



NEONATAL

ALBUMIN (HUMAN) 4%



This document should be read in conjunction with this [DISCLAIMER](#)

HIGH RISK Medication

There are 2 strengths of Albumin (Human) available, Albumin 4% and Albumin 20%.
Incorrect product selection could lead to severe circulatory overload.

Presentation	Vial: 40mg/mL (4%) 50mL
Blood Product	Albumin is manufactured from pooled human plasma. Please read with Transfusion Medicine Protocols – Albumin 4% . Written consent to blood products required. Refer to Transfusion Medicine Protocol – Blood Product Prescription Consent and Refusal .
Action & Indication	Maintains plasma colloid oncotic pressure. <ul style="list-style-type: none"> • Hypovolaemia (Plasma Expander)
Dose	<u>HYPOVOLAEMIA</u> IV: 0.5 – 1 g/kg/dose (12.5 – 25 mL/kg)
Administration	Intravenous infusion: Infuse over 30 - 60 minutes. Faster infusion rates may be clinically necessary, refer to Neonatologist. Refer to Transfusion Medicine Protocols – Albumin 4% for specific administration advice.
Monitoring	Temperature, pulse, respiration, blood pressure. Observe for signs of hypervolemia, pulmonary oedema and cardiac failure. Refer to Transfusion Medicine Protocols – Albumin 4%
Preparation	Albumin is a clear or slightly opalescent solution. If it appears cloudy, do not use. Discard any unused solution.
Adverse Effect	Common: Chills, fever, vomiting, urticaria Serious: Hypertension, vascular overload causing pulmonary oedema, cardiac failure, Intraventricular haemorrhage, anaphylaxis
Related clinical guidelines	Transfusion Medicine Protocols – Albumin 4%

Comments	Compatible with: Sodium chloride 0.9% Glucose 5% and glucose/saline solutions.
References	<ol style="list-style-type: none"> 1. Zenk KE. Neonatology: management, procedures, on-call problems, diseases, and drugs. Gomella TL, Cunningham MD, Eyal FG, editors. New York: McGraw-Hill; 2009. 2. Pediatric and Neonatal Dosage Handbook 21st Edition . Lexicomp 3. Neofax (accessed February 2017) 4. Frank Shann Drug Doses 5. Handbook of Injectable Drugs, Trissell

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