

Working doses in paediatrics

DRUGS	DOSE	INTERVAL
Inj Ampicillin (Pen-A:250mg/2.5cc,500mg/5cc)	50mg/kg/dose, =0.5cc/kg/dose =50unit/kg/dose In meningitis:75-150mg/kg/dose	PNA 0-7days:12hrly >7 days:8hrly
Inj Gentamicin (Genacin,gentin:20,80mg/2cc)	5mg/kg/dose, =0.5cc/kg/dose =50unit/kg/dose	>1000gm:once daily <1000gm:36hrly Check trough level with fourth dose(Roberton)
Inj Ceftazidime/Cefotaxime (250mg/2.5cc,500mg/5cc)	50mg/kg/dose =0.5cc/kg/dose =50unit/kg/dose In meningitis:100mg/kg/dose =1cc/kg/dose	0-7days:12hrly >7days:8hrly
Inj Amikacin (Kacin,Amikin:100,250,500mg/2cc)	7.5mg/kg/dose =0.15cc/kg/dose(calculated by 100mg/2cc) =15unit/kg/dose	12hrly

	OR 15 mg/kg/dose =0.30cc/kg/dose = 30unit/kg/dose	Once daily (Source: Roberton) Check trough level with fourth dose(Source:Roberton)
Inj Meropenem (Ropenen, I-penem,Spebac:500mg/10cc)	20mg/kg/dose =0.4cc/kg/dose =40unit/kg/dose	0-14days:12hrly >14days:8hrly (source:NEOFAX 2010)
	In meningitis:40mg/kg/dose =0.8cc/kg/dose =80unit/kg/dose	Infuse over 30 minutes
Inj Imipenem/cilastatin (500mg/100cc)	20mg/kg/dose =4cc/kg/dose	12hrly
	(In meningitis:Dose&Frequency same)	Infuse over 30 minutes
Inj Vancomycin (500mg/10cc)	10mg/kg/dose =0.2cc/kg/dose =20unit/kg/dose	0-14days:12hrly >14days:8hrly (source:NEOFAX 2010) Always infuse over 1 hr
	In meningitis:15mg/kg/dose =0.3cc/kg/dose =30unit/kg/dose	Check trough level with fourth dose(Source:Roberton)

Inj Netilmicin (200,50mg/2cc)	2.5mg/kg/dose =0.025cc/kg/dose(calculated by 200mg/2cc) =2.5unit/kg/dose	0-7days:12hrly >7days:8hrly (source:Gomella)
	OR 5mg/kg/dose =0.05cc/kg/dose = 5unit/kg/dose	Once daily Check trough level with fourth dose(source:Roberton)
Inj Ciprofloxacin (Neofloxacin:200mg/100cc)	7.5mg/kg/dose =3.75cc/kg/dose	12hrly Infuse over 30 minutes
Inj Clarithromicin (Klaricid:500mg/10cc)	7.5mg/kg/dose = 0.15cc/kg/dose	12hrly Always infuse over 1 hr
Inj Colistin (1million=10,00000unit/10cc)	25,000unit/kg/dose =0.25cc/kg/dose =25unit/kg/dose(by 100 unit insulin syringe)	8hrly Infuse over 30 minutes
Inj Cefepime (Tetracef,ceftipime:500mg/10cc)	50mg/kg/dose =1cc/kg/dose	12hrly Infuse over 30 minutes
	In meningitis:Dose& Frequency same	

<p>Inj Piperacillin-Tazobactam (Zosyn:4.5gm/20cc diluent) Piperacillin:4gm Tazobactam:0.5gm</p>	<p>80mg/kg/dose(piperacilin component) =0.4cc/kg/dose =40unit/kg/dose</p>	<p>12hrly Range:50-100mg/kg/dose (piperacillin component) Infuse over 30 minutes</p>
<p>Inj Linezolid (Arlin:600mg/300ml)</p>	<p>10mg/kg/dose</p>	<p>hrly Infuse over 30 minutes</p> <p style="text-align: right;">12</p>

DRUGS	DOSE	INTERVAL			
Inj Metronidazole (Filmet,Mez:500mg/100cc)	7.5mg/kg/dose =1.5cc/kg/dose				
		GESTATION	PNA	INTERVAL	
		≤29wks	0-28days >28	48 hrs 24	
		30-36	0-14 >14	24 12	
		≥37	0-7 >7	24 12	
Inj Acyclovir (Xovir,Zovirax:500mg/10cc)	20mg/kg/dose =0.4cc/kg/dose =40unit/kg/dose	8hrly Always infuse over 1 hr			
Inj Flucloxacillin Fluclox,Phylopen:250mg/2.5cc,500mg/5cc	50 mg/kg/dose =0.5cc/kg/dose =50unit/kg/dose	12 hrly			
	In Osteomyelitis: 100mg/kg/dose =1cc/kg/dose	6hrly over 4-6 wks) (Source: Roberton)			

DRUGS	DOSES	INTERVAL
<p>Inj Phytomenadion (Inj Konakion:2mg/0.2cc)</p>	<p>Prophylaxis: At birth: 2mg=0.2cc=20units,PO stat or 1mg=0.1cc=10units,IV stat On D4 :do On D28 :do</p>	<p>RESCUE: Treatment should be continued three consecutive days±FFP/PLT</p>
<p>Infant of diabetic MOM</p> <p>ASYMPTOMATIC HYPOGLYCEMIA</p> <p>☉☉CBG <2mmol/l on at least 2 consecutive sample but no clinical signs</p> <p>A)If baby is on feeding</p> <p>Continue supervised BF</p> <p>Increase feed volume and frequency</p> <p>Monitor prefeed CBG at least 2 hrly</p> <p style="margin-left: 100px;">↑</p> <p style="margin-left: 100px;">If not corrected</p> <p>Open IV channel with 10% dextrose@GIR 6-8mg/kg/min</p> <p>B)If baby is on IV fluid</p> <p>Increase conc or infusion rate (5-7.5%,7.5-10%,10-12.5%)</p>	<p>SYMPTOMATIC HYPOGLYCEMIA</p> <p>☉☉CBG <1mmol/l and/Clinical signs</p> <p>--Repeat CBG(always imperative)</p> <p>--Blood sample should be sent in lab for accurate BG level BUT should not wait for result.</p> <p>--Bolus 10% IV glucose(2ml/kg).....AIMS</p> <p>--Immediately after bolus,a glucose infusion rate 6 mg/kg/min</p> <p>--Hrly blood glucose monitoring untill ≥2mmol/l</p> <p>--Investigate possible causes(eg. Sepsis)</p> <p>--Subsequent hypoglycemic episodes may be treated by increasing the GIR by 2 mg/kg/min till a maximum of 12 mg/kg/min</p> <p>--If two or more consecutive values are normal(>50 mg/dl) after 24hrs of parenteral therapy,the infusion can be tapered off at the rate off 2mg/kg/min every 6 hrs with glucose monitoring</p>	<p>Glucose monitoring in IDM</p> <p>At birth</p> <p>2 hrly×3 D:1</p> <p>6 hrly×3</p> <p>12hrly×2 D:2</p> <p>24hrly×1 D:3- subsequent</p> <p>When should screening be stopped?</p> <p>At the ends of 72 hrs in at risk babies</p> <p>After stopping of the IV fluid ,baby is on full feed and has two consecutive values >50 mg/dl</p> <p>Indications IV fluid:</p> <p>Symptomatic hypoglycemia</p> <p>CBG <1.7 mmol/l</p> <p>Hypoglycemia persisting despite feeding</p> <p>Unable/Contra-indications to feeding</p>

DRUGS	DOSE	INTERVAL			
Infant of HBsAg positive MOM	AT BIRTH Inj Immunoglobulin(Hepabig): 0.5cc(100 unit) IM in RT anteriolateral thigh Inj Antigen(Engerix):0.5cc(10 unit) IM in LT anteriolateral thigh --Repeat at 1M, 6M or --Vaccination should be submerged in EPI schedule(6,10,14 wks)	AT 9-18 month: HBsAg and Anti-HBs should be done ❖ If HBsAg(+): Child Should be re-evaluated ❖ If Anti-HBs(+): Child is immune to HBS ❖ If both HBsAg and Anti-HBs(--): Repeat complete hepatitis B vaccine series (source: Nelson)			
		INTERVAL			
Tab.Digoxin (Lenoxin:1 tab=0.25mg) Syp.Digoxin (syp centoxin=0.25mg/ml) Inj.Digoxin (Dixin:1 amp=0.25mg/2ml)		Preterm		TERM	
		IV (µg/kg/day)	Oral	IV	Oral
	Total digitalizing dose(TDD)	15-25	20-30	0-30	25-35
	Maintenance dose	4-6	5-7.5	5-8	6-10
		TDD is to be divided 1/2, 1/4 and 1/4 every 8 hrs Oral dose is 25% higher than iv dose Indications: <ul style="list-style-type: none"> • CCF • Atrial fibrillation • SVT (source: Gomella)			
Frusumide+Spironolactone (Frulac/Lasilactone:1	Frusumide= 1mg/kg/dose Spironolactone=1-	12 hrly or once daily Source:Roberton			

tab=20/50mg)	2mg/kg/dose	
Captopril (Acetor,Cardopril:1 tab=25mg)	0.01-0.05mg/kg/dose	8-12 hrly

DRUGS	DOSE	INTERVAL
Inj Phenobarbitone (Barbit:200mg/cc)	Loading =20mg/kg/dose =0.1cc/kg/dose =10unit/kg/dose	
	Maintenance =2.5mg/kg/dose =1.5unit/kg/dose N.B: 10mg/kg/dose=5unit/kg/dose	12hrly
Inj Fosphenytoin (Fosphen:150mg/2cc)	Loading =30mg/kg/dose =0.4cc/kg/dose =40unit/kg/dose	
	Maintenance =3.75mg/kg/dose =5unit/kg//dose N.B: 15mg/kg/dose=20unit/kg/dose	12hrly
Inj Ranitidine (Ranison,Neotack:50mg/2cc)	1mg/kg/dose =4unit/kg/dose	12hrly Source:Gomella p-779
Inj Frusemide (Lasix:20mg/2cc)	1mg/kg/dose =10unit/kg/dose	