Critical Care Guidelines OR CRITICAL CARE USE ONLY



MAGNESIUM

PRESENTATION: Ampoules containing magnesium sulphate 50%

equivalent to 2mmol/ml: 10ml ampoules.

INDICATION: Correction of hypomagnesaemia. Normal range: 0.7 –

1.0 mmol/l.

Treatment of hypomagnesaemia associated with

arrhythmias.

Severe bronchospasm.

DOSE AND ADMINISTRATION: ICU STANDARD INTRAVENOUS INFUSION

For treatment of hypomagnesaemia:

Peripheral administration:

20mmol in 250ml glucose 5% over 4 hours.

Central administration:

20mmol in 100ml glucose 5% over 4 hours.

For treatment of severe acute asthma:

8mmol (2g) in 50mls glucose 5% over 20 minutes,

peripherally or centrally.

For treatment of serious arrhythmias:

8mmol (2g) in 50mls glucose 5% over 20 minutes, peripherally or centrally. Dose may be repeated once

if necessary.

STABILITY: Physically and chemically stable for 24 hours at

room temperature.

ADDITIONAL NOTES: Also stable in sodium chloride 0.9%.

References

- 1. Norohna J et al. Magnesium in critical illness: metabolism, assessment and treatment. Intensive Care Medicine
- Magnesium sulphate 50% Injection. Summary of Product Characteristics. Martindale Pharma. Last updated 25/09/20. https://www.medicines.org.uk/emc/product/3539/smpc .Accessed 21/10/20.
- 3. Magnesium sulphate. Version 10. The UK Injectable Medicines Guide. Accessed 21/10/20.
- BNF App, Version 3.0.1. Updated 02/09/20.
- 5. NHS Lothian University Hospitals Division-Adult Medical Emergencies Handbook. 2009/2011.

Title: Magnesium	
ID: TOPG140612v1	Lead Author: Claire Hannah
Category: 1	Document Version; 4
Status Draft/Final: Final	Review Date: October 2022
Authoriser; Lothian Critical Care	Date Authorisation: October 2020
Directorate	
Editorial Board.	
Date added to intranet: November	
2020	
Key Words;	
Comments;	

Critical Care Guidelines OR CRITICAL CARE USE ONLY