



REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME
acetazolamide

Effective Date: Mar 2013 Revised Date: Nov13-2013	CLASSIFICATION Carbonic anhydrase inhibitor	OTHER NAMES Diamox	PAGE 1 of 1
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ADMINISTRATION POLICY:

- IV Infusion - May be administered by a nurse
- IV Injection - May be administered by a nurse
- IM Injection - *Not recommended*
- Subcutaneous - *Not recommended*

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 500 mg vial. Reconstituted with 5 mL sterile water for injection. Contains no preservatives.
Final volume: 5 mL Final concentration: 100 mg/mL

- IV Bolus (preferred):** Undiluted over 1 minute
- IV Intermittent:** Dilute in 50 or 100 mL normal saline. Administer over 15 to 30 minutes.

DOSAGE:

- Usual:** 100 to 500 mg every 4 to 24 hours (dependent on indication)
- Maximum rate:** IV Bolus: 500 mg over 1 minute
IV Intermittent: over 15 minutes
- Maximum concentration:** 100 mg/ml
- Maximum single dose:** 500 mg
- Maximum daily dose:** 1 gram

STABILITY/COMPATIBILITY:

- Stability of reconstituted solution:** 12 hours refrigerated
- Stability of Final Admixture:** Use immediately
- Compatibility:** Compatible with normal saline, D5W, dextrose-saline solutions, Lactated Ringer

PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- Metabolic acidosis, electrolyte imbalance, paresthesias (tingling in extremities), tinnitus, loss of appetite, taste alterations
- GI disturbances (nausea, vomiting, and diarrhea), polyuria
- Occasional drowsiness and confusion
- Avoid use in patients with sulfa allergy

ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

- Very painful with IM administration – not recommended
- Indications for use: metabolic alkalosis, glaucoma, diuretic