



Pharmacy Calculation Formula Sheet

Every formula behind the practice problems on RxMath Lab, with one worked example each. Written and checked by Arman Kiledjian, PharmD. Updated September 2026.

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Percentage & Ratio Strength

% w/v = grams of drug per 100 mL • 1:X ratio = 1 g in X mL • mg/mL ÷ 10 = % w/v

Example Express 1:2,500 as a percentage. 1:2,500 means 1 g in 2,500 mL, so $(1 \div 2,500) \times 100 = \mathbf{0.04\% \text{ w/v}}$.

Dilution

$C_1 \times V_1 = C_2 \times V_2 \rightarrow V_1 = (C_2 \times V_2) \div C_1$

Example How many mL of a 20% stock are needed to make 120 mL of a 2% solution? $V_1 = (2\% \times 120) \div 20\% = \mathbf{12 \text{ mL}}$ (then QS to 120 mL with diluent).

Alligation

parts of high = target – low • parts of low = high – target • volume of each = (its parts ÷ total parts) × final volume

Example Make 250 mL of 25% dextrose from 70% and 10% stock. Parts of 70% = $25 - 10 = 15$; parts of 10% = $70 - 25 = 45$; total = 60. Volume of 70% = $(15 \div 60) \times 250 = \mathbf{62.5 \text{ mL}}$ (and 187.5 mL of the 10%).

Milliequivalent (mEq), Millimole & Milliosmole

mmol = mg ÷ molecular weight • mEq = mmol × valence

mOsm/L = (grams per liter ÷ MW) × number of particles × 1,000

Example How many mEq are in 1 g of KCl (MW 74.5, valence 1)? mmol = $1,000 \div 74.5 = 13.4$; mEq = $13.4 \times 1 = \mathbf{13.4 \text{ mEq}}$. Osmolarity of 0.9% NaCl = $9 \text{ g/L} \div 58.5 \times 2 \times 1,000 = \mathbf{308 \text{ mOsm/L}}$.

IV Infusion & Drip Rate

drops/min = (volume × drops per mL) ÷ time in minutes

mL/hr: bag concentration (mcg/mL) → dose (mcg/min) → × 60 → ÷ concentration

Example Infuse 1,000 mL over 8 hours with a set that gives 15 drops/mL. $(1,000 \times 15) \div (8 \times 60) = 15,000 \div 480 = 31.25 \rightarrow \mathbf{31 \text{ drops/min}}$.

Body Surface Area (BSA) & Chemo Dosing

$BSA (m^2) = \sqrt{(\text{height[cm]} \times \text{weight[kg]} \div 3600)}$ • dose = mg/m² × BSA

Example A patient is 170 cm and 70 kg. $BSA = \sqrt{(170 \times 70 \div 3,600)} = \sqrt{3.306} = \mathbf{1.82 \text{ m}^2}$. A 175 mg/m² order → $175 \times 1.82 = \mathbf{318.5 \text{ mg}}$.

TPN & Nutrition Calculation

IV: dextrose 3.4 kcal/g • protein 4 kcal/g • 20% lipid = 2 kcal/mL

Oral/enteral: carbohydrate 4 kcal/g • protein 4 kcal/g • fat 9 kcal/g

grams of nitrogen = grams of protein ÷ 6.25

Example Calories from 1,000 mL of dextrose 20%? Grams = $1,000 \times 20\% = 200 \text{ g}$; $200 \times 3.4 = \mathbf{680 \text{ kcal}}$.

Isotonicity & E-Value

(1) drug in formulation = %xvol ÷ 100 (2) NaCl equivalent = drug g × E (3) NaCl for volume = $0.009 \times \text{vol}$ (4) NaCl to add = step 3 – step 2

Example Make 30 mL of 1% pilocarpine HCl (E = 0.24) isotonic. (1) drug = 0.3 g; (2) $0.3 \times 0.24 = 0.072 \text{ g}$; (3) $0.009 \times 30 = 0.27 \text{ g}$; (4) $0.27 - 0.072 = \mathbf{0.198 \text{ g}}$.

Creatinine Clearance (Cockcroft-Gault)

$CrCl = [(140 - \text{age}) \times \text{weight}] \div (72 \times SCr) \times 0.85$ if female • use SCr as given unless the question says to round it

IBW (Devine) = 50 kg male or 45.5 kg female + 2.3 kg per inch over 5 feet

IBW first → actual < IBW use actual; actual > 125% of IBW use AdjBW = $IBW + 0.4(\text{actual} - IBW)$; otherwise IBW • some references use 120% or 130%, so follow the cutoff the question gives

Example 70-yr-old male, 5'10" (IBW = 73 kg), weighs 82 kg, SCr 1.2. Since 82 kg is between IBW and 125% of IBW (91.3 kg), use IBW. $CrCl = (140 - 70) \times 73 \div (72 \times 1.2) = \mathbf{59.1 \text{ mL/min}}$.

Pharmacokinetics

$t_{1/2} = 0.693 \div k$ • $Vd = \text{Dose} \div C_0$ • $CL = k \times Vd$

Loading dose = $C_{\text{target}} \times Vd$ • $k = \ln(C_1 \div C_2) \div (t_2 - t_1)$

Example Two levels: 40 mg/L at hour 0, 10 mg/L at hour 8. $k = \ln(40 \div 10) \div 8 = 1.386 \div 8 = \mathbf{0.173 \text{ hr}^{-1}}$, so $t_{1/2} = 0.693 \div 0.173 \approx 4 \text{ hr}$.

Bioavailability (F)

$F = (AUC_{\text{oral}} \div \text{Dose}_{\text{oral}}) \times (\text{Dose}_{\text{IV}} \div AUC_{\text{IV}})$

Example IV 100 mg gives AUC 50; oral 200 mg gives AUC 60. First term: $60 \div 200 = 0.30$; second term: $100 \div 50 = 2$; $F = 0.30 \times 2 = \mathbf{0.60}$.

Insulin Day Supply & Switching

Vial = 10 mL = 1,000 units • standard pen = 300 units (box of 5)
• Toujeo pen = 450 units (box of 3)

Day supply = total units ÷ daily dose, capped at in-use stability (rapid & glargine 28 d, Humulin 31, Novolin 42, Tresiba/Toujeo 56; mixed pens 10, 14 d). Round DOWN.

Switching (basal → basal) is 1:1 EXCEPT NPH (BID) → glargine and Toujeo → Lantus/Basaglar, both –20%

Example Lantus 10 mL vial at 25 units/day: $1,000 \div 25 = 40$ days, but an open glargine vial is stable 28 days → **28-day supply**. Switching NPH 30 units BID to glargine: $60 \times 0.8 = 48$ units daily.

Opioid Conversion & MME

Proportion from the equianalgesic table (30 mg PO morphine = anchor)

Switching to a different opioid: reduce the calculated dose by 25 to 50% for incomplete cross-tolerance

MME/day = daily dose × (30 ÷ that drug's equianalgesic dose)
• MME totals risk; it is not a dose conversion

Example Oxycodone 10 mg three times daily = 30 mg/day. Table: 20 mg oxycodone ≈ 30 mg morphine, so MME = $30 \times (30 \div 20) = 45$ MME/day.

Days Supply Calculation

days = total quantity (drops, tablets, or puffs) ÷ amount used per day

eye drops assume 20 drops/mL • always round DOWN

Example A 5 mL eye drop bottle (20 drops/mL = 100 drops), 1 drop in each eye twice daily = 4 drops/day. $100 \div 4 = 25$ days.

Weight-Based (mg/kg) Dosing

kg = lb ÷ 2.2 • daily dose = mg/kg/day × weight • per dose = daily dose ÷ number of doses

Example A 66 lb child on amoxicillin 45 mg/kg/day divided twice daily. Kg = $66 \div 2.2 = 30$ kg; daily = $45 \times 30 = 1,350$ mg; per dose = $1,350 \div 2 = 675$ mg.

Reconstitution & Powder Volume

powder (displacement) volume = final reconstituted volume – volume of diluent added

Example A 1 g vial reconstituted to 100 mg/mL needs a final volume of 10 mL. If the label says to add 9.5 mL diluent, the powder volume = $10 - 9.5 = 0.5$ mL.

Specific Gravity

specific gravity = weight (g) ÷ volume (mL), a unitless number because it compares to water at 1 g/mL → weight = volume × SG • volume = weight ÷ SG

Example Glycerin has a specific gravity of 1.25. The weight of 240 mL = $240 \times 1.25 = 300$ g.

Clinical Lab Calculation

Corrected Ca = measured Ca + $0.8 \times (4.0 - \text{albumin})$

Corrected phenytoin = measured ÷ $[(0.2 \times \text{albumin}) + 0.1]$

ANC = $\text{WBC} \times (\% \text{ segs} + \% \text{ bands}) \div 100$ • under 1,500 mild, under 1,000 moderate, under 500 severe neutropenia

Anion gap = $\text{Na}^+ - (\text{Cl}^- + \text{HCO}_3^-)$ • normal about 8 to 12 mEq/L

Example Measured calcium 7.5 mg/dL, albumin 2.5 g/dL. Corrected = $7.5 + 0.8 \times (4.0 - 2.5) = 7.5 + 1.2 = 8.7$ mg/dL.

Dispensing Quantity

containers = total amount needed ÷ amount per container, then up to the next whole container

Example An 82 kg patient needs vancomycin 20 mg/kg = 1,640 mg, stocked as 750 mg vials. $1,640 \div 750 \approx 2.19$, so you open **3 vials**.

Conventions vary between schools and references. When a question states a cutoff, rounding rule or conversion factor, use the one it gives. Practice any topic above with new numbers every time at rxmathlab.com.