



NEONATAL MEDICATION GUIDELINE					
Suxamethonium					
Scope (Staff):	Nursing, Medical and Pharmacy Staff				
Scope (Area):	KEMH NICU, PCH NICU, NETS WA				
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# **Quick Links**

Dose Preparation & Side Effects & Monitoring

Administration Interactions

### Restrictions

**Formulary: Highly Restricted** 

# HIGH RISK Medication

Inadvertent use in patients without the availability of medical staff skilled in airway support can lead to respiratory arrest, permanent harm or death

# **Description**

Depolarising, short acting neuromuscular blocker and skeletal muscle relaxant/paralytic

### **Presentation**

Prefilled Syringe: 10mg/2mL (KEMH)

Ampoule: 100mg/2mL

### **Storage**

**Prefilled Syringe:** Store at room temperature, below 25°C **Ampoule:** Refrigerate, do not freeze. Store at 2°C to 8°C

### Indication

Elective endotracheal intubation - premedication

### Dose

### **Elective endotracheal intubation**

### IV:

2mg/kg immediately prior to intubation

May be repeated if required – repeated dosing increases the risk of bradycardia

Must be accompanied by adequate analgesia or sedation

# **Preparation**

Use prefilled syringe if available. If prefilled syringe is unavailable, prepare the following using the ampoule:

## <u>IV</u>

**Dilution:** Take 1mL (50mg) from ampoule and dilute to 10mL with compatible fluid. Concentration is 50mg/10mL. Final concentration is 5mg/mL

### Administration

#### IV bolus

Give over 10 to 30 seconds

# **Compatible Fluids**

Sodium chloride 0.9%, Glucose 5%, Glucose 10%

# **Y-Site Compatibility**

Refer to KEMH Neonatal Medication Guideline: Y-Site IV Compatibility in Neonates

### **Side Effects**

Common: hypertension, hypotension, bradycardia

Serious: malignant hyperthermia, hyperkalaemia

### Comments

Very rapid onset (30–60 seconds) and short duration of action (3–5 minutes) after IV administration.

Continuous administration over a prolonged period of time may result in irreversible blockade (phase II block).

Should not be used without additional sedation.

### References

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Keywords	Suxamethonium, succinylcholine, neuromuscular blocker, intubation							
Document Owner:	Head of Department - Neonatology							
Author/ Reviewer	KEMH & PCH Pharmacy/Neonatology Directorate							
Version Info:	V5.0							
Date First Issued:	03/2013	Last Reviewed:	20/03/2023		Review Date:	20/03/2025		
Endorsed by:	Neonatal Directo	orate Management		Date:	28/03/2023			
NSQHS Standards Applicable:	Std 1: Clinical Governance				Std 5: Comprehensive Care			
	Std 2: Partnering with Consumers				Std 6: Communicating for Safety			
	Std 3: Preventing and Controlling Healthcare Associated Infection				Std 7: Blood Management			
	Std 4: Medication Safety			Std 8: Recognising and Responding to Acute Deterioration				
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