

ACETYLCYSTEINE – MODIFIED 12H OR ‘SNAP’ REGIMEN

Indication	For the treatment of patients with paracetamol overdose																						
Dose	<p>Bag 1: 100mg per kg Acetylcysteine in 200ml glucose 5% / NaCl 0.9% over 2 hours.</p> <p>Bag 2: 200mg per kg Acetylcysteine in 1000ml glucose 5% / NaCl 0.9% over 10 hours. Use actual body weight with a maximum body weight of 110kg. Use half volume for patients under 40kg.</p>																						
Preparation	<p>Acetylcysteine ampoules contain 2000mg per 10ml (200mg per ml). Total dose is 300mg per kg actual body weight over 12 hours</p> <p>Bag 1:</p> <ol style="list-style-type: none"> 1. Withdraw 50ml plus volume equivalent of acetylcysteine from 250ml bag of Glucose 5% or NaCl 0.9%. 2. Draw up required volume of acetylcysteine using filter needle and add to fluid bag. <p>Bag 2:</p> <ol style="list-style-type: none"> 1. Withdraw volume equivalent of acetylcysteine from 1000ml bag of Glucose 5% or NaCl 0.9%. 2. Draw up required volume of acetylcysteine using filter needle and add to fluid bag. 																						
Administration	Acetylcysteine can be infused using a peripheral or central line. Rate as per dosing protocol.																						
Shelf-life	24 hours at room temperature (after dilution).																						
Common Compatibility Issues	Acetylcysteine must have a dedicated lumen. Can be made in NaCl 0.9% if required, but Glucose 5% is preferred.																						
Additional information	<p>Levels taken prior to 4 hours post-ingestion are unreliable. Recheck INR, LFTs, VBG (venous pH and lactate) and serum creatinine after the 2-bag regimen. May be given neat (undiluted) via central line if fluid restriction required. The modified 12h, or ‘SNAP’ regimen, is currently not licensed or endorsed by the MHRA. If recommended by the liver team, bag 3 (200 mg / kg) in 1000ml glucose 5% can be given over 10 hours and repeated daily. Resulting solution may be colourless, slight pink or light purple. This colour change does not indicate a change in safety or efficacy.</p>																						
Sample Label	<table border="1" style="width: 100%; background-color: yellow;"> <tr> <th colspan="4" style="text-align: center;">DRUGS ADDED TO THIS INFUSION</th> </tr> <tr> <td colspan="3"> PATIENT <i>A. Patient (A. Number)</i> </td> <td> WARD <i>ICU</i> </td> </tr> <tr> <td> DRUG <i>Acetylcysteine _____</i> <i>In _____ ml Glucose 5%</i> <i>(Bag _____ of _____)</i> </td> <td> AMOUNT <i>_____ mg</i> <i>_____ mg/ml</i> </td> <td> ADDED BY </td> <td> CHECK BY </td> </tr> <tr> <td> DATE ADDED TIME ADDED </td> <td> EXP. DATE EXP. TIME </td> <td colspan="2"> BATCH No. </td> </tr> <tr> <th colspan="4" style="text-align: center;">DISCONTINUE IF CLOUDINESS OR PRECIPITATE DEVELOPS</th> </tr> </table>			DRUGS ADDED TO THIS INFUSION				PATIENT <i>A. Patient (A. Number)</i>			WARD <i>ICU</i>	DRUG <i>Acetylcysteine _____</i> <i>In _____ ml Glucose 5%</i> <i>(Bag _____ of _____)</i>	AMOUNT <i>_____ mg</i> <i>_____ mg/ml</i>	ADDED BY	CHECK 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

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