REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME
propofol

Effective Date: Dec 2011 **Revised Date:** June 2024	CLASSIFICATION **Intravenous anesthetic**	OTHER NAMES **Diprivan**	PAGE 1 of 3

ADMINISTRATION POLICY:

IV Infusion – May be administered by a nurse experienced in ED/CARDIAC ROOM/ICU/OR/PACU

IV Bolus – May be administered by a nurse under direct supervision of prescriber

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 10 mg/mL; 20 mL, 50 mL and 100 mL vials. **SHAKE BEFORE USE. DO NOT FILTER**.

IV Bolus: Administer undiluted over 3 to 5 minutes

IV Infusion: Pump Library: Administer undiluted using vent. Change tubing every 12 hours.

NOTE: MAY BE ORDERED IN EITHER OF THE FOLLOWING DOSE RATES. CHOOSE APPROPRIATELY.

Propofol mcg/kg/min

Drug Library	Dose Rate	Short Name	Care Unit
Yes	mcg/kg/min	propofol,	Critical Care
Drug	**Diluent**	**Final Volume (VTBI)**	**Final Concentration**
500 or 1000 mg	50 or 100 mL premixed	50 or 100 mL	10 mg/mL
Clinical Advisory: High Alert			
Soft Low Dose Limit: 1 mcg/kg/min		Soft High Dose Limit: 100 mcg/kg/min	

Propofol mg/kg/h

Drug Library	Dose Rate	Short Name	Care Unit
Yes	mg/kg/h	propofol	Critical Care
Drug	**Diluent**	**Final Volume (VTBI)**	**Final Concentration**
500 or 1000 mg	50 or 100 mL premixed	50 or 100 mL	10 mg/mL
Clinical Advisory: High Alert			
Soft Low Dose Limit: 0.3 mg/kg/h		Soft High Dose Limit: 5 mg/kg/h	

DOSAGE:

IV bolus: 0.1 to 2 mg/kg

IV infusion: 5 to 60 mcg/kg/min. Adjust dose after 5 minutes in increments of 5 to 10 mcg/kg/min.

OR

0.3 mg/kg/hour. Increased by 0.3 to 0.6 mg/kg/hour every 5 to 10 minutes. Maintenance: 0.3 to 3 mg/kg/hour

Maximum dose: ***Note**: higher doses up to 200 mcg/kg/min in the OR
IV bolus (for procedural sedation): 200 mg

Maximum rate: IV bolus: Over 3 minutes
IV continuous: 80 mcg/kg/min **OR** 5mg/kg/hr

Maximum concentration: 10 mg/mL

REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME
propofol

Effective Date: Dec 2011 **Revised Date:** June 2024	CLASSIFICATION **Intravenous anesthetic**	OTHER NAMES **Diprivan**	PAGE 2 of 3

STABILITY/COMPATIBILITY:

Stability of reconstituted solution: 12 hours at room temperature, after initial use of vial.
DISCARD ANY UNUSED PORTIONS

Compatibility: Compatible with D5W, Lactated Ringer

PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- Respiratory depression, apnea, hypoxia (see note under dosage)
- Hypotension is the major cardiovascular effect of propofol especially if patient is hypovolemic or if bolus is used. Use with caution in patients who are hemodynamically unstable, hypovolemic, or have abnormally low vascular tone i.e. sepsis.
- Bradycardia, local pain, nausea and vomiting
- Patients who develop hypertriglyceridemia (i.e. greater than 500 mg/dL) are at risk of developing pancreatitis. Serum triglyceride levels should be obtained prior to initiation of therapy and every 3 to 7 days thereafter. Monitoring of serum triglycerides should especially be considered with therapy >48 hours with doses exceeding 50 mcg/kg/minute (Devlin 2005). An alternative sedative agent should be employed if significant hypertriglyceridemia occurs. Use with caution in patients with preexisting hyperlipidemia as evidenced by increased serum triglyceride levels or serum turbidity.
- **Propofol related infusion syndrome:** Metabolic acidosis, rhabdomyolysis and cardiovascular collapse reported with doses **greater than** 5 mg/kg/hour for durations of **greater than** 48 hours. **In the event of this syndrome occurring, contact the physician immediately.**
- Do not mix with ketamine in the same syringe
- May turn urine green

ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

- Sedation and respiratory function is monitored according to the Procedural Sedation Guideline
- Continuous Cardiac monitoring, continuous SpO^2 and non- invasive monitoring (exception palliative care).
- Flush tubing slowly after use. This drug MUST be drawn up in a syringe JUST PRIOR to use.
- There is no reversal agent available for propofol
- Drug is suspended in a fatty emulsion vehicle and contains 10 % fat (1.1 kcal/mL). Use with caution in patients with lipid metabolism disorders (e.g.: pancreatitis). Consider this source of fat in patients on enteral or parenteral nutrition.
- Propofol is preservative free and supports microbial growth; aseptic technique is mandatory
- Contraindicated in patients with propofol, soybean, egg, or glycerol allergies
- If propofol is administered in combination with other CNS active drugs, reduce dosage accordingly due to the increased risk of respiratory depression, apnea and hypoxia
- Elderly patients: Dose reduction of 50% may be required, hypovolemic

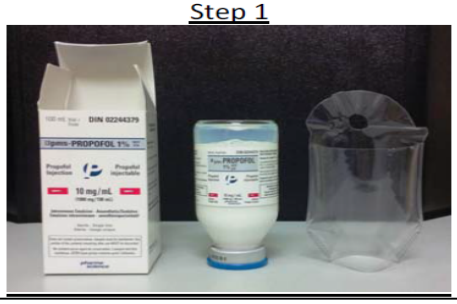
INSTRUCTION GUIDE

Using the two types of hangers provided with

PMS-PROPOFOL 10mg/mL (formats of 100mL and 50mL)

Hanger Type 1

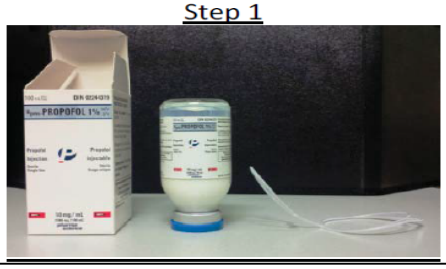
Step 1



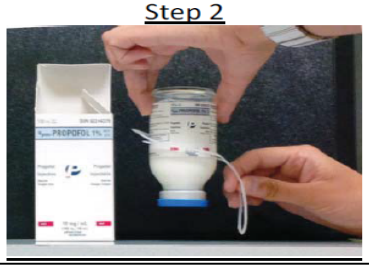
Step 2

Hanger Type 2

Step 1



Step 2



Step 3

Step 4