## No 110 - Answer

Your bench method for making up a 0.2 mol/L solution of anion X- requires you to dissolve 53.65 g of salt A.X heptahydrate in water to a solution volume of 11. You mistakenly use the anhydrous salt instead. What volumes of water and your solution must be mixed together to correct for this error and produce a final solution of volume 1L.

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First calculate the molecular weights of both chemicals:

```
Concentration (mol/L) =
                                               Concentration (g/L)
                                    = <u>Concentration (g/L)</u>
Concentration (mol/L)
Therefore molecular weight (MW)
For salt A.X heptahydrate concentration = 53.65 \text{ g/L} = 0.2 \text{ mol/L}
       MW salt A.X heptahydrate = \frac{53.65}{0.2} = 268 (3 sig figs)
                                              0.2
MW anhydrous salt A.X = MW salt A.X heptahydrate - (7 x MW H_2O)
       MW H_2O = (2 \times 1) + 16 = 18
Therefore MW anhydrous salt A.X = 268 - (7 x 18) = 268 - 126 = 142
Actual concentration of solution = Concentration (g/L) = 53.65 = 0.378 mol/L MW anhydrous salt A.X 142
```

To prepare dilution:

```
M_1 \times V_1 = M_2 \times V_2
Where M_1 = Required concentration = 0.200 mol/L
      V<sub>1</sub> = Required volume = 1 L
       M_2
              = Stock concentration concentration = 0.378 mol/L
              = Volume of stock to dilute to V1 = ?
       V_2
 0.200 \times 1 = 0.378 \times V_2
       V<sub>2</sub> = <u>0.200 x 1</u>
0.378
                                   = 0.53 L (2 sig figs)
```

Alternatively the volume required is simply the ratio of the two molecular weights!

```
Volume required = MW Na_2HPO_4 = 142 = 0.53 L
                       MW Na<sub>2</sub>HPO<sub>4</sub>.7H<sub>2</sub>O
                                                268
```

Therefore 530 mL of the solution is mixed with 470 mL water to give 1 L of solution with the correct concentration (or preferably 530 mL of the solution is made up to 1 L with water).

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## **Question 111**

A man with Type 2 diabetes was admitted in a hyperosmolar coma with a plasma glucose concentration of 55 mmol/L and a plasma sodium concentration of 130 mmol/L. His body weight at that time was 70 Kg. He was started on an insulin sliding scale and given an infusion of two litres of 0.9% saline over two hours (total sodium input 308 mmol), during which time he produced two litres of urine, with a total sodium excretion of 30 mmol. After two hours this plasma glucose concentration had fallen to 15 mmol/L. Estimate his plasma sodium concentration at that time.

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## **ACB South West and Wessex Region Topical Liver Disease**

## Thursday 1st July 2010 Frenchay Hospital, Bristol

10.00-10.30	Registration and Coffee
10.30-11.10	Tumour Markers and The Liver Dr Cathie Strugeon
11.10-11.50	The ELF Test (To be confirmed)
11.50-12.30	Metabolic Liver Disease Dr Berenice Lopez, Southmead Hospita
12.30-13.30	Lunch/Trade Exhibition
13.30-14.10	Haemachromatosis (To be confirmed)
14.10-14.50	Autoimmunity and the Liver Dr Edward Davies
14.50-15.20	Tea/Trade Exhibition
15.20-16.00	Fibroscan Dr R Przemioslo, Frenchay Hospital
16:00-16:40	Liver Disease in Pregnancy (to be confirmed)

Registration cost is just £20 for ACB and IBMS Members, £10 for Grade A trainees, £25 to others. Closing date 25th June 2010. For further details and to register on-line please visit acbsww.org.uk or contact Dr Julie Wassell, Clinical Biochemistry, Southmead Hospital, Bristol BS10 5NB. E-mail Julie.wassell@nbt.nhs.uk