INDOMETACIN

Read in conjunction with Disclaimer

Formulary: Restricted Requires Neonatologist review within 24 hours of initiation	
Presentation	**Prefilled syringe:** 1000 microg/5 mL (KEMH Pharmacy) **Oral suspension:** 250 microg/mL
Classification	Non-steroidal anti-inflammatory (NSAID)
Indication	Haemodynamically significant patent ductus arteriosus
Contraindications	• Anuria or oliguria (less than 0.5 to 1 mL/kg/hour) • Serum creatinine greater than 150 micromol/L • Thrombocytopenia or coagulopathy • Active bleeding • Necrotising enterocolotis (NEC) • Ductal dependant congenital heart disease • Pulmonary hypertension
Monitoring	Assess for ductal closure, urine output, urea, creatinine, electrolytes
Compatibility	**Fluids:** Sodium chloride 0.9%, water for injection Refer to KEMH Neonatal Medication Guideline: Y-Site IV Compatibility in Neonates
Incompatibility	Calcium gluconate, dobutamine, dopamine, gentamicin, glucose 10%, midazolam, morphine, vancomycin
Interactions	**Aminoglycosides & Vancomycin:** Dose may need to be modified if indometacin affects renal function. **Digoxin:** Reduces Indometacin volume of distribution, an increased dose may be required. **Diuretics:** Concomitant use of diuretics may increase incidence of renal impairment.
Side Effects	**Common:** Hyponatraemia, hyperkalaemia, abdominal distension, oedema **Serious:** GI bleeding, transient ileus, renal impairment, necrotising enterocolitis (NEC)
Storage & Stability	**Prefilled syringe:** Refrigerate between 2 to 8°C. Do not freeze. **Oral suspension:** Refrigerate between 2 to 8°C. Do not freeze.
Comments	Indometacin is associated with transient renal impairment. Late and prolonged treatment of the ductus arteriosis with indometacin may increase the incidence of NEC.

ORAL

Presentation (for oral use)	**Oral suspension**: 250 microg/mL
Dosage	**Haemodynamically significant patent ductus arteriosus** *Neonate must be on at least 100mL/kg/day of oral feeds before starting oral administration*

Age	Dose	Frequency
All ages	200 microg/kg	Once daily (for 3 to 5 days)

Preparation	Oral suspension is available
Administration	• Shake well before use • Draw prescribed dose into oral/enteral syringe • Can be given Oral/OGT/NGT • Give with or soon after a feed.

INTRAVENOUS INFUSION

Presentation (for IV use)	**Prefilled syringe:** 1000 microg/5 mL (KEMH Pharmacy)
Dosage	**Haemodynamically significant patent ductus arteriosus** Given **once daily for 3 days** as per table below:

Age	First dose	Subsequent doses
All ages	200 microg/kg	100 to 200 microg/kg

- A further 2 daily doses may be given if required (maximum 5 doses total)

Preparation	Prefilled syringes are available
Administration	**IV infusion:** Infuse over 20 to 30 minutes • Flush bung with 0.5 mL of sodium chloride 0.9% over at least 30 minutes to avoid rapid administration of remaining medication

Related Policies, Procedures, and Guidelines

CAHS Clinical Practice Guidelines:

Patent Ductus Arteriosus (PDA)

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