Intravenous Dobutamine

Dose: Initially 5microgram/kg/min adjusted according to response to 2-20 microgram/kg/min

Route of administration: Preferably via central line.
For children weighing less than or equal to 16Kg; 15mg x weight (Kg) in 50mL of glucose 5%
1mL/hr = 5microgram/Kg/min

For children weighing greater than 16Kg; 250mg in 50mL glucose 5%

Products available: 250mg in 20mL injection (12.5mg/mL)

To prepare an infusion: Preferred diluent: glucose 5%, Other diluents: sodium chloride 0.9%, glucose 10%

15mg x weight (Kg) in 50mL: Draw up 1.2mL/Kg of 250mg/20mL solution and make up to 50mL with the diluent
250mg in 50mL: Draw up 20mL of 250mg/20mL solution (250mg) and add to 30mL of required diluent

How to prescribe: Prescribe on an LTH critical care infusion drug chart. Document the amount (in mg) of dobutamine to be made up to 50mL. Name the diluent on the prescription sheet and state the dose required ensuring micrograms written in full.

Compatibilities: Acetylcysteine, adrenaline, alprostadil, amiodarone (in glucose 5%), atracurium, caffeine (citrate), calcium gluconate, clarithromycin, clonidine, dopamine, fluconazole, hydralazine, labetalol, meropenem, milrinone, morphine, noradrenaline, parenteral nutrition, potassium chloride, ranitidine, zidovudine

Incompatibilities: Aciclovir, ambisome, aminophylline, flucloxacillin, furosemide, heparin, indometacin, phentoyin, piperacillin/tazobactam, sodium bicarbonate

Notes: If there is no compatibility information for specific drugs, do not assume compatibility, use a separate line.

Solutions may turn pink due to oxidation of dobutamine; the colour may intensify with time. There is no significant loss of potency during the recommended storage period. Solutions that have turned pink may still be used, provided they were made less than 24 hours previously.

Do not flush the dobutamine line. On discontinuation of the dobutamine infusion run 0.5mL/hour of sodium chloride 0.9% if less than 10Kg or 1mL/hour of sodium chloride 0.9% if equal to or over 10Kg for 3 hours to clear the line. Dobutamine infusion can be concentrated up to 500mg in 50mL (central line only).


Provenance
Date Produced: May 2013
Valid until: April 2018
Review Date: April 2016
Author: Teresa Brooks, Paediatric Cardiac ICU Pharmacist
Quality Assurance Check by: Alex Hollwey, Paediatric Pharmacist
Produced by Clinical Pharmacy Services / Medicines Information
For further information contact medicines.information@leedsth.nhs.uk ext 65377

This information has been prepared by Leeds Medicines Management and Pharmacy Services for use by health care professionals at Leeds Teaching Hospitals NHS Trust