

Revised Date: Nov13-2013

REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME

hydroxyethyl starch

Effective Date: April 2012 CLASSIFICATION OTHER NAMES PAGE

Plasma Volume Expander

Voluven

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ADMINISTRATION POLICY:

IV Continuous – May be administered by a nurse.

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 6% hydroxyethyl starch in 500 mL normal saline (PVC-free and latex-free IV bags)

IV continuous: Administer the first 10 to 20 mL slowly, over 10 to 15 minutes, closely observing the patient

for signs of possible anaphylactoid reactions. Increase rate as per physician order.

Infuse using a non-vented standard set. Filter is not required. Blue port is the infusion port.

DOSAGE:

Usual: 33 mL/kg/day (2000 to 3000 mL/day)

Maximum daily dose: Limited experience with up to 50 mL/kg/day.

Maximum rate: As tolerated

Maximum concentration: 6%

STABILITY/COMPATIBILITY:

Stability of Final Admixture: To be used immediately after the bag is opened. Voluven is a clear solution. If off

color do not use.

Compatibility: Unknown compatibility: Do NOT mix with other drugs.

PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- Anaphylactoid/Hypersensitivity Reactions (mild influenza-like symptoms, bradycardia, tachycardia, bronchospasm and non-cardiac pulmonary edema).
- Pruritis
- Coagulation disorders (PT, PTT, bleeding and clotting prolongation, decreased hematocrit) secondary to dilution due to large volume administration.

ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

- Obtain from Materials Management or as specified by Facility.
- Half-life: 12 hours; Effect lasts 4 to 6 hours.
- Use with caution when risk of CHF/fluid overload is high.
- Elevated serum amylase may be observed following administration.
- Use with caution in patients with mild to severe renal impairment. It is contraindicated in dialysis.
- Pruritis may be protracted and refractory to standard treatments.
- Contraindicated in patients with a) sepsis, b) severe liver disease and c) with renal impairment with oliguria and anuria, not related to hypovolemia.
- In patients with hypovolemia requiring intensive or emergent care, a careful evaluation of the risk of sustaining renal injury or liver failure should be undertaken before instituting treatment with Voluven®/Volulyte®
- Increased mortality, renal injury and liver failure have been associated with the use of HES solutions
- Elderly patients: Cautious use advised due to susceptibility to circulatory overload.