

Yorkshire and Humber Neonatal Operational Delivery Network
Drug Administration Guide

Morphine Sulphate (for Neonatal Abstinence Syndrome)

Indication	Neonatal abstinence syndrome
Dose	<p>40 micrograms/kg every 4 hours</p> <p>If the infant remains symptomatic despite use of the highest dose in this regime, the maximum dose should be increased until symptoms are controlled.</p> <p>If symptoms are controlled for a minimum period of 24 hours morphine should be slowly reduced, initially by reducing the dose following the regime below and by then more slowly reducing dose interval.</p> <p>30 micrograms/kg every 4 hours 20 micrograms/kg every 4 hours 10 micrograms/kg every 4 hours 5 micrograms/kg every 4 hours</p> <p>Changes should not be made at intervals of less than 24 hours. There is a lack of consistency between published sources as to whether dose or dose interval should be reduced first and/or more aggressively.</p>
Route of administration	Oral Nasogastric tube Nasojejunal tube
To prepare	100 micrograms in 1ml oral solution
Notes	<p>Symptoms should be recorded using local unit guideline/scoring system.</p> <p>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.</p> <p>For side-effects see the BNFc - Morphine sulphate BNFc</p>
References	Leeds Teaching Hospitals neonatal prescribing and administration monograph, BNFc, Neonatal Formulary 7 th edition.



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Date produced: December 2017 Review date: December 2019 Author: Laura Dalton, Network Leadership Fellow
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Clinicians must accept individual responsibility for using this information and prescribing safely.