

Table 7

Use the table to help establish an effective diuretic regimen.

Guidance on Diuretic Dosing

Class	Drug	Usual Outpatient Dosing (Maximum†)	Usual Inpatient Dosing* (Maximum†)
Loop diuretics	Bumetanide	0.5–2 mg orally once to twice daily (10 mg/day)	0.5–4 mg IV once to three times daily (5 mg/dose) Or 0.5–2 mg/hour IV infusion (4 mg/hour)
	Furosemide	20–80 mg orally once to twice daily (600 mg/day)	40–160 mg IV once to three times daily (200 mg/dose) Or 5–20 mg/hour IV infusion (40 mg/hour)
	Torsemide	10–40 mg orally once daily (200 mg/day)	N/A‡
Thiazide-type diuretics	Chlorothiazide	N/A	0.5–1 g IV once to twice daily (2 g/day)
	Hydrochlorothiazide	25–50 mg orally once daily (100 mg/day)	25–50 mg orally once to twice daily (100 mg/day)
	Chlorthalidone	25–50 mg orally once daily (100 mg/day)	12.5–25 mg orally once to twice daily (100 mg/day)
	Metolazone	2.5–5 mg orally once daily (20 mg/day)	2.5–5 mg orally once to twice daily (20 mg/day)

* For patients receiving loop diuretics prior to admission, the oral dose should be changed to an intravenous dose of 1–2.5 times the home dose. For patients naïve to therapy, the lower end of the dosing interval should be used.

† "Usual" dose ranges reflect approved product labeling and safety and efficacy results from large, randomized controlled trials. Higher ranges may be considered on the basis of observational data and clinical experience.

‡ Torsemide is not available as an intravenous formulation in the United States; oral therapy may be initiated prior to discharge to assess patient response.

IV = intravenous; N/A = not applicable