

NEONATAL MEDICATION PROTOCOLS

SODIUM NITROPRUSSIDE
Created by: NCCU
Date for review: Oct 2016

NCCU Clinical Guidelines
KEMH/PMH
Perth, Western Australia

DRUG:	SODIUM NITROPRUSSIDE
PRESENTATION:	Vial: 50 mg/2mL
ACTION & INDICATION:	Sodium nitroprusside is a hypotensive agent and is consistently effective in the management of hypertensive emergencies irrespective of aetiology. It is contraindicated in compensatory hypertension e.g. A-V shunt and coarctation of the aorta. Blood pressure reduction by SNP is a temporary measure and longer acting hypotensive agents should be commenced as soon as possible while blood pressure is controlled.
DOSE :	Initially 0.5 microgram / kg / minute , increased according to response to a maximum dose of 6 microgram / kg / minute.
PREPARATION:	Use solution prepared in Pharmacy if available. For intravenous infusion Diluent: 5% Glucose For dilution instructions refer to the Calculation of Drug Infusion table at the front of this manual.
ADMINISTRATION:	Intravenous infusion. Rate determined by continuous monitoring of blood pressure. Terminate infusion slowly over 15-30 minutes to avoid any rebound effects.
ADVERSE EFFECTS:	Severe hypotension Dyspnoea Dizziness Vomiting Ataxia Metabolic acidosis <u>Cyanogen toxicity</u> Coma Imperceptible pulse Absent reflexes Dilated pupils Pink colouring of skin Shallow respiration Blood cyanide levels must be monitored in patients receiving high doses for several days.
COMMENTS:	Nitroprusside infusion must be light protected: When diluted nitroprusside solution should be very faintly brownish in colour. Discard if the infusion solution shows any blue, green or red discolouration or particulate matter. Infusion is stable for 24 hours if protected from light. Stable for 4 hours if not adequately protected.
REFERENCES:	Paediatric Pharmacopoeia 13 th Ed Royal Children's Hospital Melbourne Neonatal Pharmacopoeia 2 nd Ed Royal Women's Hospital Melbourne
DATE :	October 2013