# NEONATAL MEDICATION PROTOCOLS

**DRUG:**

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<th>MORPHINE SULPHATE</th>
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**PRESENTATION:**

- Syringe: 1mg/mL (1,000 microgram/mL)
- Mixture: 1mg/mL (as hydrochloride)

**ACTION & INDICATION:**

Opioid analgesic
Sedative to assist ventilation
Management of opioid dependent infants with Neonatal Abstinence Syndrome

**DOSE:**

DOSE MUST BE ORDERED IN MICROGRAMS

- Intermittent dose: 100-200 microgram/kg/dose 4-6 hourly
- Infusion dose: 10-40 microgram/kg/hour

- Neonatal Abstinence Syndrome: See NCCU guidelines at the back of this manual.

**PREPARATION:**

Use solution prepared in Pharmacy if available.

- Syringe contains 1000microgram in 1mL
  - = 100 microgram in 0.1mL

**Infusion dilution:**

- Dilute 500microgram (0.5mL) per kilogram of baby's weight to 50mL with appropriate infusion fluid
- Infuse at 1mL/hour = 10 microgram/kg/hour

*Example: To prepare an infusion solution for a 780g baby*

1. Take 500 microgram (0.5mL) x 0.78 = 390microgram (0.39mL ) and dilute to 50mL with appropriate infusion solution
2. Infuse at 1mL/hour = 10 microgram/kg/hour

- Compatible with glucose, Sodium chloride 0.9%, glucose/saline solutions.

**ADMINISTRATION:**

- Intramuscular: As per NCCU policy. Use undiluted.
- Intravenous injection: over 3-5 minutes, or Intravenous infusion
- Oral

**ADVERSE EFFECTS:**

- Hypotension
- CNS depression, respiratory depression.
- Monitor respiratory and cardiovascular status

**COMMENTS:**

- Antidote: Naloxone (see monograph)
- If baby is has been on a morphine infusion for a least one week, wean morphine dose slowly

**REFERENCES:**

- Gomella: Neonatology 5th Ed
- Neofax 2013

**DATE:**

October 2013