

FUROSEMIDE (FRUSEMIDE)

FORM Ampoules containing:
20mg in 2ml, 50mg in 5ml or 250mg in 25ml (all 10mg in 1ml)

INDICATION Diuretic for the treatment of oedema or oliguria.

DOSE RANGE

AGE	DOSE	FREQUENCY	ROUTE
Neonate	500microgram/kg – 1mg/kg	Every 12 -24 hours	IV
1-6months	500microgram/kg – 1mg/kg	Every 8 hours	IV
Neonate -6months	2 - 12mg/kg/day	Continuous	IV infusion

RECONSTITUTION Already in solution

DILUTION Can be given undiluted but if required dilute with Sodium Chloride 0.9% as follows;

Furosemide 10mg in 1ml solution	1ml
Sodium Chloride 0.9%	up to 5ml total

This gives a 2mg in 1ml solution. Use the required volume.

METHOD OF ADMINISTRATION

IV Injection

Give slowly over 5-10minutes at a usual rate of 100microgram/kg/minute not exceeding 500microgram/kg/minute (maximum 4mg/minute)

IV Infusion

Dilute to a concentration of 1mg in 1ml. Give total daily dose as an infusion over 24 hours For fluid restricted patients may be administered undiluted **via a central line.**

COMPATIBILITY

Solution compatibility	Sodium chloride 0.9%
Solution incompatibility	Glucose containing solutions, TPN
IV Line compatibility	, aminophylline, insulin, potassium chloride, sodium bicarbonate, sodium nitroprusside
IV Line incompatibility	Adrenaline, atracurium, dobutamine, dopamine, fluconazole, gentamicin, hydralazine, isoprenaline, midazolam, milrinone, morphine, noradrenaline, rocuronium, vancomycin, vecuronium,

THIS LIST IS NOT EXHAUSTIVE PLEASE CONTACT PHARMACY FOR FURTHER INFORMATION ON COMPATIBILITY WITH ANY MEDICINES NOT INCLUDED

CAUTIONS, CONTRA-INDICATIONS AND SIDE EFFECTS

- See Summary of Product Characteristics and most recent edition of BNF for Children (links below)

West of Scotland NEONATAL Parenteral Drug Monographs

SPECIAL MONITORING REQUIREMENTS

- Fluid balance, blood pressure, renal function and electrolytes.
- Maintain urinary output.
- Correct hypotension or hypovolaemia before commencing therapy.
- Long term use in neonates may lead to nephrocalcinosis, monitor renal function and perform renal ultrasonography.
- May cause hyperglycaemia and increased insulin requirement in patients with diabetes or latent diabetes.

SODIUM CONTENT

0.17mmol/ml (Hameln), 0.13mmol/ml (Wockhart)

PH

8.7-9.3

LICENSED STATUS

Licensed.

LINKS

[BNF for Children](#) / [Electronic Medicines Compendium](#)

APPLICABLE POLICIES

[West of Scotland Neonatal Guidelines](#):

Consult local policy if applicable

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Administer reconstituted solutions immediately.

All vials, ampoules and infusion bags are for single use only unless otherwise stated.

Dose may vary depending on indication, age, renal function, hepatic function, and concomitant medications. This monograph should be used in conjunction with the package insert, BNF for Children, and Summary of Product Characteristics. For further advice contact your clinical pharmacist or pharmacy department.