Octreotide

Potential SALAD Do not confuse with Sandostatin LAR® which is a depot octreotide preparation that can only be given IM	
Form	50 microgram per 1mL ampoule 100 microgram per 1 mL ampoule 500microgram per 1mL ampoule
Reconstitution	Already in solution • **Draw up using a 5 micron filter needle** • **Use gloves when opening ampoules**
Compatibility & Stability	Sodium Chloride 0.9%
Administration	**SC Injection (preferred route)** Allow the injection to reach room temperature before administration. Withdraw the required dose, and give by SC injection. **IV Injection (for use only when rapid response required)** Dilute each 1mL octreotide with 1 - 9mL sodium chloride 0.9%. Give slowly over 3 - 5 minutes. **Intermittent IV Infusion (unlicensed)** Preferably administer via a central venous access device to avoid potential venous irritation. If given peripherally, choose a large vein and monitor the injection site closely. Add required dose to 50 - 100mL infusion fluid and administer over 15 - 30 minutes or at a rate of 25-50microgram/hour, depending on indication. **Continuous IV Infusion (bleeding varices)** Preferably administer via a central venous access device to avoid potential venous irritation. If given peripherally, choose a large vein and monitor the injection site closely. Add 500 microgram to 50mL infusion fluid (giving a solution of 10microgram/mL) and administer at a rate of 25 – 50 microgram/hour.
Monitoring	• ECG and blood pressure monitoring required for IV doses. • Monitor blood glucose levels.
Extravasation	• Local discomfort may be reduced by allowing the solution to reach room temperature before injection, or by injecting a smaller volume using a more concentrated solution • Extravasation is likely to cause tissue damage due to low pH.
Additional Information	• Give all doses between meals or before bedtime to reduce flatulence, abdominal pain and bloating.

Information provided relates to Sandostatin® manufactured by Novartis.