UNIVERSITY HOSPITALS OF DERBY & BURTON NHS FOUNDATION TRUST DRUG MONOGRAPH FOR USE ON ADULT INTENSIVE CARE UNITS

Acetazolamide			
Indication	Metabolic Alkalosis		
Dose	500mg as a "once only" dose		
Preparation	Acetazolamide vials contain 500mg acetazolamide		
	1. Draw 10ml of Water for Injections into a syringe		
	2. Add to the vial		
	Draw up the dose into a 10ml syringe		
	Given as a slow bolus injection over at least 3 minutes		
Administration	Acetazolamide can be given via a peripheral or central line		
Shelf-life	Use immediately		
Common Compatibility Issues	Bolus dose is not applicable		
Additional information	Due to the pH of the reconstituted injection it is		
	preferable to administer via a central line. If administered peripherally it must be given into a large		
	vein and the cannula site monitored closely.		
	Carbonic anhydrase inhibitors can cause increased		
	excretion of bicarbonate, sodium and potassium so levels should be monitored		
	Metabolic acidosis can cause hypokalaemia so potassium levels should be monitored closely and		
	replaced as necessary		
	Acetazolamide is an sulphonamide so patients allergic to		
	sulfamethoxazole or hydrochlorothiazide should not receive it		
	Use of acetazolamide in this way is unlicensed		
Sample Label	DRUGS ADDED TO THIS INFUSION PATIENT WARD		
	A. Patient (A. Number)		ICU
	DRUG Acetazolamíde	AMOUNT ADE 500mg BY	D CHECKED BY
	DATE ADDED TIME ADDED	EXP. DATE EXP. TIME	BATCH No.
	DISCONTINUE IF CLOUDINESS OR PRECIPITATE DEVELOPS		
	Not required as a bolus dose		

Acetazolamide

For review August 2025

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 Review Date: August 2025 Key contact: Pharmacist – Critical Care & Theatres

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*** End of Monograph ***