

Drug Protocol

Newborn Service John Hunter Children's Hospital

This protocol has been prepared for use in the Neonatal Intensive Care Unit

DRUG	SODIUM ACETATE Electrolyte	
INDICATIONS	Treating hyponatraemia and prevention of hyponatraemia Correcting or preventing metabolic acidosis	
PRESENTATION	20 mmol in 10 mL ampoule (2 mmol / mL)	
RECONSTITUTION & DILUTION	Not required	
STABILITY	Store at room temperature. Discard unused portion	
DOSAGE	1 – 6 mmol / kg / day	
ADMINISTRATION	In IV fluids (usually glucose solutions) as an additive	
COMPATIBILITY	<u>Fluids & Solutions:</u> Dextrose – amino acid solutions (TPN), lipid solutions, saline and glucose solutions, potassium containing solutions <u>Injection Site:</u> Esmolol, labetalol	
INCOMPATIBILITY	<u>Fluids:</u> no data <u>Drugs:</u> no data	
ADVERSE EFFECTS	Hypernatraemia Metabolic alkalosis	
OTHER COMMENTS	Rarely required but can be useful managing metabolic acidosis particularly in extreme prematurity Monitor electrolytes Na, K, Cl	
STORAGE & STABILITY	Store at room temp and protect from light	
COMPILED	June 2010	Review June 2015

REFERENCES Sodium acetate

SHPA Injectable Drug Guidelines - CIAP