Southern Health		REGIONAL ADULT PARENTERAL DRUG MONOGRAPH GENERIC NAME alteplase (venous catheter occlusion)					
						Effective Date: Sept 2012	
Revised Date: May 2023		o, o g	1 of 2				
ADMINISTRATION IV Bolus -	NISTRATION POLICY: lus - May be administered by a nurse						
RECONSTITUTION/DILUTION/ADMINISTRATION: Available as: 2 mg vial - REFRIGERATE							
Reconstitution:	2 mg vial reconstitute with 2.2 mL sterile water for injection (without bacteriostatic). Swirl to dissolve. DO NOT SHAKE. Final concentration: 1mg/mL						
Administration:	See "Additional Notes and Nursing Consideration" section below for administration directions. Additional information available in Central Venous Access Devices: Care and Maintenance policy CLI.4110.PL.004						
DOSAGE:							
Usual:	2 mg = 2 mL into each lumen						
Maximum dose:No more than 2 mg/lumen x 2 doses in a 24 hour period							
Maximum concentration: 1 mg/mL							
STABILITY/COMPATIBILITY: Stability of reconstituted vial: 8 hours at room temperature							
Compatibility: Do not mix with other drugs PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:							
Bleeding (minor)		VERSE REACTIONS:					
 Anaphylactoid reaction (flushing, hypotension); urticaria, laryngeal edema, skin rash Use cautiously in patients with: Active bleeding (i.e. Intracranial bleeding), recent major surgery, recent trauma; 							
severe uncontrolled hypertension. ADDITIONAL NOTES AND NURSING CONSIDERATIONS: Follow directions based on type of occlusion:							
 Partial Thrombotic or Nonthrombotic Occlusion Slowly inject alteplase. Use Dwell Method. Notify authorized prescriber if unable to achieve patency. An option may be for alteplase to dwell for 24-72 hours or to administer alteplase using either the Push Method or the Low-Dose Infusion Method. 							
Total OcclusionUse negative pressUse Dwell Metho		vith either a single syringe or 3-	way stopcock.				
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