



NEONATAL

SUXAMETHONIUM



This document should be read in conjunction with this [DISCLAIMER](#)

⚠ HIGH RISK Medication

Inadvertent use in patients without the availability of medical staff skilled in airway support can lead to respiratory arrest, permanent harm, or death.

Presentation	Syringe: 10 mg/2mL (KEMH) Ampoule: 100 mg/2mL
Description	Short acting neuromuscular blocker and skeletal muscle relaxant
Indications	<ul style="list-style-type: none"> • Elective endotracheal intubation
Contraindications	Family history of malignant hyperthermia. Skeletal muscle myopathy or dystrophy Hyperkalaemia
Dose	<u>ELECTIVE ENDOTRACHEAL INTUBATION</u> IV: 2mg/kg May be repeated if required, repeated dosing increases risk of bradycardia.
Adverse Effect	Common: Hypertension, hypotension, bradycardia Serious: Malignant hyperthermia, hyperkalaemia
Monitoring	Continuous cardiorespiratory monitoring. Monitor temperature, blood pressure, oxygenation and assisted ventilator status Duration of paralysis is 5-10 minutes.

Compatible Fluids	Sodium Chloride 0.9%
Preparation	<p>Only prepare where prefilled syringe is unavailable.</p> <p>IV:</p> <p><i>Dilution</i></p> <p>Take 1mL (50mg) from ampoule and dilute to 5mL with compatible fluid.</p> <p><u>Final concentration is 10mg/mL</u></p>
Administration	IV bolus: give over 10 to 30 seconds.
References	<p>Suxamethonium Paediatric. In: UpToDate [Internet]. Alphen aan den Rijn (Netherlands): Wolters Kluwer; 2017 [cited 2017 Oct 5]. Available from: https://www.uptodate.com/</p> <p>Truven Health Analytics. Title e.g. Succinylcholine. In: NeoFax [Internet]. Greenwood Village (CO): Truven Health Analytics; 2017 [cited 2017 Oct 25]. Available from: https://neofax.micromedexsolutions.com/</p> <p>Lilley L, Legge D. Paediatric injectable guidelines. 5th ed. Melbourne (Victoria): The Royal Children's Hospital; 2016. 90 p.75</p>

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