

Guidelines for NON - CRITICAL CARE staff

Common drugs

* PROPOFOL 1% CARD*

1st Line sedation

(When there is a national shortage of 2% Propofol infusion, 1% Propofol can be used)

The following drugs are commonly used in Intensive Care Unit (ICU). This card is for drugs used with GENERAL ITU PATIENTS. For NEURO patients, see neuro prompt cards. **Please note all dose ranges provide a minimum and maximum range for reference only. Plan for initiation and titration range will be as per the ICU clinician or Anaesthetist.**

SEDATION:

PROPOFOL 1% infusion preparation

CHECK % and concentration of solution. Propofol 1% concentration: 10mg/mL.

Neat solution is available in two sizes: 50mL bottle or 20mL ampoules.

- **50mL bottle:** Draw up in 50mL syringe (concentration equals 500mg in 50mL)
- OR**
- **20mL ampoule:** Draw up 3x 20mL amps in 60mL (concentration equals 600mg in 60mL).

Note: 50mL syringe has 60mL capacity.

Administration

Dosing range: 2-4mg/Kg/hr titrated to desired level of sedation with MAXIMUM dose of 400mg/hr.

By instruction of ITU consultant only doses >400mg/hr may be deemed necessary.

BOLUS: 10mg (1mL) – 40mg (4mL) if required

Pump rate: Usual pump rates: 4-24mL/hour titrated as per desired level of sedation.

Common side effects: Over-sedation, reduced respiratory rate, hypotension – especially following boluses> CONTACT ICU CLINICIAN OR ANAESTHETIST IF ANY OF THESE OCCUR



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Additional instructions for propofol 1% at rates >20mls/hr

- ✓ If using rates >20mL/hr, it is acceptable to give propofol 1% via a VOLUMETRIC pump: the bottle can be spiked with a vented IV giving set and run via volumetric pump at the appropriate rate.
- ✓ If administering via a volumetric pump, you may find it useful to have a 1% solution drawn up in a 20mL syringe labelled with expiry date and time – this can be used to administer boluses, as giving boluses via a volumetric pump requires resetting the pump
- ✓ 'bolus syringes' must be the SAME concentration as the infusion. They must also be prepared freshly by a nurse and destroyed safely at the end of their shift if any remains – you must not 'hand over' a 'bolus syringe' at the end of your shift

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Unsure about drug/dose?

ask senior ICU colleague

ask ICU practice educator

ask pharmacist