

NEONATAL Medication Monograph

PHOSPHATE (Buffered)

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

Unrestricted: Any prescriber may initiate treatment as per guideline

Presentation	Phosphate (Buffered) 1mmol/mL (KEMH)		
Description	Phosphate Supplementation		
Indications	Phosphate supplement for infants born <35 weeks gestation not receiving premature formula or fortified breastmilk for treatment of metabolic bone disease.		
Contraindications	Hyperphosphatemia		
Precautions	Cardiac disease, dehydration, sodium and potassium concentrations of preparations, renal impairment		
Dosage	Oral:		
	1mmol/ kg/ dose 12 hourly (as Phosphate ions)		
Adverse	Common: GI discomfort, diarrhoea, hypotension		
Reactions	Serious: hypocalcaemia, hyperphosphataemia		
Interactions	Concurrent administration with calcium carbonate mixture may reduce absorption due to binding and formation of insoluble salts; separate dosing times by TWO hours		
Preparation	Prepared in KEMH Pharmacy		
	Each 1mL contains:		
	Phosphate ions 1 mmol		
	Sodium ions 1.6 mmol		
	Potassium 0.2 mmol		
Administration	May be given at any time with regard to feeds		
Monitoring	Serum calcium and phosphate levels		
Storage	Store at room temperature, below 25°C		
Interactions	Interaction with Calcium products – ensure dose times are separated		

Notes	Calcium Supplement to be prescribed when phosphate supplements initiated to prevent metabolic bone disease Do not mix with calcium carbonate mixture, administer at different times	
References	Paediatric Formulary Committee. BNF for Children: 2018-2019. Pharmaceutical Press; 2018. Ainsworth SB. Neonatal formulary 7: drug use in pregnancy and the first year of life. Seventh ed. Chichester (West Sussex): John Wiley & Sons Inc.; 2015. 631 p. 405	
Related clinical guidelines	Vitamin and Mineral Supplementation	

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Access the current version from the WNHS website.

For any enquiries relating to this guideline, please email $\underline{\text{KEMH.PharmacyAdmin@health.wa.gov.au}}$

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