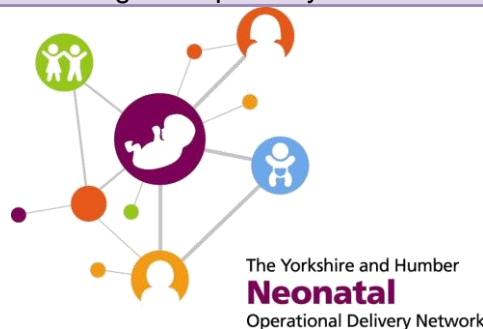


Yorkshire and Humber Neonatal Operational Delivery Network

Drug Administration Guide

Propofol

| | |
|--------------------------------|--|
| Indication | Elective or semi-elective intubation |
| Dose | 2mg/kg Maximum 4mg/kg in a 24 hour period |
| Route of administration | Slow intravenous injection |
| To prepare | 0.5% (5mg/mL) 20mL ampoules. Other strength vials may be available so the strength should be checked carefully prior to administration. Withdraw the required dose and give over 1-2 minutes followed by a slow IV flush of 0.9% sodium chloride. |
| Compatibilities | Glucose 5%, sodium chloride 0.9%, aminophylline, calcium gluconate, fentanyl, furosemide, heparin, insulin, ketamine, milrinone, noradrenaline, potassium chloride. |
| Known incompatibilities | Amphotericin, atracurium, calcium chloride, ceftazidime, gentamicin, phenytoin, vancomycin. |
| Notes | Dosing is based on advice from the Leeds paediatric pain team. Doses may differ to those in the Neonatal Formulary and the BNFc. Propofol must not be administered via a microbiological filter (filters with a pore size less than 5 µm). There is a risk of hypotension when giving propofol. If there is no compatibility information for specific drugs, do not assume compatibility. For incompatible drugs or those with no compatibility information use a separate line or, for short infusions, flush well between drugs. For side-effects see the BNFc |
| References | Neonatal Formulary 7 th Edition, Leeds Teaching Hospitals neonatal prescribing and administration monograph, Handbook on Injectable Drugs, BNFc, Thames Valley Y-Site Intravenous Drugs Compatibility Chart. |



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Clinicians must accept individual responsibility for using this information and prescribing safely.