbonate systems when calibrated to proportion 1 part acid to 44 parts bicarbonate base and water. Use with other equipment or without associated acid concentrate may cause patient injury or death. **NOT FOR PARENTERAL USE.**

Catalog No. 08-4112-2

45x

# NaturaLyte®

## 4000 Rx-12

Dry Pack for Bicarbonate Dialysis

**Ionic Composition of Bicarbonate concentrate:**  
(Nominal dilution 1:1.72:42.28)

**Sodium** 37 mEq/L  
**Bicarbonate** 37 mEq/L

One bag of NaturaLyte® 4000 Rx-12 dry pack, when used in conjunction with NaturaLyte® 4000 Series Acid formulation or equivalent, will produce enough dialyzing fluid for approximately twelve 7 hour time periods at a maximum flow rate of 500 ml/min.

**Chemical Composition:**

7807 g. Sodium Bicarbonate, U.S.P., Dissolved 81.3 g/L.

**Caution:** Federal (USA) law restricts this device to sale by or on order of a physician.

**DO NOT USE IF PACKAGING IS DAMAGED OR BAG SEAL IS BROKEN.**

**RECOMMENDED STORAGE:**  
**PROTECT FROM EXCESSIVE HEAT AND FREEZING.**



Fresenius Medical Care 1-800-323-5188

Fresenius Medical Care NA  
Waltham, MA 02451

**Directions for Use:**

1. To mix NaturaLyte® 4000 Rx-12 dry pack, add 90 liters of purified water to the NaturaLyte® Mixer (Cat. No. 150406) or equivalent container with approx. 100 liter capacity. Container must be free of bacterial and chemical contamination (current AAMI). Use purified water that meets or exceeds current AAMI hemodialysis water quality standards. Water temperature should be 24°C ±2°C.
2. Empty entire NaturaLyte® 4000 Rx-12 dry pack into the water gradually while gently mixing the solution. Mix for 1 minute after the powder has been added. **NOTE:** Do not overmix. Vigorous mixing can drive carbon dioxide from the solution and is not recommended. If mixing is manual, it may be easier to dissolve one-third of the bag at a time. Use entire contents of bag.
3. Add water for a total volume of 96 liters. Mix again for approx. 10 minutes. Ensure that the powder is dissolved in solution.
4. Refer to the directions for use provided in the dialysis machine operator's manual regarding the use of bicarbonate concentrate. Check conductivity and pH of dialyzing fluid before starting treatment and each time solution is added (current AAMI).

**NOTE:** This bicarbonate base concentrate should be used within 24 hours of mixing. Storage in a closed container is recommended to minimize CO<sub>2</sub> loss and resulting precipitation in dialysis equipment. Bacterial growth may occur when using bicarbonate concentrate.



08-4112-2



# Bicarbonate Concentrate

**WARNING:** For use only with three-stream proportioning bicarbonate systems when calibrated to proportion 1 part acid to 44 parts bicarbonate base and water. Use with other equipment or without associated acid concentrate may cause patient injury or death. NOT FOR PARENTERAL USE.

Catalog No. 08-4112-2

**45x** Naturalyte® 4000 Rx-12  
Dry Pack for Bicarbonate Dialysis

**Ionic Composition of Bicarbonate concentrate:**  
(Nominal dilution 1:1.72:42.28)

<b>Sodium</b>	<b>37 mEq/L</b>
<b>Bicarbonate</b>	<b>37 mEq/L</b>

One bag of Naturalyte® 4000 Rx-12 dry pack when used in conjunction with Naturalyte® 4000 Sterile Acid Concentrate is equivalent to 4000 mg sodium bicarbonate per liter for approximately 1000 mL final volume at a replacement flow rate of 500 mL/hr.

**Chemical Composition:**  
7507 g Sodium Bicarbonate, USP, 450 mg/ml (37 mEq/L)

**Caution:** Perform USAI flow restriction device to suit by an order of a physician.

**DO NOT USE IF PACKAGING IS DAMAGED OR BAG SEAL IS BROKEN.**  
**RECOMMENDED STORAGE:**  
**PROTECT FROM EXCESSIVE HEAT AND FREEZING.**

Fresenius Medical Care NA  
Waltham, MA 02451  
Fresenius Medical Care 1-800-323-5188

**Directions for Use:**

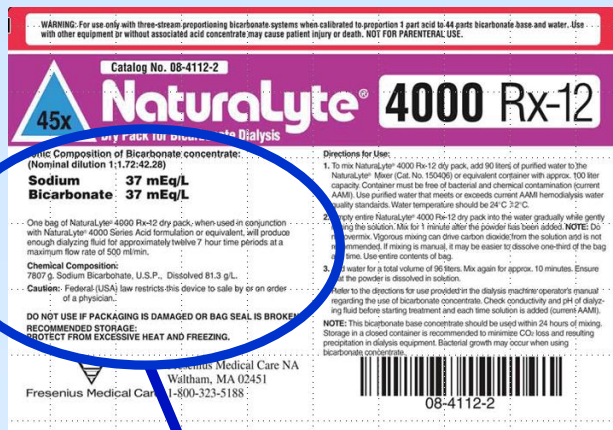
1. To mix Naturalyte® 4000 Rx-12 dry pack, add 90 liters of purified water to the Naturalyte® 4000 Rx-12 dry pack. (See package insert for more information.)
2. Empty one Naturalyte® 4000 Rx-12 dry pack into the water continuously until the dry pack is completely dissolved. (NOTE: Do not vacuum degas the solution.)
3. Add water to a total volume of 90 liters. (See package insert for more information.)
4. Refer to the directions for use printed on the sterile bicarbonate concentrate container regarding the use of bicarbonate concentrate. Use at conductivity 100 µM at dialysis flow during starting treatment and each time solution is added (see package insert).

**NOTE:** The bicarbonate base concentration is 450 mg/L (37 mEq/L) per liter of solution. Storage in a closed container is recommended to minimize CO<sub>2</sub> loss and resulting precipitation in dialysis equipment. This factor greatly may impact when using bicarbonate concentrate.

08-4112-2

Warning: For use with three-stream proportioning systems when calibrated to proportion 1 part acid to 44 parts bicarbonate base and water. Use with other equipment or without associated acid concentrate may cause patient injury or death. NOT FOR PARENTERAL USE.

# Bicarbonate Concentrate



Ionic Composition of Bicarbonate concentrate:  
(Nominal dilution 1 : 1.72 : 42.28)

**Sodium 37 mEq/L**  
**Bicarbonate 37 mEq/L**

.....  
**Chemical Composition:**

7807 g. Sodium Bicarbonate U.S.P. Dissolved 81.3 g/L

**Contribution to the  
preparation of dialysate**

**0.9677 M  
solution or 967.7  
mEq**

# Application Lab

## **Chemical Composition:**

7807 g. Sodium Bicarbonate U.S.P. Dissolved 81.3 g/L

**7807 g in total of 96 liters =  $7807/96 = 81.3229$  g/L**

**Gram formula weight of  $\text{NaHCO}_3 = 84$  grams per mole**

**$81.3 \text{ g/L} / 84 \text{ g/mole} = .9677$  moles / liter or  $967.7 \text{ mmol} / \text{L}$**

**Bicarb has a charge (valance) of 1, so  $967.7 \text{ mmol/L} = 967.7 \text{ mEq/L}$**

# Application Lab

Ionic Composition of Bicarbonate concentrate:

(Nominal dilution 1 : 1.72 : 42.28) → **note: the total is 45**

**Sodium**        **37 mEq/L**

**Bicarbonate** **37 mEq/L**

**Start with a bicarb concentrate properly made at = 967.7 mEq/L**

**There are 1.72 parts bicarb concentrate in a total dilution of 45 parts**

$$\frac{(967.7 \text{ mEq/L} * 1.72)}{45} = 36.987 \text{ mEq/L of Sodium Bicarbonate}$$

**When dissolved,**

**37 mEq/L each of sodium ion (Na<sup>+</sup>) and bicarbonate ion (HCO<sub>3</sub><sup>-</sup>)**



# Acid Concentrate

## GRANUFLO®

### Naturalyte® Dry Acid Concentrate For Bicarbonate Dialysis

45X

NON-PYROGENIC

62.5 LITER MIX (1.65 GAL)

**WARNING:** Acid concentrate is formulated to be used in a three-stream hemodialysis machine calibrated to an acid concentrate dilution of 1:44. Use with other equipment may result in patient injury. NOT FOR PARENTERAL USE. For use only with Naturalyte® 4000 Series Bicarbonate or equivalent (refer to label). Use of this Acid Concentrate without associated bicarbonate concentrate may cause patient injury or death. Check conductivity and pH of dialysate just prior to dialysis treatment and each time new concentrate is supplied to the machine.

IONIC CONTRIBUTION OF ACID CONCENTRATE: (Nominal Dilution 1:44)

SODIUM	100 mEq/L
POTASSIUM	2.0 mEq/L
CALCIUM	2.25 mEq/L
MAGNESIUM	0.75 mEq/L
ACETATE	8 mEq/L
CHLORIDE	101.0 mEq/L
DEXTRSE	100 mg/dL

CHEMICAL COMPOSITION

Total		21.6 kg
NaCl		15.8 kg
KCl		0.42 kg
CaCl <sub>2</sub> ·2H <sub>2</sub> O		0.47 kg
MgCl <sub>2</sub> ·6H <sub>2</sub> O		0.21 kg
CH <sub>3</sub> COONa·CH <sub>3</sub> COOH		1.60 kg
C <sub>6</sub> H <sub>12</sub> O <sub>6</sub> ·H <sub>2</sub> O		3.1 kg

#### DILUTION INSTRUCTIONS

(The contents may clump or harden which does not affect product chemical composition)

- Use water that meets or exceeds current ANSI/AAMI hemodialysis water quality standards. Water temperature should be 20°–30° C to optimize dissolving.
- Add approximately 10 gallons of water to mixing container. Water and feed line must be free of bacterial and chemical contamination (ANSI/AAMI).
- Use entire contents of each bag (3) within this box. Do not use unless all (3) bags are present. The contents of the bags are different. All bags must be used.
- NOTE: Refer to Dissolution System Operator's Manual. Label tank with contents and date prepared.
- Add additional water to dissolution tank until full level.
- Fully dissolved, this will make 62.5 liters (16.5 gal) of solution. Eight (8) cases of identical chemical composition produce 500 liters (132 gal). Six (6) cases make 375 liters (99 gal).
- Mix solution until completely dissolved. Filter with 1.2 micron filter or finer before use. Keep container sealed. Label and date all storage containers.

**CAUTION:** Refer to instructions provided by the hemodialysis machine manufacturer. Federal law (USA) restricts this device to sale by or on order of a physician. AVOID EXCESSIVE TEMPERATURE. STORE IN DRY LOCATION. DO NOT USE IF PACKAGE IS OPEN OR DAMAGED.



Fresenius Medical Care



Cat. No. 0FD2223-3B

Fresenius Medical Care NA  
Waltham, MA 02451  
1-800-323-5198

Fresenius USA 75-024221 3229

2.0 K

**WARNING: NOT FOR PARENTERAL USE.** Use of this Acid Concentrate without the associated Bicarbonate Concentrate may cause patient injury or death.

2.5 Ca

45X

## CITRASATE®

1-gallon (3.785 liters)  
08-2251-CA  
Acid Concentrate Liquid for Bicarbonate Dialysis

Dialysate Concentration

Not including bicarbonate concentrate  
(Nominal Dilution 1:44)

SODIUM	100.3 mEq/L
POTASSIUM	2.0 mEq/L
CALCIUM	2.5 mEq/L
MAGNESIUM	1.0 mEq/L
CITRATE	2.4 mEq/L
ACETATE	0.3 mEq/L
CHLORIDE	105.5 mEq/L
DEXTRSE	100 mg/dL

Chemical Composition  
Acid Concentrate (gram/Liter)  
(pre-dilution)

NaCl	263.00 g/L
KCl	6.71 g/L
CaCl <sub>2</sub>	6.24 g/L
MgCl <sub>2</sub>	2.14 g/L
C <sub>6</sub> H <sub>12</sub> O <sub>6</sub>	6.92 g/L
Na <sub>2</sub> C <sub>2</sub> H <sub>3</sub> O <sub>2</sub>	1.11 g/L
C <sub>6</sub> H <sub>12</sub> O <sub>6</sub>	45.00 g/L

Manufactured for:  
Advanced Renal Technologies  
40 Lake Bellevue, Suite 100  
Bellevue, WA 98005

Citrasate® is a registered trademark of  
Advanced Renal Technologies.  
US patent 6,510,206 and others applied for.

LOT NO.  
EXPIRATION  
DATE:

NON-PYROGENIC  
AVOID EXCESSIVE HEAT AND PROTECT FROM FREEZING

**Description for Use:** For use with FMCNA 45X sodium bicarbonate with a three-stream hemodialysis machine set for 45X. Use only with purified water that meets ANSI/AAMI RD62 or ISO 13959 standards for dialysis water. When 1 part acid concentrate is mixed with 1.72 parts of bicarbonate concentrate and 42.28 parts purified water, the final ionic contribution in the Final Dialysate is: Sodium 137 mEq/L and Bicarbonate\* 34.6 mEq/L (\*pre-reaction bicarbonate: 37 mEq/L). All other constituents remain unchanged.

**CAUTION:** Refer to instructions provided by the hemodialysis machine manufacturer. Check conductivity and pH of final dialysate just prior to dialysis treatment and each time new concentrate is supplied to the machine. Refer to manufacturer for nominal conductivity of final dialysate. Use only as directed. Mix thoroughly before use. Keep container sealed when not in use. Federal law (USA) restricts this device to sale by or on the order of a physician.

Do not use if seals or containers are damaged.

MANUFACTURER/DISTRIBUTOR:

Fresenius Medical Care NA  
Waltham, MA 02451  
1-800-323-5188

Fresenius Medical Care

FMCNA CATALOG NO. 08-2251-CA

ART Formula Code: **CS-2502-01**



Printed in U.S.A. 71-4373.02 07/12

2.0 K

**WARNING:** For use only with three-stream prepackaging systems when calibrated to proportion 1 part acid to 44 parts bicarbonate base and water. Use with other equipment or without associated bicarbonate concentrate may cause patient injury or death. NOT FOR PARENTERAL USE.

2.5 Ca

Catalog No. 08-2251-0

3.43 Liters

45X

## Naturalyte® 2251

Acid Concentrate for Bicarbonate Dialysis

Ionic Contribution of Acid Concentrate  
(Nominal Dilution 1:44)

SODIUM	100 mEq/L
POTASSIUM	2.0
CALCIUM	2.5
MAGNESIUM	1.0
ACETATE	4.0
CHLORIDE	105.50
DEXTRSE	100 mg/dL

Chemical Composition  
Acid Concentrate (gm/L)

NaCl	263 g	MgCl <sub>2</sub>	2.14 g
KCl	6.71 g	CH <sub>3</sub> CO <sub>2</sub> H	10.8 g
CaCl <sub>2</sub>	6.24 g	C <sub>6</sub> H <sub>12</sub> O <sub>6</sub>	45.0 g

Fresenius Medical Care NA  
Waltham, MA 02451  
Fresenius Medical Care 1-800-323-5188

LOT NO.  
EXPIRATION  
DATE:



Printed in U.S.A. 71-4318.01 09/11

NON-PYROGENIC

**Nominal Dialysate Composition:** When 1 part acid concentrate is mixed with 1.72 parts base concentrate (Naturalyte® 4000 Series bicarbonate) and 42.28 parts water, the final ionic composition is: sodium 137 mEq/L; chloride 105.50 mEq/L; and net bicarbonate 33 mEq/L. All other constituents remain unchanged.

**CAUTION:** Proper Dilution: Use purified water that meets or exceeds current ANSI/AAMI hemodialysis water quality standards. Refer to the directions for use provided in the dialysis machine operator's manual. Check conductivity (information is available from manufacturer) and pH of dialyzing fluid before starting treatment and each time solution is added. Use only as directed. Recommended Storage: Avoid excessive heat and protect from freezing. Do not use if seals or container are damaged. Mix thoroughly before use. Keep container tightly closed when not in use.

**CAUTION:** Federal law (USA) restricts this device to sale by or on the order of a physician.

# Acid Concentrate

2.0 K

WARNING: For use only with three-stream proportioning systems when calibrated to proportion 1 part acid to 44 parts bicarbonate base and water. Use with other equipment or without associated bicarbonate concentrate may cause patient injury or death. NOT FOR PARENTERAL USE.

2.5 Ca

Catalog No. 08-2251-0

3.43 Liters

45x

**Naturalyte® 2251**  
Acid Concentrate for Bicarbonate Dialysis

Ionic Contribution of Acid Concentrate  
(Nominal Dilution 1:44)

<b>SODIUM</b>	137	mEq/L
<b>POTASSIUM</b>	2.0	
<b>CALCIUM</b>	2.5	
<b>MAGNESIUM</b>	1.0	
<b>ACETATE</b>	4.0	
<b>CHLORIDE</b>	105.50	
<b>DEXTROSE</b>	180	mg/dL

Chemical Composition  
Acid Concentrate (gm/L)

<b>NaCl</b>	263g	<b>MgCl<sub>2</sub></b>	2.14g
<b>KCl</b>	6.71g	<b>CH<sub>3</sub>CO<sub>2</sub>H</b>	10.8g
<b>CaCl<sub>2</sub></b>	6.24g	<b>C<sub>6</sub>H<sub>12</sub>O<sub>6</sub></b>	45.0g

Fresenius Medical Care NA  
Waltham, MA 02451  
Fresenius Medical Care 1-800-323-5188

LOT NO:  
EXPIRATION  
DATE:



Printed in U.S.A. 71-4318.01 09/11

## NON-PYROGENIC

**Nominal Dialysate Composition:** When 1 part acid concentrate is mixed with 1.72 parts base concentrate (Naturalyte® 4000 Series bicarbonate) and 42.28 parts water, the final ionic composition is: sodium 137 mEq/L; chloride 105.50 mEq/L; and net bicarbonate 33 mEq/L. All other constituents remain unchanged.

## CAUTION:

**Proper Dilution:** Use purified water that meets or exceeds current ANSI/AAMI hemodialysis water quality standards. Refer to the directions for use provided in the dialysis machine operator's manual. Check conductivity (information is available from manufacturer) and pH of dialyzing fluid before starting treatment and each time solution is added.

**Use only as directed. Recommended Storage:** Avoid excessive heat and protect from freezing. Do not use if seals or container are damaged. Mix thoroughly before use. Keep container tightly closed when not in use.

**CAUTION:** Federal law (USA) restricts this device to sale by or on the order of a physician.

3-stream proportioning with 1:45 (or 1+44) dilution

Ionic Contribution to dialysate

... final ionic composition ...  
Na<sup>+</sup> 137 mEq/L ... net bicarb 33 mEq/L

\* see 3-stream propor. slide

...as a concentrate

# Application Lab

**Chemical Composition:** (from the concentrate label) = 6.24 g/L Calcium Chloride

**Gram formula weight of  $\text{CaCl}_2$  = 111 grams per mole**

**6.24 g/L / 111 g/mole = ..056216 moles / liter or 56.216 mmol / L**

**Calcium has a charge (valance) of 2, so 56.216 mmol/L = 112.43 mEq/L**

**As dialysate:**

**Start with an acid concentrate at 112.43 mEq/L**

**There is 1 part acid concentrate in a total dilution of 45 parts**

$$\frac{(112.43 \text{ mEq/L} * 1)}{45} = 2.4984 \text{ mEq/L of Calcium Chloride}$$



# Acid Concentrate

**2.0 K GRANUFLO® 2.5 Ca**

**Naturalyte® Dry Acid Concentrate  
For Bicarbonate Dialysis**

**45x**

**NON-PYROGENIC**

62.5 LITER MIX (16.5 GAL)

**WARNING:** Acid concentrate is formulated to be used in a three-stream hemodialysis machine calibrated to an acid concentrate dilution of 1:44. Use with other equipment may result in patient injury. NOT FOR PARENTERAL USE. For use only with Naturalyte® 4000 Series Bicarbonate or equivalent (refer to label). Use of this Acid Concentrate without associated bicarbonate concentrate may cause patient injury or death. Check conductivity and pH of dialysate just prior to dialysis treatment and each time new concentrate is supplied to the machine.

#### IONIC CONTRIBUTION OF ACID

CONCENTRATE: (Nominal Dilution 1:44)

<b>SODIUM</b>	<b>100</b> mEq/L
<b>POTASSIUM</b>	<b>2.0</b> mEq/L
<b>CALCIUM</b>	<b>2.5</b> mEq/L
<b>MAGNESIUM</b>	<b>1.0</b> mEq/L
<b>ACETATE</b>	<b>8.0</b> mEq/L
<b>CHLORIDE</b>	<b>101.50</b> mEq/L
<b>DEXTROSE</b>	<b>100</b> mg/dL

#### CHEMICAL COMPOSITION

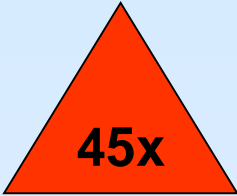
Total

	<b>21.7</b> kg
<b>NaCl</b>	<b>15.8</b> kg
<b>KCl</b>	<b>0.419</b> kg
<b>CaCl<sub>2</sub>*2H<sub>2</sub>O</b>	<b>0.517</b> kg
<b>MgCl<sub>2</sub>*6H<sub>2</sub>O</b>	<b>0.286</b> kg
<b>CH<sub>3</sub>COONa-CH<sub>3</sub>COOH</b>	<b>1.60</b> kg
<b>C<sub>6</sub>H<sub>12</sub>O<sub>6</sub>*H<sub>2</sub>O</b>	<b>3.09</b> kg

DILUTION INSTRUCTIONS



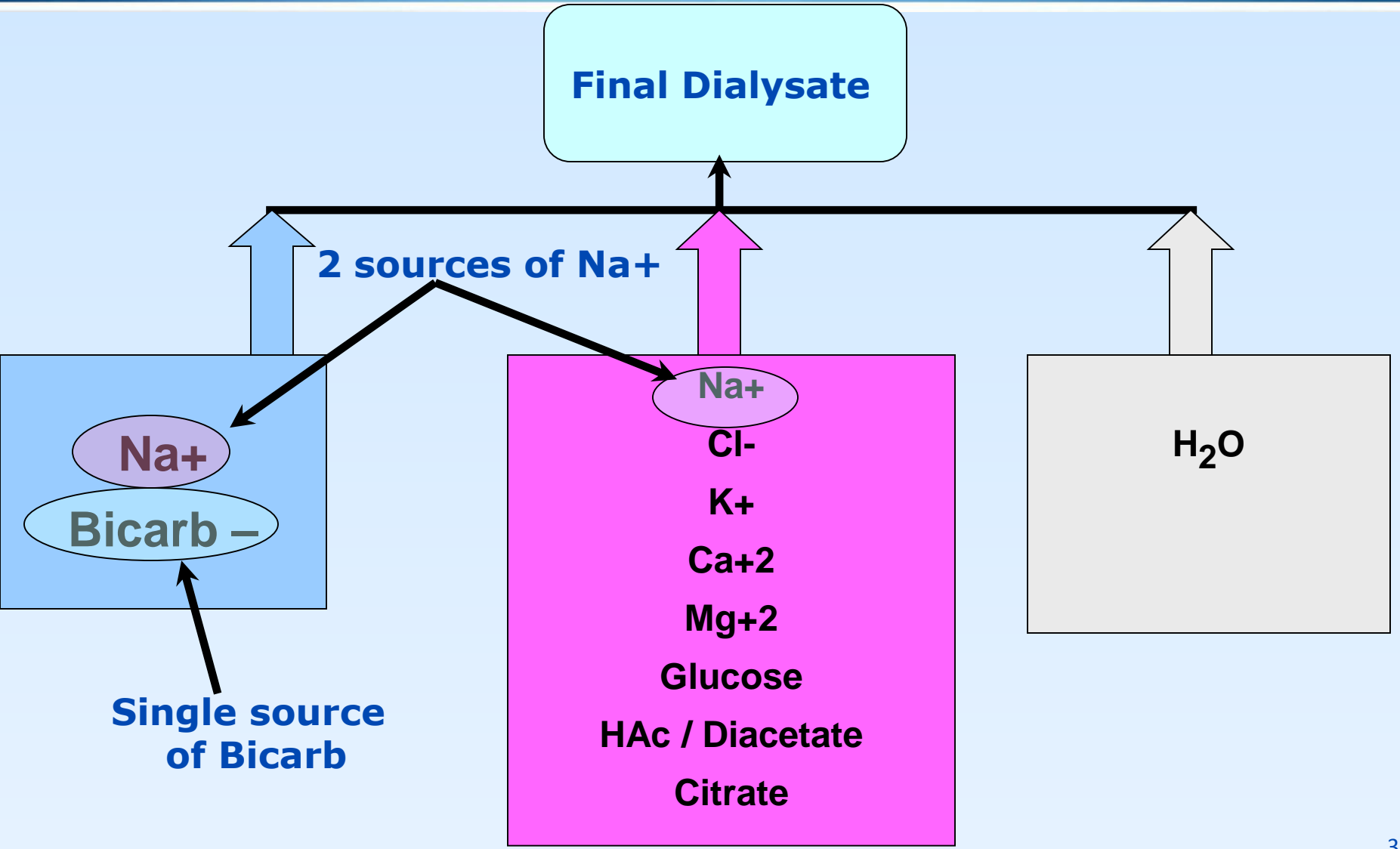
# Proportioning

Type	Symbol	Mixing Ratio Acid : Bicarb : Water	Post Reaction Na <sup>+</sup> / Bicarb
Cobe		<b>1.00</b> : <b>1.72</b> : <b>42.28</b>	<b>[137]</b> / <b>[33]</b>

Default proportioning – at 137/33, this is the relative amounts of each stream. If these Na<sup>+</sup> and bicarb settings are used, you will get the concentrations on the acid label in the final dialysate

Post reaction – with Fresenius machines, bicarb concentration is always given as the result post acid-base mixing were lost as CO<sub>2</sub>. The Na<sup>+</sup> doesn't go away.

# Three stream proportioning



# Concentrate Proportioning

## 3 stream proportioning

100 from acid, 37 from bicarb !

Setting	Actual
Na <sup>+</sup> 137 mEq/L	Na <sup>+</sup> 137 mEq/L
K <sup>+</sup> 2 mEq/L	K <sup>+</sup> 2 mEq/L
Ca <sup>+2</sup> 2.5 mEq/L	Ca <sup>+2</sup> 2.5 mEq/L
Mg <sup>+2</sup> 1.0 mEq/L	Mg <sup>+2</sup> 1.0 mEq/L
Ac <sup>-</sup> 4.0 mEq/L	Ac <sup>-</sup> 4.0 mEq/L
Bic <sup>-</sup> 33 mEq/L	Bic <sup>-</sup> 33 mEq/L

For Fresenius machines, this is “post reaction bicarb”

# Concentrate proportioning

## 3 stream proportioning

Setting/Label		Actual
Na <sup>+</sup> 140 mEq/L	→	Na <sup>+</sup> 140 mEq/L
K <sup>+</sup> 2 mEq/L		K <sup>+</sup> 2.06 mEq/L
Ca <sup>+2</sup> 2.5 mEq/L		Ca <sup>+2</sup> 2.57 mEq/L
Mg <sup>+2</sup> 1.0 mEq/L		Mg <sup>+2</sup> 1.03 mEq/L
Ac <sup>-</sup> 4.0 mEq/L		Ac <sup>-</sup> 4.12 mEq/L
Bic <sup>-</sup> 33 mEq/L	→	Bic <sup>-</sup> 33 mEq/L

# Concentrate proportioning

## 3 stream proportioning

Setting/Label		Actual
Na <sup>+</sup> 137 mEq/L	→	Na <sup>+</sup> 137 mEq/L
K <sup>+</sup> 2 mEq/L		K <sup>+</sup> 1.96 mEq/L
Ca <sup>+2</sup> 2.5 mEq/L		Ca <sup>+2</sup> 2.45 mEq/L
Mg <sup>+2</sup> 1.0 mEq/L		Mg <sup>+2</sup> 0.98 mEq/L
Ac <sup>-</sup> 4.0 mEq/L		Ac <sup>-</sup> 3.92 mEq/L
Bic <sup>-</sup> 35 mEq/L	→	Bic <sup>-</sup> 35 mEq/L

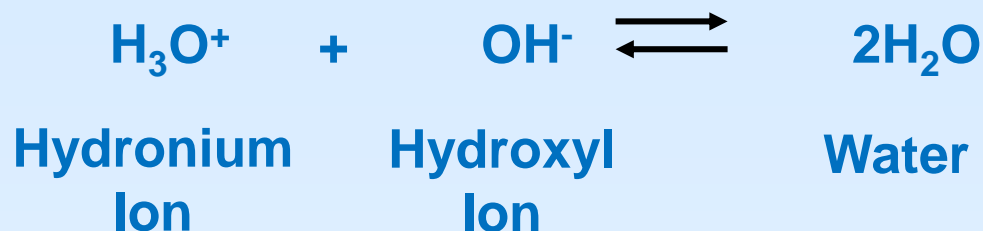


## Part 2

# More on Dialysate Chemistry

# pH

- Unit of measure that describes the degree of acidity or alkalinity of a solution
- Represented as the negative logarithm of the Hydrogen ion [hydronium ion] concentration or activity



- When the Hydronium and Hydroxyl ion concentrations are equal, the solution is neutral and has a pH of 7.0 (0.0000001 mole/liter)

# pH

- Acids have a pH below 7.0 (Higher H<sub>3</sub>O<sup>+</sup>)
- Bases have a pH above 7.0 (Lower H<sub>3</sub>O<sup>+</sup>)
- A pH increase of only 0.3 means the concentration of H<sub>3</sub>O<sup>+</sup> has doubled
- The pH of various solutions:
  - Blood = 7.35 – 7.45
  - Urine = 6.5 – 8.0
  - Baking Soda = 8.4
  - Vinegar = 2.9
  - Dialysate = 7.00 – 7.40
  - Bleach = 12.6 (more on this later)\*\*
  - Sea Water = 8.0
- Measurement of pH
  - pH paper color indicators - limited accuracy
  - pH electrodes – AAMI recommended



# Blood pH Relationships

Blood pH is directly related to the concentrations of bicarbonate and carbon dioxide in the blood. The relationship is defined by the Henderson-Hasselbalch Equation:

$$\text{pH} = \text{pK} + \log \frac{[\text{HCO}_3^-]}{0.03 \times \text{pCO}_2}$$

Where: pK = the blood pH from acids in the blood

$\text{HCO}_3^-$  = bicarb concentration (mEq/L)

$\text{pCO}_2$  = carbon dioxide pressure (mmHg)

# Solving the equation

Blood normal values for  $pK$ ,  $HCO_3^-$ , and  $pCO_2$  are:

$$pK = 6.1, HCO_3^- = 24 \text{ mEq/L, and } pCO_2 = 40 \text{ mmHg}$$

Placing these values in the equation yields:

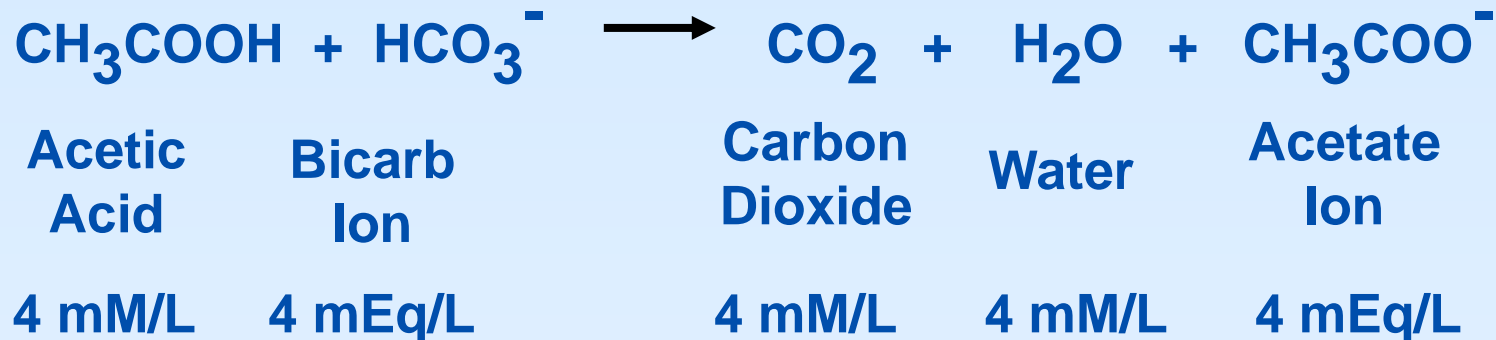
$$\text{Blood pH} = 6.1 + \log \left( \frac{24 \text{ mEq/L}}{0.03 \times 40 \text{ mmHg}} \right)$$

$$\text{Blood pH} = 6.1 + \log \left( \frac{24}{1.2} \right)$$

$$\text{Blood pH} = 6.1 + \log (20) = 6.1 + 1.3 = 7.4$$

# The Acid/Bicarbonate Reaction

When the Acetic Acid in the Acid concentrate mixes with the Bicarbonate ion in the Bicarb concentrate the following reaction occurs:



(“classic” acid – base neutralization reaction)

\*\*\*\* For 45X concentrates the 37 mEq/L concentrate becomes 33 mEq/L in the final dialysate solution. \*\*\*\*

# Why would a technician want to use bicarb dialysate?

- It requires two concentrates instead of one
- It adds more complexity to the machine making it harder to troubleshoot
- There is more testing necessary before you can start the treatment = more gadgets to calibrate
- It increases the chances of precipitation inside the fluid path = more vinegar/more bleach
- More concentrate storage means less workspace in the back room
- It makes the machine more costly which means less money for other technical instruments

# Why? It's all about the patient!

- ▶ When acetate dialysate is used instead of bicarbonate dialysate, bicarbonate is dialyzed out of the patient and acetate is dialyzed in.
- ▶ As the bicarbonate is reduced, carbon dioxide combines with water to make more bicarbonate.
- ▶ The carbon dioxide reduction decreases the amount reaching the lungs.
- ▶ Low  $\text{CO}_2$  in the lungs results in lower breathing rates.
- ▶ Less breathing lowers the oxygen levels in the lungs and blood.
- ▶ The patient may require oxygen and in extreme cases can go into cardiac arrest.
- ▶ At the end of the treatment the patient feels like an individual with a hangover and goes home to rest until the acetate is converted back to bicarbonate. (Krebs cycle)

# Dialysate Chemistry vs. Blood Chemistry (mEq/Liter)

<b>Constituent</b>	<b>Dialysate</b>	<b>Blood</b>
<b>Sodium</b>	<b>132 – 150</b>	<b>136 – 148</b>
<b>Potassium</b>	<b>0.0 – 4</b>	<b>3.5 – 5</b>
<b>Calcium</b>	<b>2.5 – 4.0</b>	<b>4.25 – 5.25</b>
<b>Magnesium</b>	<b>0.5 – 1.5</b>	<b>1.5 – 2.5</b>
<b>Chloride</b>	<b>100 - 110</b>	<b>95 - 103</b>
<b>Bicarbonate</b>	<b>25 - 40</b>	<b>22 - 26</b>
<b>Acetate</b>	<b>3.0 – 4.0</b>	<b>0.0</b>
<b>Dextrose</b>	<b>70 – 100 mg/dL</b>	<b>0.0 – 250 mg/dL</b>
<b>Carbon Dioxide</b>	<b>35 – 70 mmHg</b>	<b>40 mmHg</b>

Dialysis Technology – A Manual for Dialysis Technicians, 3<sup>rd</sup> Edition, Jim Curtis & Philip Varughese, © 2003, National Association of Technicians/Technologists, p 191.

# Conductivity

- Unit of Measure: milliSiemens/centimeter (mS/cm)
- Used to measure total ion concentration
- Factors that determine conductivity:
  - Total ions in solution (Total Ionic Strength = TIS)
  - Each ion's mobility (Conductance Factor)
  - Non ionic molecule concentration effect (Dextrose)
  - Dependent on Temperature (Reference 25° C)
- Typical value for dialysate is 14.0 mS/cm at 25° C
- For any electrolyte solution, the number of positive and negative ions are always equal



# Conductance Factor

	Factor for TIS/2 = 137	Factor for TIS/2 = 160	Factor per mmol/L
<b>Sodium Chloride</b>	<b>104.51</b>	<b>103.40</b>	<b>0.04826</b>
<b>Potassium Chloride</b>	<b>126.49</b>	<b>125.47</b>	<b>0.04435</b>
<b>Calcium Chloride</b>	<b>103.36</b>	<b>101.52</b>	<b>0.08000</b>
<b>Magnesium Chloride</b>	<b>106.29</b>	<b>105.23</b>	<b>0.04609</b>
<b>Sodium Acetate</b>	<b>70.17</b>	<b>69.03</b>	<b>0.04957</b>
<b>Sodium Bicarbonate</b>	<b>73.97</b>	<b>72.28</b>	<b>0.07348</b>

Factors from the Drake-Willock Conductance Tables

# Conductivity Calculation

Electrolyte	(#1) Conductance Factor	(#2) Charge mEq/L	(#3) Multiply #1 x #2	Divide #3 by 1000 Conductivity mS/cm
NaCl	104.178	100.00	10,418	10.418
KCl	126.185	2.00	252.4	0.252
CaCl <sub>2</sub>	102.810	2.50	257.0	0.257
MgCl <sub>2</sub>	105.973	0.75	79.5	0.080
NaC <sub>2</sub> H <sub>3</sub> O <sub>2</sub>	69.829	4.00	279.3	0.279
NaHCO <sub>3</sub>	73.464	33.00	2,424.3	2.424
<b>Total Dialysate Conductivity without Dextrose</b>				<b>13.710</b>

# The Case of the Increasing Bicarbonate

Bath fixed components:  $\text{Ca}^{++}$  (1.5 mmol/L),  $\text{K}^+$  (2 mmol/L),  $\text{Mg}^{++}$  (0.5 mmol/L),  $\text{CH}_3\text{COO}^-$  (3.0 mmol/L),  $\text{C}_6\text{H}_{12}\text{O}_6$  (8.33 mmol/L)

Conductance factors:  $\text{NaCl} = 104.51$ ,  $\text{NaHCO}_3 = 73.97$

Bicarb (mmol/L)	30.0	31.0	32.0	33.0	34.0	35.0	36.0
Chloride (mmol/L)	110.0	109.0	108.0	107.0	106.0	105.0	104.0
Conductivity (mS/cm)	13.87	13.84	13.81	13.78	13.74	13.71	13.68

# Acid Concentrate Modification

Potassium – 30 mL raises 4.5 liter of acid concentrate by 0.5 mmol/L

All values in mmol/L

	No Spike	1 Spike	2 Spikes	3 Spikes	4 Spikes	5 Spikes	6 Spikes
Na	100	99.34	98.68	98.04	97.40	96.77	96.15
K	1	1.49	1.99	2.48	2.97	3.47	3.96
Ca	1.5	1.49	1.48	1.47	1.46	1.45	1.44
Mg	0.5	0.497	0.493	0.490	0.487	0.484	0.481
Cl	105	104.80	104.62	104.44	104.27	104.11	103.96
C <sub>2</sub> H <sub>3</sub> O <sub>2</sub>	3	2.98	2.96	2.94	2.92	2.90	2.88
Cond (mS/cm)	13.665	13.657	13.650	13.644	13.639	13.635	13.631

# Conductivity Temperature Compensation

- The conductivity of an electrolyte solution, such as dialysate, varies with temperature
- For dialysate, this change is about 1.80 – 2.20% per degree Centigrade
- For the conductivity values to reflect total ion concentration, all values must be corrected to the same temperature, which is 25° C
- All dialysate machines utilize a temperature measuring device (normally a thermistor) to measure the dialysate temperature and correct the conductivity reading for the difference between the actual conductivity at the dialysate temperature and 25° C

# Conductivity Temperature Compensation

Table for 14.00 mS/cm @ 25°C

Temperature (degrees Celsius)	Uncompensated Cond. (mS/cm)	% Change from 25.0°C	Compensated by Thermistor
34.0	16.83	20.2	14.00
35.0	17.18	22.7	14.00
36.0	17.54	25.3	14.00
37.0	17.90	27.8	14.00
38.0	18.27	30.5	14.00
39.0	18.65	33.2	14.00
40.0	19.03	36.0	14.00

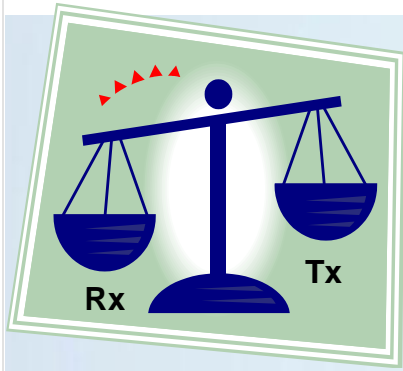
Compensation @ 2.07%/°C

# Density vs. Specific Gravity

- Density – the mass of a particular substance per unit volume. In dialysis density is generally measured in grams/cc.
- Specific Gravity (sp gr.) – The ration of the density of a substance compared to the density of a standard substance
- In dialysis the standard substance is usually water at 4<sup>0</sup> C. The density at this temperature is 0.999975 gm/cc.



# Application Examples

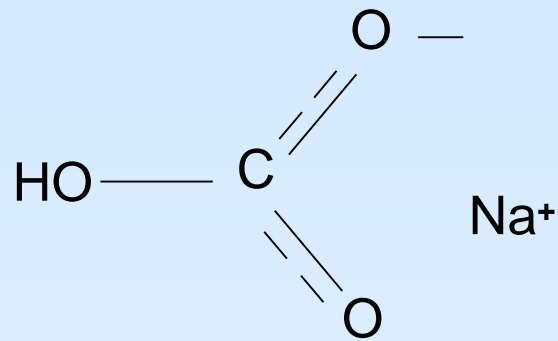


## Part 2

- **Bicarb chemistry made easy**
- **Taking good measurements**
- **Limitations of conductivity and total chlorine measurements**

# The Bicarbonate Reaction

**Bicarbonate reacts with water !**



Sodium Bicarbonate



**Sodium  
Bicarbonate**

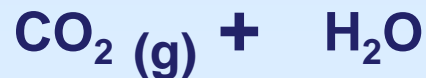
**Carbonic  
Acid**

# Bicarbonate



Sodium  
Bicarbonate

Carbonic Acid



**Can you give a familiar example of  
CO<sub>2</sub> dissolved in water?**

(I'll give you a couple hints)



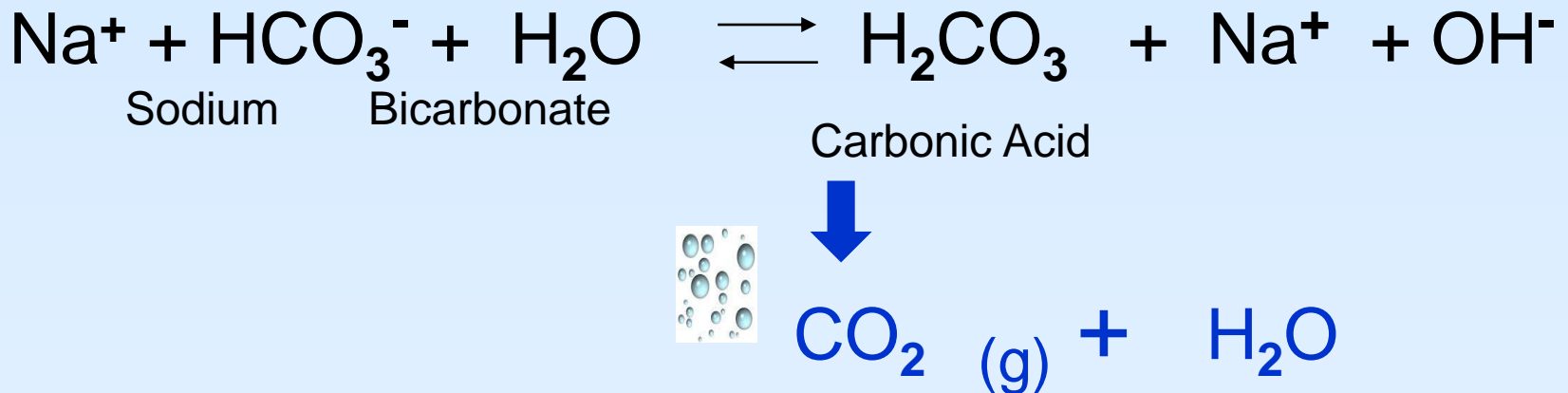
(here's another)



# Bicarbonate

When mixing bicarb, think soda pop !

**Chemicals in solution are in a state of dynamic equilibrium**



**As CO<sub>2</sub> leaves solution (time, temp, agitation), more and more bicarbonate is lost (it goes flat)!**



# Bicarbonate Concentrate

**WARNING:** For use only with three-stream proportioning bicarbonate systems which calibrated to proportion 1 part acid to 44 parts bicarbonate base and water. Use with other equipment or without associated acid concentrate may cause patient injury or death. NOT FOR PARENTERAL USE.

Catalog No. 08-4112-2

## NaturaLyte® 4000 Rx-12

Dry Pack for Bicarbonate Dialysis

**45x**

**Ionic Composition of Bicarbonate concentrate:**  
(Nominal dilution 1:172-42:28)

**Sodium 37 mEq/L**  
**Bicarbonate 37 mEq/L**

One bag of NaturaLyte 4000 Rx-12 dry pack, when used in conjunction with NaturaLyte 4000 Series Acid formulation or equivalent, will produce enough dialyzing fluid for approximately twelve 7 hour treatments at a maximum flow rate of 500 ml/min.

**Chemical Composition:**  
7827 g. Sodium Bicarbonate, U.S.P., Dissolved 81.3 g/L.

**Caution:** Federal (USA) law restricts this device to sale by order of a physician.

**DO NOT USE IF PACKAGING IS DAMAGED OR BAG SEAL IS BROKEN.**  
**RECOMMENDED STORAGE:**  
PROTECT FROM EXCESSIVE HEAT AND FREEZING.

Fresenius Medical Care NA  
Waltham, MA 02451  
Fresenius Medical Care 1-800-323-5188

08-4112-2

**Directions for Use:**

1. To mix NaturaLyte 4000 Rx-12 dry pack, add 90 liters of purified water to the NaturaLyte Mixer (Cat. No. 150406) or equivalent container with approx. 100 liter capacity. Container must be free of bacterial and chemical contamination (current AAMI). Use purified water that meets or exceeds current AAMI hemodialysis water quality standards. Water temperature should be 24°C ± 2°C.
2. Empty entire NaturaLyte 4000 Rx-12 dry pack into the water gradually while gently mixing the solution. Mix for 1 minute after the powder has been added. **NOTE:** Do not overmix. Vigorous mixing can drive carbon dioxide from the solution and is not recommended. If mixing is manual, it may be easier to dissolve one-third of the bag at a time. Use entire contents of bag.
3. Add water for a total volume of 96 liters. Mix again for approx. 10 minutes. Ensure that the powder is dissolved in solution.
4. Refer to the directions for use provided in the dialysis machine operator's manual regarding the use of bicarbonate concentrate. Check conductivity and pH of dialyzing fluid before starting treatment and each time solution is added (current AAMI).

**NOTE:** This bicarbonate base concentrate should be used within 24 hours of mixing. Storage in a closed container is recommended to minimize CO<sub>2</sub> loss and resulting precipitation in dialysis equipment. Bacterial growth may occur when using bicarbonate concentrate.

## Directions for Use:

1. To mix NaturaLyte® 4000 Rx-12 dry pack, add 90 liters of purified water to the NaturaLyte® Mixer (Cat. No. 150406) or equivalent container with approx. 100 liter capacity. Container must be free of bacterial and chemical contamination (current AAMI). Use purified water that meets or exceeds current AAMI hemodialysis water quality standards. Water temperature should be  $24^{\circ}\text{C} \pm 2^{\circ}\text{C}$
2. Empty entire NaturaLyte® 4000 Rx-12 dry pack into the water gradually while gently mixing the solution. Mix for 1 minute after the powder has been added. **NOTE:** Do not overmix. Vigorous mixing can drive carbon dioxide from the solution and is not recommended. If mixing is manual, it may be easier to dissolve one-third of the bag at a time. Use entire contents of bag.
3. Add water for a total volume of 96 liters. Mix again for approx. 10 minutes. Ensure that the powder is dissolved in solution.
4. Refer to the directions for use provided in the dialysis machine operator's manual regarding the use of bicarbonate concentrate. Check conductivity and pH of dialyzing fluid before starting treatment and each time solution is added (current AAMI).

**NOTE:** This bicarbonate base concentrate should be used within 24 hours of mixing. Storage in a closed container is recommended to minimize CO<sub>2</sub> loss and resulting precipitation in dialysis equipment. Bacterial growth may occur when using bicarbonate concentrate.

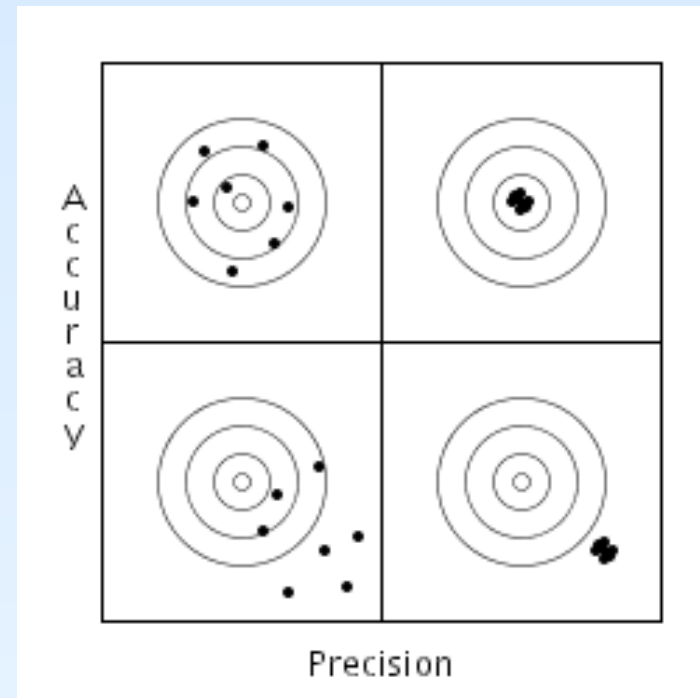


# Taking good measurements

How do you know your meter is working properly ?

**Metrology** – the study of measurement

- **Accuracy** refers to the closeness of a measured value to a standard or known value.
- **Precision** refers to the closeness of two or more measurements to each other.



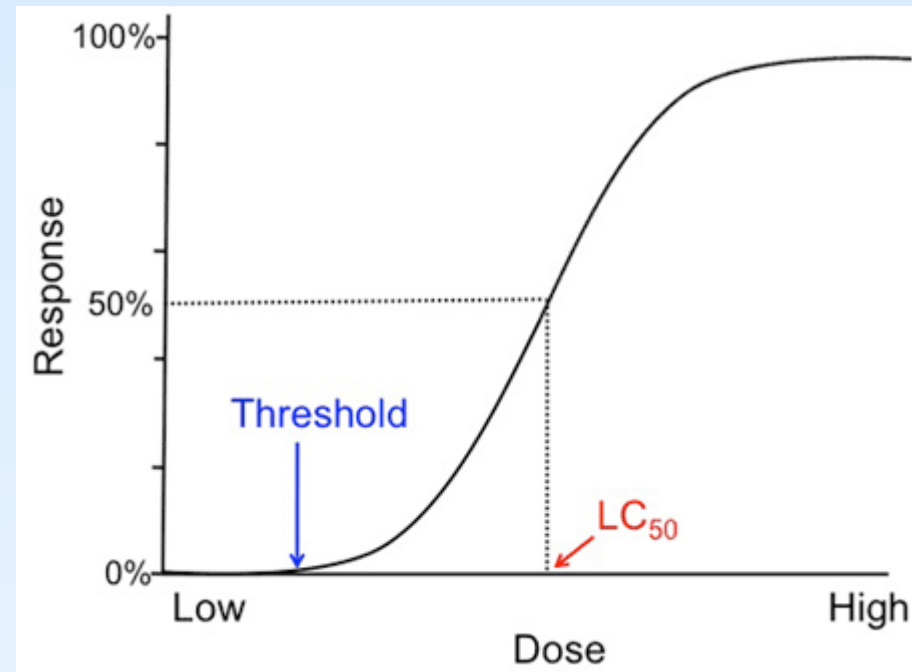
# Application Lab

## Meter – device that measures

- Conductivity meter
- pH meter
- Graduated cylinder
- Hydrometer
- Volt – Amp meter
- Pressure transducer

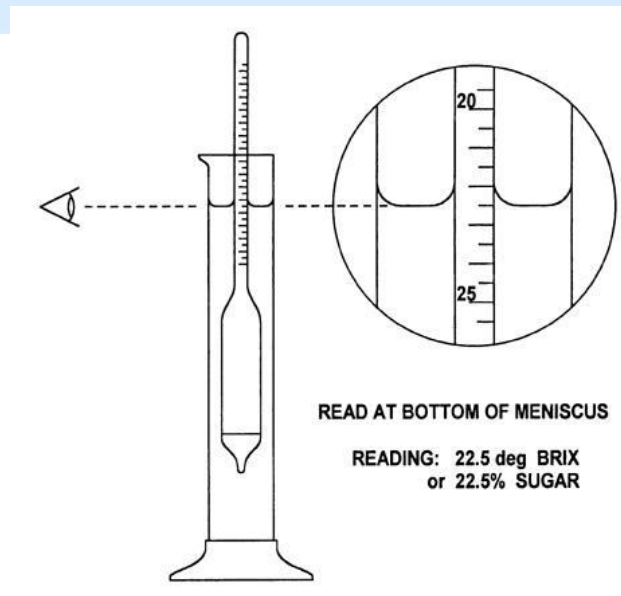
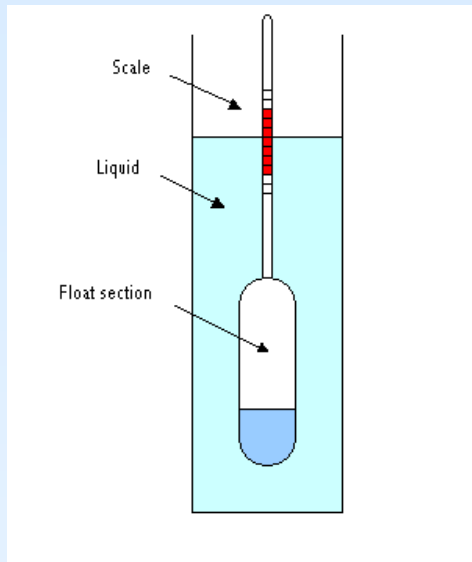
## Each has a response curve:

- Slope (discrimination)
- Threshold (sensitivity)
- Operating Range



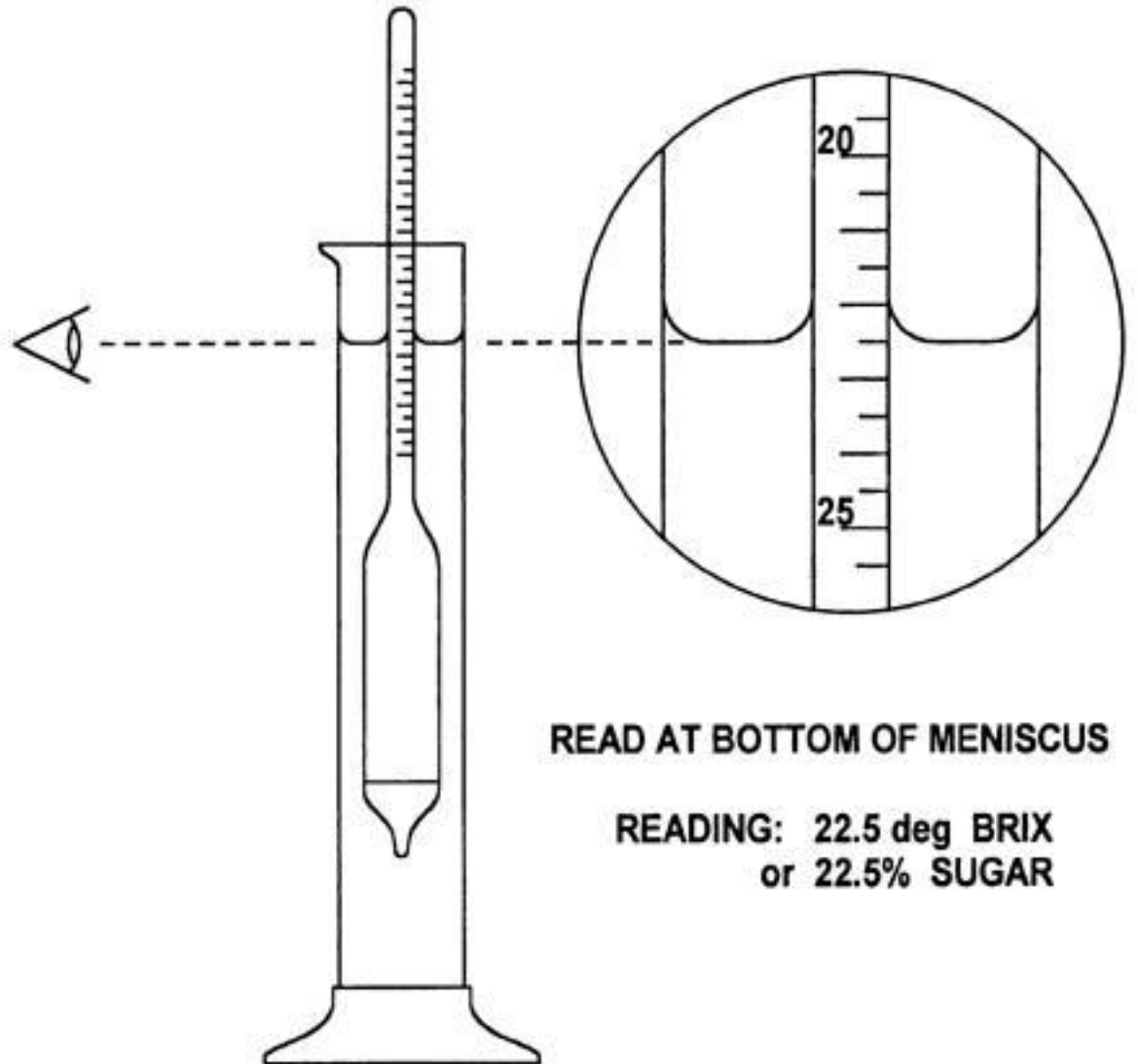
# Specific Gravity

- Used in determining if Granuflo is mixed properly (all bags in the mixer).
- The measurement device is a hydrometer



# Hydrometer

- Read the meniscus
- Effect of bubbles
- Effect of temperature



# Conductivity

## Cations (mEq/L)

Na<sup>+</sup> 137

K<sup>+</sup> 2

Ca<sup>+2</sup> 2.5

Mg<sup>+2</sup> 1.0

Total 142.5

## Anions (mEq/L)

Cl<sup>-</sup> 105.5

Ac<sup>-</sup> 4.0

Bic<sup>-</sup> 33

Total 142.5

Far more Na<sup>+</sup> and Cl<sup>-</sup> than anything else (85.5%)

# Conductivity

## Conductivity is:

- A very important safety tool to use before and during the Tx.

## It is NOT:

- A sodium or bicarbonate detector.
- It is not the “goal” (Rx are not written for mS/cm).
- A guarantee of dialysate safety.

# Conductivity

- GIGO – meeting a conductivity range is not a substitute for proper concentrate preparation and handling.
- Each 0.1 mS/cm = about 1 mEq/L ionic strength, IF you have good control
- AAMI water Na<sup>+</sup> specification



# Conductivity

What is “theoretical conductivity”:

- A value calculated by the machine. It is the conductivity of the exact prescribed dialysate under ideal conditions.
- It is the “expected” conductivity, which if not met, may indicate a problem in the dialysate.

It is NOT:

- A “target” to which the machine (or other equipment) should be adjusted or calibrated.

# Conductivity

The screenshot displays a dialysis machine interface with the following components:

- Header:** "Dialysis" in a green bar, "Blood Pressure" 10:51, and "10:45 120/90 100".
- Conc:** 2301, 45x ▲
- Acid/Bicarb Alert:** Button
- Dialysate Composition:**
  - TCD: 13.5 mS/cm
  - Ca<sup>++</sup>: 3.5 mEq/L
  - Mg<sup>++</sup>: 1.0 mEq/L
  - Ac.: 4.0 mEq/L
  - Dex.: 100 mg/dL
  - Base Na<sup>+</sup>: 137 mEq/L
  - Bicarbonate: 33 mEq/L
- Conductivity Limits:**
  - Actual: 13.4 mS/cm
  - Alarm Position: 14.0
  - Alarm Width: 13.0
- SVS Profile:** Lin
- Navigation Bar:** Home, Trends, Dialysate, Test & Options, Heparin, Kt/V AF, BTM BVM, Blood Pressure

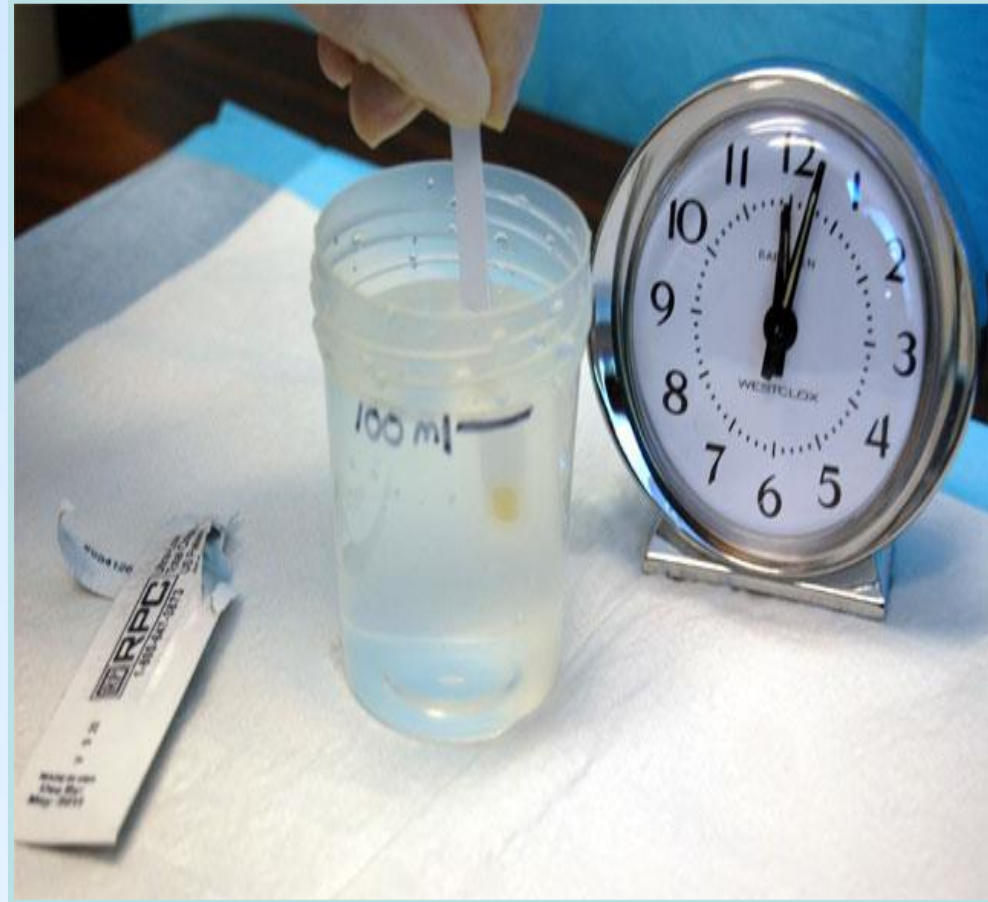
For this exact formulation / Rx

This is the theoretical or expected conductivity

This is the actual conductivity of the dialysate

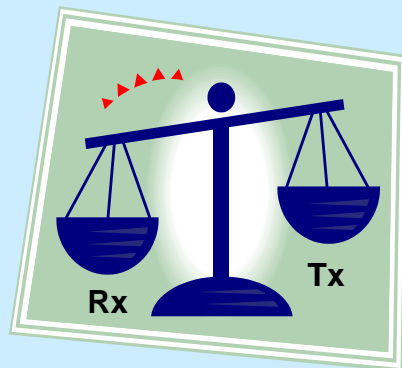
# Using Chlorine Test Strips

- Collect a fresh **100 ml** sample of RO water from a sample valve located after the first carbon filter or bank of carbon filters
- While dipping the strip, move it back and forth at a constant gentle rate of approximately two, **1"-2" wide strokes** (one forward – one backward) per second for **60 seconds**



# Testing Total Chlorine

**Failure to follow procedures can lead to the under-estimation of total chlorine present in the water.**



## Part 3

# Chemistry of “Cleaning”

# Oxidation and Reduction

- Oxidation – A chemical reaction where an element or radical loses an electron. The charge (valance) will increase.
  - $\text{Na} \rightarrow \text{Na}^+$  (Sodium is oxidized)
- Reduction – A chemical reaction where an element or radical gains an electron. The charge will decrease.
  - $\text{HCO}_3^- \rightarrow \text{CO}_3^{--} + \text{H}^+$  (Bicarbonate becomes carbonate)
- Oxidation-reduction reactions - Any chemical reaction where one component looses an electron, there will be another that gains an electron. Noted simply as a redox reaction.

# Bleach

- Bleach - Sodium Hypochlorite ( $\text{NaOCl}$ ) dissolved in water, with  $\text{NaOH}$  as a stabilizer. The household strength is 6% or 60,000 ppm. Bleach is a strong oxidizer.
- Bleach whitens materials by destroying chromophores which create the color in fabrics and liquids.
- It's use in dialysis is as a surface disinfectant. One part bleach to 9 parts water yields a concentration of 6,000 parts per million
- For drinking water, one tablespoon per gallon will purify water yielding a concentration of 234 ppm of  $\text{NaOCl}$  = 111 ppm free chlorine.
- Never mix a strong acid (like  $\text{HCl}$ ) with bleach, and be very careful with weak acids (like vinegar). It can produce chlorine gas, which can be deadly.
- Never mix ammonia and bleach. It will produce chloramine gas which is highly toxic.



# Why is precipitation a problem in dialysis machines?

- The problem is Calcium Carbonate ( $\text{CaCO}_3$ ) has a high degree of insolubility in water.
- The same is true for Magnesium Carbonate.
- Calcium ions ( $\text{Ca}^{++}$ ) and Carbonate ions ( $\text{CO}_3^{--}$ ) just love to get together.
- The dialysate must have Calcium ions to regulate the Calcium level in the patient's blood
- Sodium bicarbonate is a major component of dialysate to regulate blood pH
- The bicarbonate ion reacts to create carbonate ions
- White stuff upstream from the dialyzer? Think precipitation and use vinegar
- White stuff downstream of the dialyzer? Think protein and use bleach

# Solubility Product Constant ( $K_{sp}$ )

- $K_{sp}$  is a number generated for a molecule that determines its maximum solubility at a particular temperature (normally 25°C).
- The number is the product of the solubility of the individual ions that make up the molecule measured in moles/liter



$$K_{sp} = [A]^c \times [B]^d \quad K_{sp} = [Al^{+++}] \times [3xOH^-]^3 = 5 \times 10^{-33}$$

$$[X] \times [3X]^3 = 27X^4 = 5 \times 10^{-33}$$

- $X = 3.7 \times 10^{-9}$  moles/liter and  $Al(OH)_3$  molecular weight = 78.004

The solubility of Aluminum hydroxide is only  $78.004 \times 3.7 \times 10^{-9} = 2.9 \times 10^{-7}$  grams/liter = 0.29 micrograms/L

## $K_{SP}$ - Calcium Carbonate

- $K_{SP}$  of  $\text{CaCO}_3 = 8.7 \times 10^{-9}$

$$[\text{Ca}^{++}] \times [\text{CO}_3^{--}] = 8.7 \times 10^{-9}$$

$$[X] \times [X] = 8.7 \times 10^{-9} \text{ so } [X^2] = 8.7 \times 10^{-9}$$

$$[X] = \text{square root of } 8.7 \times 10^{-9} = 9.3 \times 10^{-5} \text{ moles/liter}$$

$$1 \text{ mole of } \text{CaCO}_3 \text{ weighs} = 100.09 \text{ grams}$$

$$100.09 \text{ grams} \times 9.3 \times 10^{-5} = 9.3 \text{ milligrams/L}$$

# Calcium and Magnesium Compounds

<b>Molecule</b>	<b>G.M.W.</b>	<b>Ksp</b>	<b>mol/L</b>	<b>Dissolved</b>
CaCO <sub>3</sub>	100.087	$8.70 \times 10^{-9}$	$9.3 \times 10^{-5}$	9.3 mg/L
Ca(OH) <sub>2</sub>	74.093	$5.02 \times 10^{-6}$	$1.08 \times 10^{-2}$	800 mg/L
MgCO <sub>3</sub>	84.314	$6.82 \times 10^{-6}$	$2.6 \times 10^{-3}$	220 mg/L
Mg(OH) <sub>2</sub>	58.320	$5.61 \times 10^{-12}$	$1.12 \times 10^{-4}$	6.5 mg/L

# CaCO<sub>3</sub> in dialysate

For dialysate, the Calcium and Carbonate concentrations are:

- Calcium ion = 3.25 mEq/L =  $1.63 \times 10^{-3}$  mol/L
- Carbonate ion =  $4 \times 10^{-5}$  mol/L

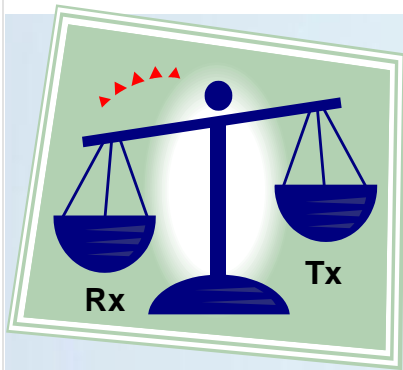
$$[\text{Ca}^{++}] \times [\text{CO}_3^{--}] = [1.63 \times 10^{-3}] \times [4.0 \times 10^{-5}] = 6.5 \times 10^{-8}$$

$$K_{\text{SP}} \text{ of CaCO}_3 = 8.7 \times 10^{-9}$$

The dialysate concentration is higher than the  $K_{\text{SP}}$  of CaCO<sub>3</sub>, so precipitation will form.

At low levels the reaction is metastable, hence, precipitation forms slowly.

# Application Examples



## Part 3

- **Disinfection**
  - Bleach and pH
- **Descaling**

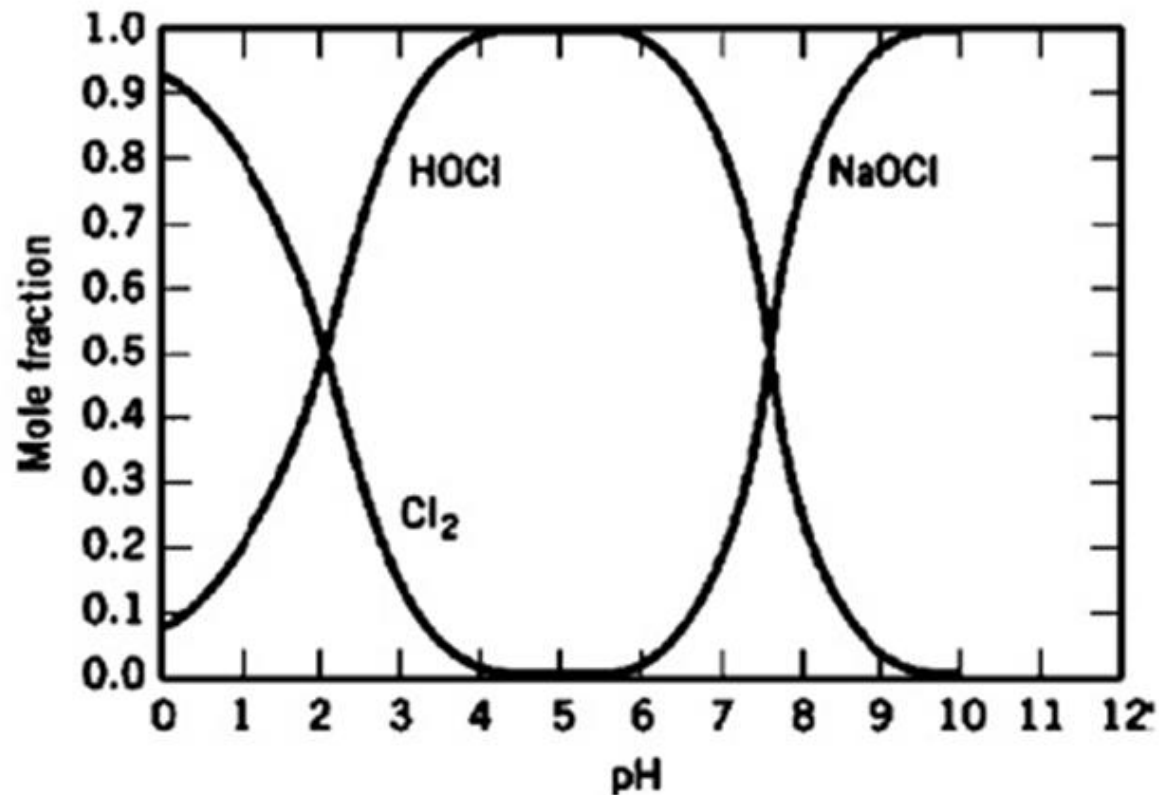
# Application Lab

- Hypochlorous acid reacts with a wide variety of biomolecules, including DNA, RNA, lipids and fatty acid groups, and proteins.
- Disinfection is due to widespread oxidation of many biomolecules
- Like all chemical reactions, disinfection needs time to occur.
- Rate of reaction is increased by higher concentrations of reactants, and higher temperature.



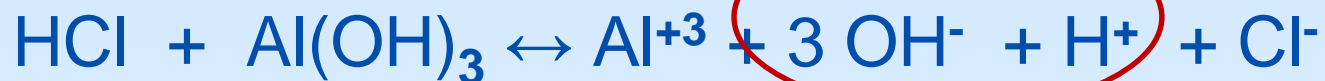
# Application Lab

- Note the pH where  $\text{Cl}_2$  is zero
- At pH 6, you have nearly all hypochlorous acid, with no  $\text{Cl}_2$  or hypochlorite.



# Solubility Product Constant ( $K_{sp}$ )

What if I add an excess amount of acid?



The acid is effectively removing the hydroxide from solution, “driving equilibrium” to the soluble  $\text{Al}^{+3}$  form.

## $K_{SP}$ - Calcium Carbonate

What if I add an excess amount of acid?



Carbonate ( $\text{CO}_3^{--}$ ) and acid make bicarbonate  $\text{HCO}_3^-$

Bicarbonate and acid make Carbonic acid  $\text{H}_2\text{CO}_3$

The acid is effectively removing the carbonate through  $\text{CO}_2$ , and “driving equilibrium” to the soluble  $\text{Ca}^{+2}$  form



## Part 4

# Water Purification

# What is Water?

87

- A liquid consisting of 11% Hydrogen and 89% Oxygen by weight.
- 4.3 billion gallons falls in the USA each day.
- Reference for 0<sup>o</sup> C and 100<sup>o</sup> C.
- Defines Specific Heat:
  - calorie = energy to raise one cc by 1<sup>o</sup> C
  - BTU = energy to raise one pound by 1<sup>o</sup> F
- Defines Specific Gravity:
  - 1 cc at 4<sup>o</sup> C weighs 1 gram.
- Is 55% to 78% of the human body

# What's in Water?...Everything!

88

- Dissolved Solids:
  - Minerals, Salts, Some organics
- Undissolved Solids:
  - Silica Compounds, Heavy Metal Oxides, Complex Organics
- Gases:
  - Nitrogen, Oxygen, Chlorine, Chloramines, Fluorine
- Micro Organisms:
  - Algae, Bacteria, Fungi

# Pure Water

- Water that has been processed for a particular use
- Water that has been treated to neutralize but not necessarily removed contaminants that may be harmful to humans or animals
- Levels of various ions may be safely ingested by humans but not diffused into a patient's blood stream across a dialyzer membrane



# Federal Interim Primary Drinking Water Regulations

90

<b>CONTAMINANTS</b>	<b>STANDARD</b>
<b>CALCIUM, MAGNESIUM, SODIUM, POTASSIUM, ALUMINUM, CHLORAMINES</b>	<b>T.D.S. &lt;500 mg/l*</b>
<b>CHLORIDE, SULFATE</b>	<b>250 mgL</b>
<b>NITRATE</b>	<b>10.0 mg/L</b>
<b>ZINC</b>	<b>5.0 mg/L</b>
<b>FLUORIDE</b>	<b>1.6 mg/L**</b>
<b>COPPER, BARIUM</b>	<b>1.0 mg/L</b>
<b>ARSENIC, LEAD, SILVER, CHROMIUM</b>	<b>0.05 mg/L</b>
<b>CADMIUM, SELENIUM</b>	<b>0.01 mg/L</b>
<b>MERCURY</b>	<b>0.002 mg/L</b>
<b>MICROBIAL COUNT</b>	<b>1 COLONY/100ml</b>

\* 1 mg/L = 1 P.P.M.

\*\* AT 70.7 - 79.2 DEG. F. Higher temperature requires lower concentrations and visa versa

# AAMI Standard Water

CONTAMINANT	SUGGESTED MAXIMUM LEVEL mg/L
CALCIUM	2 ( 0.1 mEq/L )
MAGNESIUM	4 ( 0.3 mEq/L )
SODIUM**	70 ( 3 mEq/L )
POTASSIUM	8 ( 0.2 mEq/L )
FLUORIDE	0.2
CHLORINE	0.5
CHLORAMINES	0.1
NITRATE (N)	2
SULFATE	100
COPPER, BARIUM, ZINC	each 0.1
ALUMINUM	0.01
ARSENIC, LEAD, SILVER	each 0.005
CADMIUM	0.001
CHROMIUM	0.014
SELENIUM	0.09
MERCURY	0.0002

\*\*230\*\* mg/L ( 10 mEq/L ) where sodium concentration of the concentrate has been reduced to compensate for excess sodium in the water, as long as conductivity of the water is being continuously monitored.

# FIPDWR vs. AAMI

7

<b>Contaminant</b>	<b>FIPDWR/AAMI Ratio</b>	<b>RO % Rejection Requirement</b>
Zinc, Copper Barium, Arsenic	50 : 1	98%
Lead, Silver Cadmium, Mercury	10 : 1	90%
Fluoride	8 : 1	87.5%
Nitrate	5 : 1	80%
Chromium	3.5 : 1	71%
Sulfate	2.5 : 1	60%
Selenium	1 : 9	
Microbial Count	1 : 20,000	

# Bacteria and Endotoxin Restrictions for Water

93

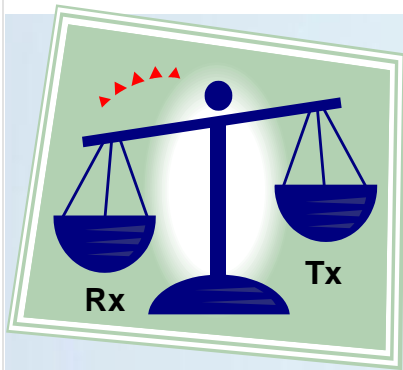
	Bacteria cfu/mL	Endotoxin EU/mL
AAMI RD5:1981	200	Not Specified
AAMI RD52: 2004	200 Action Level = 50	2 Action Level = 1
European Pharmacopeia	100	0.25
Swedish Pharmacopeia	100	0.25
Ultrapure	0.1	0.03

*Ultrapure Dialysate*, Richard Ward, Seminars in Dialysis, Vol 17, No 6, Nov/Dec 2004, pp 489-497

# How tough are bacteria?

- Bacteria were the first life forms on earth and have been around for about 3.5 billion years
- The number of bacteria in or on your body outnumber the number of human cells 10 to 1
- Time between bacteria (*Pseudomonas aeruginosa*) entering a pipe and attaching to the pipe wall: 30 seconds
- 99.9% of bacteria in water systems are on the pipe walls
- In theory, 1 ppb of organic matter in water is enough to produce 9,500 bacteria/mL
- Biofilms can be 100 layers thick. Bacteria at the surface are different than bacteria in the lower layers
- A level of one endotoxin unit/mL in water can represent a level of 430K bacteria/mL

# Application Examples

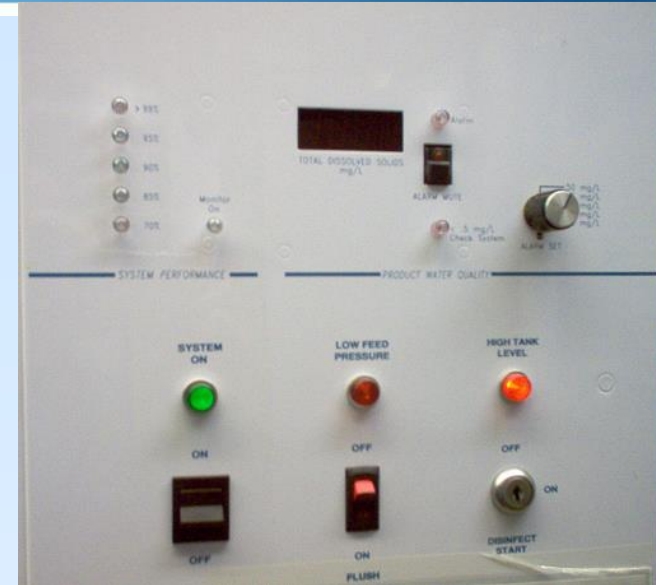


## Part 4

- **Disinfection**
  - Bleach and pH
- **Descaling**

# Chemical Quality and "TDS"

- RO machines are capable of removing 90 to 99% molecules and ionic elements such as  $\text{Na}^+$ ,  $\text{Ca}^+$ ,  $\text{Cl}^-$ , etc.
- The contaminants in the water are measured by conductivity.
- The RO continuously monitors for contaminants by using either:
  - Conductivity or TDS
  - Percent Rejection
  - Same, exact thing expressed in 2 different ways.





# TDS and % rejection

- TDS [Total Dissolved Solids] or “permeate conductivity” – conductivity of the RO water. Smaller numbers are “better”.
- TDS is expressed as ppm
- Permeate conductivity is in uS (microsiemens)
- % rejection = the ratio of the water conductivity before and after the RO. The % of contaminants rejected. Bigger numbers are “better”.
- TDS is an “absolute” metric of water purity, while % rejection is relative to the input.
- Focus on TDS or permeate conductivity
- – especially the trends!

# TDS and % rejection

- If the incoming conductivity = 558 uS
- The outgoing conductivity = 6 uS
- What is the % rejection?
  
- $(558-6)/558 = 99\%$
  
- If the incoming conductivity = 258 uS
- The outgoing conductivity = 4 uS
- What is the % rejection?
  
- $(258-4)/258 = 98\%$
  
- Which RO is giving better water?

# Water Quality



ENJOY THE WATER

