Critical Care Guidelines FOR ICU USE ONLY

KETAMINE



For resistant status epilepticus only. For acute pain see "guideline for ketamine subcutaneous infusion for acute pain"

PRESENTATION:	Vials containing 500mg in 10ml, 50mg/1ml of ketamine.	
INDICATION:	Resistant status epilepticus. (unlicensed use)	
DOSE AND ADMINISTRATION:	The state of the s	
	ICU STANDARD INFUSION	
	Loading dose: 50mg (1ml) undiluted, intravenously, over at least one minute.	
	Continuous infusions: 2500mg in 50ml undiluted. For a 70kg patient, 1mg/kg/hr is 1.4ml/hr (70mg/hr).	
	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.	

References:

- 1. Kramer A.H. Early ketamine to treat refractory status epilepticus. Neurocrit Care (2012) 16: 299-305.
- 2. Shorvon S, Ferlisi M. The treatment of super-refractory status epilepticus. Brain. 2011;134(10):2802-2818.
- 3. Chen JWY, Wasterlain CG. Status epilepticus:pathophysiology and management in adults. Lancet Neurol 2006; 5:246-56.
- 4. Sheth RD, Gidal BE. Refractory status epilepticus: response to ketamine. Neurology. Dec 1998;51:1765.
- 5. Synowiec AS, Singh DS, Yenugadhati V, Valeriano JP, Schramke CJ et al. Ketamine use in the treatment of refractory status epilepticus. Epilepsy Research 2013 in press.
- 6. UKCPA Minimum Infusion Volumes. Critical Care Group 2012.

Title: Ketamine		
ID:	Authors: Morag R Naysmith Checked by	
	Sheila Selkirk	
Status Draft/Final: FINAL	Approved by: QIT editorial group	
	Written: August 2016	
Reviewed on: May 2018	Next review : August 2019	