

Furosemide (Derby Only)

Indication	Oedema e.g. due to heart failure or earlier aggressive fluid resuscitation			
Dose	<p>Bolus Initially 20-40mg up to TDS. Doses over 50mg must be given by short infusion</p> <p>Continuous Infusion 0 – 20mg per hour titrated to achieve urine output target</p>			
Preparation	<p>Furosemide injection contains 10mg per ml</p> <p>Bolus</p> <ol style="list-style-type: none"> 1. Draw up into a syringe using a filter needle 2. Dilute to 10-20ml with sodium chloride 0.9% <p>Short Infusion</p> <ol style="list-style-type: none"> 1. Draw up the required dose into a syringe using a filter needle 2. Add to a 50ml bag of sodium chloride 0.9% <p>Continuous Infusion Draw up 25ml of Furosemide into a 30ml syringe using a filter needle</p>			
Administration	<p>Given via a peripheral or central line Maximum rate for all doses should not exceed 4mg per minute. In severe renal impairment patient, maximum rate should not exceed 2.5mg/min When using short infusions via a Volumed VP7000 pump use the “Furosemide” program and enter the concentration of furosemide in the bag when prompted</p>			
Shelf-life	24 hours at room temperature			
Common Compatibility Issues	Furosemide is considered compatible with aminophylline at concentrations normally used on UHDB ICU. See unit compatibility chart or MEDUSA for more information.			
Additional information	<p>If given too fast furosemide can cause nephrotoxicity and ototoxicity</p> <p>Electrolytes should be closely monitored as hypokalaemia and hyponatraemia can occur..</p>			
Sample Label	DRUGS ADDED TO THIS INFUSION			
	PATIENT A. Patient (A. Number)		WARD ICU	
	DRUG Furosemide (...ml Neat)	AMOUNT ...mg (10mg/ml)	ADD BY	CHECKED BY
	DATE ADDED TIME ADDED	EXP. DATE EXP. TIME	BATCH No.	
	DISCONTINUE IF CLOUDINESS OR PRECIPITATE DEVELOPS			

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Documentation Controls

Development of Guideline:	Pharmacist – Critical Care & Theatres
Consultation with:	Pharmacy Department
Approved By:	ICU Sister's Meeting: June 2023 ICU Risk & Quality Meeting: August 2023 Surgical Division
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Key contact:	Pharmacist – Critical Care & Theatres

References

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***** End of Monograph *****