

Acetylcysteine
 (Nebulisation)

Indication	Mucolytic
Dose	600mg QDS
Preparation	Ampoules contain 2000mg in 10ml (200mg per ml) Draw up 3ml (600mg) into a syringe
Administration	For nebuliser use only Recommended procedure: 1. Give a salbutamol 2.5mg nebule, then wait 3 – 5 minutes 2. Give acetylcysteine, then wait 30minutes 3. Give Sodium chloride 0.9% 5ml nebule
Shelf-life	Use immediately
Common Compatibility Issues	Not applicable as a nebulised product
Additional information	Acetylcysteine is not licensed for use as a mucolytic. Licensed formulations for enteral administration are available (carbocisteine capsules and liquid.) The current evidence is that carbocisteine is equivalent to acetylcysteine therefore consider carbociseteine if a long term mucolytic is indicated. If effective can loosen a large volume of mucous so may require increased suctioning. Acetylcysteine can cause bronchospasm hence the need for the salbutamol prior to administration. Acetylcysteine has a bad odour.
Sample Label	Not required as prepared for nebulisation

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

Brayfield A (ed), Martindale: The Complete Drug Reference. [online] London: Pharmaceutical Press <<http://www.medicinescomplete.com/>> (accessed February 2022).

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