



NEONATAL

# ALBUMIN (HUMAN) 20%

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




**Highly Restricted:** Requires neonatologist approval before commencing

**⚠ HIGH RISK Medication**

There are 2 strengths of Albumin (Human) available, Albumin 4% and Albumin 20%.  
Incorrect product selection could lead to severe circulatory overload.

<b>Presentation</b>	Vial: 200mg/mL (20%) 10mL, 100mL
<b>Classification</b>	Albumin is manufactured from pooled human plasma. Please read in with <a href="#">Transfusion Medicine Protocols – Albumin 20%</a> . Written consent to blood products required. Refer to <a href="#">Transfusion Medicine Protocol – Blood Products (Neonates)</a> .
<b>Indication</b>	Plasma protein that maintains plasma colloid oncotic pressure. <ul style="list-style-type: none"> <li>• <b>Hypoproteinaemia.</b></li> </ul> Used in patients with fluid or sodium restrictions
<b>Dose</b>	<b><u>Hypoprotinaemia</u></b> <b>IV:</b> 0.5g - 1 g/kg/dose (2.5mL - 5 mL/kg) May be repeated every 1-2 days.
<b>Monitoring</b>	Temperature, pulse, respiration, blood pressure, urine output, electrolyte levels. Observe for signs of hypervolemia, pulmonary oedema and cardiac failure. Refer to <a href="#">Transfusion Medicine Protocols – Albumin 20%</a>
<b>Guidelines &amp; Resources</b>	<a href="#">Transfusion Medicine Protocols – Albumin 20%</a>
<b>Compatible Fluids</b>	Sodium chloride 0.9%, Glucose 5% Glucose 10% and glucose/saline solutions.

<b>Preparation</b>	Albumin is a clear or slightly opalescent solution. If it appears cloudy, do not use. Discard any unused solution. Do not use the product if it appears turbid.	
<b>Administration</b>	<b>Intravenous infusion:</b> Infuse over 30 - 60 minutes. Faster infusion rates may be clinically necessary, refer to Neonatologist. Refer to <a href="#">Transfusion Medicine Protocols – Albumin 20%</a> for specific administration advice. Flush with sodium chloride 0.9% after infusion is complete	
<b>Adverse Reactions</b>	<b>Common</b>	chills, fever, vomiting, urticaria
	<b>Serious</b>	Hypertension, vascular overload causing pulmonary oedema, cardiac failure, anaphylaxis
<b>Storage</b>	Store below 30 °C. Do not freeze. Protect from light.	
<b>Interactions</b>	Water for injections – risk of reduction in tonicity.	
<b>Notes</b>	Albumin should be administered through a standard IV giving set Do not ‘piggy-back’ onto other lines Neonatologist to determine rate of infusion	
<b>References</b>	Society of Hospital Pharmacists of Australia. Albumin. In: Australian Injectable Drugs Handbook [Internet]. [St Leonards, New South Wales]: Health Communication Network; 2019 [cited 2019 Mar 15]. Available from: <a href="http://aidh.hcn.com.au">http://aidh.hcn.com.au</a>  Truven Health Analytics. Albumin(Human). In: NeoFax [Internet]. Greenwood Village (CO): Truven Health Analytics; 2019 [Cited 2018 Mar 15]. Available from: <a href="https://neofax.micromedexsolutions.com/">https://neofax.micromedexsolutions.com/</a>  Takemoto CK, Hodding JH, Kraus DM. Pediatric & neonatal dosage handbook with international trade names index : a universal resource for clinicians treating pediatric and neonatal patients. 24th ed. Hudson (Ohio): Lexicomp; 2017. 2,401 p75.  Zenk KE. Neonatology: management, procedures, on-call problems, diseases, and drugs. Gomella TL, Cunningham MD, Eyal FG, editors. New York: McGraw-Hill; 2009.  Shann F. Drug doses. Seventeenth ed. Parkville (Victoria): Collective P/L; 2017.	

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