



## NEONATAL MEDICATION GUIDELINE

# Suxamethonium

**Scope (Staff):** Nursing, Medical and Pharmacy Staff

**Scope (Area):** KEMH NICU, PCH NICU, NETS WA

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**HIGH RISK Medication** 

Inadvertent use in patients without the availability of medical staff skilled in airway support can lead to respiratory arrest, permanent harm or death

## Description

Depolarising, short acting neuromuscular blocker and skeletal muscle relaxant/paralytic

## Presentation

**Prefilled Syringe:** 10 mg/2 mL (available at both PCH and KEMH)

**Ampoule:** 100 mg/2 mL

## Storage

**Prefilled Syringe:** Store at room temperature, below 25°C

**Ampoule:** Refrigerate, do not freeze. Store at 2°C to 8°C

## Indication

Elective endotracheal intubation - premedication

## Dose

### Elective endotracheal intubation

#### **IV:**

2 mg/kg immediately prior to intubation

May be repeated if required – repeated dosing increases the risk of bradycardia

Must be accompanied by adequate analgesia or sedation

## Preparation

**Use prefilled syringe if available.**

*If prefilled syringe is unavailable, prepare the following dilution using the ampoule:*

#### **IV**

***Dilution:*** Take 1mL (50 mg) from ampoule and dilute to 10 mL with compatible fluid.

Concentration is 50 mg/10 mL. Final concentration is 5 mg/mL.

## Administration

### **IV bolus**

Give over 10 to 30 seconds

## Compatible Fluids

Sodium chloride 0.9%, Glucose 5%, Glucose 10%

## Y-Site Compatibility

Refer to KEMH Neonatal Medication Guideline: [Y-Site IV Compatibility in Neonates](#)

## Side Effects

**Common:** hypertension, hypotension, bradycardia

**Serious:** malignant hyperthermia, hyperkalaemia

## Comments

Very rapid onset (30 to 60 seconds) and short duration of action (3 to 5 minutes) after IV administration.

Continuous administration over a prolonged period of time may result in irreversible blockade (phase II block).









Should not be used without additional sedation.

## References

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