ALBUMIN 5%

OTHER NAMES	Albumin 5%, Plasbumin® -5, Alburex® 5
PRODUCT COMPOSITION	Made from pooled human plasma. Oncotically equivalent to plasma.
INFORMED CONSENT	Mandatory
ALTERNATIVES	**Non-blood Product:** Plasma volume expanders should be considered for volume expansion.
	Blood Product: Choice between 5% and 25% depends on whether patient requires primarily volume (5%) or primarily colloid osmotic activity (25%).
DOSAGE	Dependent on clinical situation. Expands circulating blood volume by an amount approximately equal to the volume infused.
ADMINISTRATION	Adapted to the response of individual patient. • Supplied to unit as provided by manufacturer, in a bottle • Intravenous administration only
DIAGNOSTIC MONITORING	Patient should be monitored for possible circulatory overload. Patients with history of heart failure, renal insufficiency or stabilized chronic anemia are at increased risk. **Vital sign monitoring as per hospital policy for any blood, blood component and other related product.** In the event of an immediate or suspected transfusion reaction, refer to hospital policy and procedures.
CLINICAL INDICATIONS	• Recent literature suggests there are few clinical indications for albumin. Cochrane review found poorer outcome in burn patients treated with albumin. SAFE trial found there was no benefit of albumin over saline for fluid resuscitation in ICU setting. • Used in situations of large volume paracentesis with liver failure.
SPECIAL CONSIDERATIONS	Because it is produced from human plasma it has the potential for transmission of viruses.
STORAGE CONDITIONS	Stored in a TM-monitored blood product storage area 2 to 25˚C
REFERENCES	**Review product monograph** • Compendium of Pharmaceuticals and Specialties (CPS) 2004 • Circular of Information, Canadian Blood Services Feb 2011 and www.blood.ca • "A Comparison of Albumin and Saline for Fluid Resuscitation in the Intensive Care Unit." *New England Journal of Medicine* (2004;350); 2247-56. • Alderson, P et al. "Human albumin solution for resuscitation and volume expansion in critically ill patients." *Cochrane Database Syst Rev.* 2002; (1): CD001208.