

NEONATAL Medication Monograph

KETAMINE

This document should be read in conjunction with this **DISCLAIMER**

Highly Restricted: Requires Neonatologist approval before commencing

A HIGH RISK Medication

Presentation	Vial: 200mg/2mL		
Description	N-methyl-D-aspartate (NMDA) antagonist.		
Indications	Procedural sedation for term / near term infants		
Precautions	Use with caution in infants with following conditions: • Hypertension • intracranial bleeding • hydrocephalus • cardiac disease		
Dosage	IV: 0.5 to 2mg/ kg/ dose Start with lower dose if using with another CNS depressant.		
Adverse Reactions	Common: hypertension, sinus tachycardia, increased muscle tone Serious: airway obstruction, bradycardia, apnoea, respiratory depression, increased intracranial pressure, increased intraocular pressure, laryngospasm		
Compatible Fluids	Sodium chloride 0.9%, Glucose 5%		
Preparation	IV: Withdraw 1mL (100mg) of ketamine and make up to 50mL with a compatible fluid. Final concentration is 100mg/50mL = 2mg/mL		

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Administration	IV: Slow push over at least 1 minute. Do not exceed 0.5mg/kg/minute. Rapid administration may result in respiratory depression and hypertension.	
Monitoring	Respiratory and cardiovascular status	
Storage	Store at room temperature, below 25°C	
References	Ketamine Paediatric drug information [Internet], UpToDate [Online database]. Cited 27 th August 2020 Clinical Pharmacology [Online database]. Elsevier. Cited 27 th August 2020. Available from www.clinicalkeycom.pklibresources.health.wa.gov.au/pharmacology/	

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For any enquiries relating to this guideline, please email KEMH.PharmacyAdmin@health.wa.gov.au

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