



NEONATAL MEDICATION PROTOCOLS

VECURONIUM
 Created by: NCCU
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NCCU Clinical Guidelines
 KEMH/PMH
 Perth, Western Australia

DRUG:	VECURONIUM
PRESENTATION:	Vial: 10mg
ACTION & INDICATION:	<p>Non-depolarising neuromuscular blocking agent, produces skeletal muscle paralysis. Causes less tachycardia and hypotension than does pancuronium.</p> <p>Used for:</p> <ul style="list-style-type: none"> • Baby fighting ventilator and difficult to ventilate • Moderately severe to severe respiratory distress needing increased ventilator settings.
DOSE:	<p>Intermittent dosing:</p> <p>30 -150 microgram /kg /dose Usual dose: 100 microgram/kg Dose may be repeated at intervals of 1 to 2 hours as needed for paralysis.</p> <p>Continuous infusion:</p> <p>Infusion rate: 1 – 1.5 microgram/kg/minute</p>
PREPARATION:	<p>Use solution prepared by pharmacy. If unavailable dilute as follows:-</p> <p>Add 10mL Water for Injections to 10mg vial =1mg/mL</p> <p>Withdraw 6mg of vecuronium per kg of babys' weight (6mL/kg) and dilute to 50mL with appropriate infusion fluid.</p> <p>This will give the following infusion rates.</p> <p>0.5 mL /hour = 1 microgram / kg / min 1 mL /hour = 2 microgram / kg / min 2 mL /hour = 4 microgram / kg / min</p> <p>If a different concentration is required, refer to the Calculation of Drug Infusion table.</p>
ADMINISTRATION:	<p>Intravenous: Over 30 seconds</p> <p>Onset of action: 1-2 minutes</p> <p>Continuous infusion</p>
ADVERSE EFFECTS:	<p>Heart rate or blood pressure may decrease when used with opioids.</p> <p>Masking of convulsions.</p>
COMMENTS:	<p>Protect from light.</p> <p>Discard reconstituted vial immediately after use</p> <p>Use in conjunction with Liquifilm Tears® for eye lubrication while paralysed.</p> <p>Antidote: Neostigmine (See protocol)</p>
REFERENCES:	<p>Neofax 2013</p> <p>Pediatric Dosage Handbook 17th Ed</p>
DATE:	October 2013