Directions for Use B. Braun Melsungen AG · 34209 Melsungen, Germany

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Compound Sodium Lactate Intravenous Infusion

has a similar electrolyte composition as the extracel-

lular fluid. The lactate ion is gradually metabolised and

converted to bicarbonate in a concentration also

resembling that of extracellular fluid. Additionally the lactate ion exerts a slight alkalinising effect.

Because of its close resemblance to the plasma mineral

content, Compound Sodium Lactate Intravenous Infusion is used as fluid and electrolytes replacement.

The dosage depends on age, weight and clinical condi-

Flow rate: up to 100 drops/min \triangleq 300 ml/h.

Composition

Each 1000 ml contains:

- Active ingredients

Sodium Chloride

Sodium Lactate

- Excipients

Electrolytes:

Sodium

Calcium

Chloride

Osmolarity:

Indications

Dosage

tion of the patient.

General guideline for adults:

Average dose: 1000 ml/day

Characteristics

Potassium

Potassium Chloride

Calcium Chloride dihydrate

Water for Injections to

Bicarbonate (as lactate)



Compound Sodium Lactate Solution for Infusion

(Hartmann's Solution)

Route of administration

I. V.

6.00 q

3.12 g

0.40 g

0.27 g

1000 ml

mmol/l

5 2

131

111

29

278 mOsml/l

Contraindications

Compound Sodium Lactate Intravenous Infusion should not be used in patients with circulatory overload, congestive heart failure, hypertension, impaired renal function and severe liver damage, the latter because of the inability to convert lactate into bicarbonate.

It is further contraindicated in oedema with sodium retention and respiratory alkalosis.

Precautions

Clincial evaluation and periodic laboratory determinations are necessary to monitor changes in fluid balance, electrolyte concentrations, and acid-base balance during prolonged parenteral therapy or whenever the condition of the patient warrants such evaluation.

Caution must be exercised in the administration of compound sodium lactate infusion to patients receiving corticosteroids or corticotropin.

No other medication or substance should be added to this fluid unless known to be compatible.

Do not store solutions containing additives.

Solutions containing calcium ions should not be administered simultaneously through the same administration set as blood because of the likelihood of coagulation.

Warnings

Compound Sodium Lactate Intravenous Infusion should be used with great care, if at all, in patients with hyperkalemia, in conditions in which potassium retention is present, in patients with metabolic alkalosis.

The administration of lactate ions should be done with great care in those conditions in which there is an increased level or an impaired utilization of lactate ions.

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Not intended and non-effective for correcting severe acidosis states that require immediate restoration of plasma bicarbonate levels.

Sodium lactate has no advantage over sodium bicarbonate and may be detrimental in the management of lactic acidosis.

Adverse Reactions

Reactions which may occur because of the solutions or the technique of administration include fabrile response, infection at the site of injection, venous thrombosis of phlebitis extending from the site of injection, extravasion and hypervolemia.

If an adverse reaction does occur, discontinue the infusion, evaluate the patient, institute appropriate therapeutic countermeasures, and save the remainder of the fluid for examination if deemed necessary.

Storage

Do not store above 25°C.

Presentation

500 ml and 1000 ml Ecoflac® plus containers

References

Facts & Comparisons 1992. p. 50

License Holder

Lapidot Medical Import and Marketing Ltd. 8 Hashita st. Caesarea Industrial Zone 38900



12225045 CompoundSodiumLactate GIF-A5 IL.indd 2

Manufacturer:

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