



REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME
meperidine

Effective Date: Dec 2012 Revised Date: Nov13-2013	CLASSIFICATION Narcotic Analgesic	OTHER NAMES Demerol, Pethidine	PAGE 1 of 2
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ADMINISTRATION POLICY:

- IV Intermittent - May be administered by a nurse
- IV Bolus - May be administered by a nurse
- IM Injection - May be administered by a nurse
- Subcutaneous - May be administered by a nurse

RECONSTITUTION/DILUTION/ADMINISTRATION:

- Available as:** 50 mg/mL– 1 mL ampoule
- IV Bolus:** Dilute 50 mg (1 mL of 50 mg/mL) in 9 mL normal saline. Administer over 2 to 3 minutes.
- IV Intermittent:** Dilute dose in 50 mL normal saline. Administer over 15 to 30 minutes.
- IM/Subcutaneous:** Administer undiluted.
- Maximum rate:** IV Intermittent: over 15 minutes IV Bolus: over 2 minutes
- Maximum concentration:** IV Intermittent/IV Bolus: 10 mg/mL

DOSAGE:

- Usual:** 25 to 50 mg every 3 to 4 hours as needed.
- Maximum single dose:** IV Intermittent/IV Bolus: 100 mg
- Maximum daily dose:** 600 mg

STABILITY/COMPATIBILITY:

- Stability of Final Admixture:** 24 hours at room temperature.
- Compatibility:** Compatible with D5W, normal saline or dextrose-saline, and Lactated ringer.

PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- Respiratory: respiratory depression
- Cardiovascular: hypotension, tachycardia, bradycardia, palpitations, syncope, facial flushing
- CNS: sedation, dizziness, lightheadedness, dysphoria, agitation, headache, hallucinations, seizures, tremors, irritability due to accumulation of meperidine metabolite especially with regular use and renal/hepatic impairment.
- GI: nausea, vomiting, constipation, dry mouth
- Others: urinary retention



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ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

- Respiratory depression and hypotension may be more pronounced after IV bolus. Patient should be supine during injection & observed closely after each dose.
- Dosage reduction is indicated in renal and liver dysfunction.
- Use of meperidine is contraindicated if creatinine clearance is less than 10 mL/minute
- Repeated subcutaneous administration may cause local tissue irritation, pain & induration
- Contraindicated in patients who have received MAO Inhibitors within the previous 14 days.
- Elderly patients: May be more prone to adverse effects, especially if renal dysfunction is present. Use lower doses initially & titrate.
- Parenteral meperidine will be restricted to:
 - Prevention and treatment of drug-induced or blood product-induced rigors (e.g. amphotericin B, platelets)
 - Treatment of post operative shivering (also indicated for treatment of shivering in therapeutic hypothermia situations e.g. post MI)
 - Short term pain management in individuals with normal renal, hepatic and CNS function where alternative opioids are contraindicated (e.g. drug allergy) and
 - Not to exceed 600 mg/day
 - Limit duration of use to 48 hours.