

# ranitidine

10mg/mL injection, 15mg/mL oral mixture,  
150mg dispersible tablet

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## Note

This guideline provides advice of a general nature. This statewide guideline has been prepared to promote and facilitate standardisation and consistency of practice, using a multidisciplinary approach. The guideline is based on a review of published evidence and expert opinion.

Information in this statewide guideline is current at the time of publication.

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Health practitioners in the South Australian public health sector are expected to review specific details of each patient and professionally assess the applicability of the relevant guideline to that clinical situation.

If for good clinical reasons, a decision is made to depart from the guideline, the responsible clinician must document in the patient's medical record, the decision made, by whom, and detailed reasons for the departure from the guideline.

This statewide guideline does not address all the elements of clinical practice and assumes that the individual clinicians are responsible for discussing care with consumers in an environment that is culturally appropriate and which enables respectful confidential discussion. This includes:

- The use of interpreter services where necessary,
- Advising consumers of their choice and ensuring informed consent is obtained,
- Providing care within scope of practice, meeting all legislative requirements and maintaining standards of professional conduct, and
- Documenting all care in accordance with mandatory and local requirements

## Dose and Indications

### Treatment of gastric or duodenal ulcers, upper gastrointestinal bleeding and gastro-oesophageal reflux

#### Intravenous

Corrected Age (weeks) [Gestational Age PLUS Postnatal Age]	Dose and Frequency (hours)
< 37 weeks	0.5mg/kg per dose every 12 hours
≥ 37 weeks	1mg/kg per dose every 8 hours

#### Oral

2 to 3 mg/kg per dose every twelve hours. Maximum of 6mg/kg/day

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South Australian Maternal & Neonatal Clinical Network  
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South Australian Neonatal Medication Guidelines Workgroup at:  
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## Preparation and Administration

### Intravenous

Dilute 2.5mL of the 10mg/mL ranitidine solution with 7.5mL of compatible fluid (total volume of 10mL). The resulting solution contains 2.5mg/mL ranitidine.

Dose	0.25mg	0.5mg	1mg	2mg	3mg	4mg
Volume	0.1mL	0.2mL	0.4mL	0.8mL	1.2mL	1.6mL

Administer as a slow intravenous injection over at least 5 minutes

### Oral Mixture

The oral mixture contains 15mg/mL ranitidine.

Dose	1.5mg	3mg	4.5mg	6mg	7.5mg	9mg
Volume	0.1mL	0.2mL	0.3mL	0.4mL	0.5mL	0.6mL

### Oral Dispersible Tablets

Disperse one ranitidine dispersible tablet (150mg) in 10mL of water, allow 10 minutes. The resulting solution contains 15mg/mL ranitidine.

Dose	1.5mg	3mg	4.5mg	6mg	7.5mg	9mg
Volume	0.1mL	0.2mL	0.3mL	0.4mL	0.5mL	0.6mL

Once prepared this solution is stable for 24 hours. Refrigerate after preparation.

## Compatible Fluids

Glucose 5%, glucose 10%, sodium chloride 0.9%, sodium chloride/glucose solutions

## Adverse Effects

### Infrequent

Bradycardia (following rapid intravenous administration), hypotension

### Rare

Increased risk of late onset sepsis (preterm infants) diarrhoea, constipation, rash, thrombocytopenia, agranulocytosis, leucopenia, hepatitis, vasculitis, hypersensitivity reactions

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**Monitoring**

- > Periodic full blood count and liver function tests recommended with long term treatment.
- > Gastric pH may be measured to assess efficacy.

**Practice Points**

- > Oral liquid contains 7.4% ethanol.
- > Oral absorption in neonates is unreliable; higher doses may be required.
- > Elimination half life may be prolonged in renal or hepatic insufficiency.

**Version control and change history**

**PDS reference:** OCE use only

Version	Date from	Date to	Amendment
1.0	November 2012	current	Original version

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