

Document control sheet

| GUIDELINE NUMBER | |
|--------------------------------------|------|
| AREA IN WHICH THIS MONOGRAPH APPLIES | NICU |

| DIVISIONAL AUTHORISATION | | |
|-----------------------------------|------------|--|
| GROUP | DATE | |
| Paediatric monograph review group | 29/06/2023 | |

| AUTHORS | | |
|--------------------------------|---|------------|
| Author | Position | Date |
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If review:

| | Position | Date |
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| | | |
| Name | | |
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| Changes Reference | Change details | Date |
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Neonatal: Sodium Chloride 1.8%(0.3mmol in 1mL)

| Presentation: | Sodium Chloride 30% 10mL injection | | | | | |
|---------------------------------|--|----------------------------------|----|--------|-------------------------------------|--|
| Indication: | Neonatal hyponatraemia | | | | | |
| Dose: | As per 'Electrolyte Maintenance & Replacement - Paediatric Full Clinical Neonatal Guideline' | | | | | |
| Route of administration: | Intravenous infusion. Sodium chloride 1.8% has a high osmolarity and may cause venous irritation and tissue damage in cases of extravasation. If a central venous access device is unavailable, administer via a large peripheral vein monitoring insertion site closely using a recognised phlebitis scoring tool, re-site cannula at first signs of inflammation. | | | | | |
| preparation and administration: | Preferred option If sodium chloride 1.8% polyfuser is available; Step 1. Using a filter needle, withdraw 50mL sodium chloride 1.8% from the polyfuser into a 50mL syringe and infuse as per prescription. This provides 0.3mmol of sodium per 1ml (15mmol of sodium in 50mL) Alternative method if sodium chloride 1.8% polyfuser not available or in times of manufacturers shortages: Step 1. Using a filter needle, measure 3ml of Sodium Chloride 30% into a 5ml syringe Step 2. Using a transfer device, add the 3mL of Sodium Chloride 30% to a 50mL syringe Step 3. Further dilute to 50mL with glucose 5%, glucose 10% (as per prescription) Maths to support above: Sodium Chloride 30% 10mL contains 5mmol per 1mL Therefore, 3mL = 15mmol Overall, 15mmol in 50mL which gives a concentration of 0.3mmol per 1mL i.e. 1.8% concentration Example label: | | | | | |
| | DRUGS ADD | ED TO TH | | | ON | |
| | PATIENT Baby A | | WA | RD N | ncu | |
| | DRUG Sodíum Chloride O.3mmol per ml | 1.8% | | CH No. | PREP'D BY HH CHECKED BY | |
| | Diluent, Glucose 10% To 50mL JH | | | | | |
| | DATE PREP'D 21/03/23 TIME PREP'D | EXP. DATE 22/03/23 EXB_JME | | ROUTI | | |
| | DISCONTINUE IF CLOUDINESS OR PRECIPITATE DEVELOPS. | | | | | |
| Prescribing | Prescribe as per Trust prescribing policy on neonatal prescription chart | | | | | |
| SMART pump directions | Load Syringe, prime line using the pump for accurate dosing. Open 'NICU' folder then open 'sodium CHLORide' programme. Enter the Baby's weight in kg and confirm Enter the Total Volume to be Infused VTBI in mls Enter/confirm the dose in mmol/kg/24h | | | | | |

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| | Visually confirm the rate (ml/h) against the prescribed dose (mg/kg/min) Perform STOP moment with medical team (Pump against prescription) Connect to Child Press start button |
|------------------------|---|
| Compatibility issues | See Y-Site compatibility chart |
| Additional Comments | Infusions should be prepared immediately before use and assigned a 24 hour expiry after preparation. |

Note: The contents of this monograph should be read in conjunction with information available in the BNFC and Medusa

References:

UHDB aseptic worksheet, neonatal sodium 1.8% correction, available on QPulse, last accessed 15.03.23 Medusa, paediatric sodium chloride, available on line <u>Injectable Medicines Guide - Display - Sodium chloride - Intravenous - Version 4 - IVGuideDisplayMain.asp (wales.nhs.uk)</u> last accessed 15.03.23