KETAMINE For bronchodilation in asthma



PRESENTATION: Vial containing 500mg in 10ml (50mg/ml) of ketamine

INDICATION: Refractory status asthmaticus in ventilated patients not

responding to conventional treatments (unlicensed indication). The evidence on the use of ketamine for this indication is limited and is mostly based on isolated case

reports.

DOSE AND ADMINISTRATION:

ICU STANDARD CONTINOUS INFUSION

2500mg in 50mL (undiluted).

Start at 0.5mg/kg/hr and adjust rate according to the response. Maintenance infusion range is 0.15-2.5 mg/kg/hr (Use ideal body weight in obese patients).

For example, for a 70kg patient commence at 35mg/hour (0.5mg/kg/hour), which equates to 0.7ml/hour.

Administer intravenously via central access device.

Ketamine has a low pH and may cause venous irritation and

tissue damage in cases of extravasation.

Ketamine does not need to be administered in a locked

syringe in intensive care.

CONCENTRATION: 50mg/ml

STABILITY: Physically and chemically stable for 24 hours at room

temperature. Protect from light.

References

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| Critical Care Guidelines: KETAMINE in Asthma | |
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