

Only from Baxter: The first and only FDA-approved, ready-to-use Premix Norepinephrine in Dextrose

Patient Safety



Reduction of medication errors

Premix Norepinephrine provides an accurately prepared concentration in a barcoded bag to help minimize compounding errors that may be heightened in urgent situations.^{1,2}



Compliance

Premix Norepinephrine delivers the safety and reliability of compliance with ISMP and ASHP guidelines in a shelf-stable, ready-to-use formulation.^{1,2}



Distinct Labeling

Has a distinctly labeled bag, with a light-shielding overwrap that also differentiates product strength (concentration).

Optimize Care and Efficiency



Grab-and-go

Make every second count by taking advantage of a ready-to-use IV medication that helps protect your patients while improving efficiency.



Store Closer to the Patient

Premix Norepinephrine allows for the storage of norepinephrine on the floor and in your ADC, right where you need it when you need it, with reduced concern for waste.³



Operational Efficiency

Using Premix Norepinephrine may free up your pharmacy staff to focus on compounding other critical high-alert medications.



On-Demand Availability

12-month room temperature shelf-life puts Premix Norepinephrine at the point of care.

See detailed storage information on Page 2.

Indication

Norepinephrine Bitartrate in Dextrose Injection is indicated to raise blood pressure in adult patients with severe, acute hypotension.

Select Important Risk Information

Warnings and Precautions

• Tissue Ischemia: Administration of Norepinephrine Bitartrate in Dextrose Injection to patients who are hypotensive from hypovolemia can result in severe peripheral and visceral vasoconstriction, decreased renal perfusion and reduced urine output, tissue hypoxia, lactic acidosis, and reduced systemic blood flow despite "normal" blood pressure. Address hypovolemia prior to initiating Norepinephrine Bitartrate in Dextrose Injection. Avoid use in patients with mesenteric or peripheral vascular thrombosis, as this may increase ischemia and extend the area of infarction.

Please see additional Important Risk Information to follow.





Premix: Norepinephrine Bitartrate in 5% Dextrose Injection Specifications

Strength (Concentration)	4 mg/250 mL (16 mcg/mL)	8 mg/250 mL (32 mcg/mL)	16 mg/250 mL (64 mcg/mL)
Product Code	EZPE7748	EZPE7788	EZPE7758
NDC	0338-0112-20	0338-0108-20	0338-0116-20
Light-shielding Overpouch	One side of the bag has amber film One side of the bag has aluminum foil		
	In overwrap, room temperature 20°C to 25°C (68°F to 77°F)* 12 month shelf-life or until manufacturer expiration date, whichever is earlier Out of overwrap, room temperature 20°C to 25°C (68°F to 77°F)* 30 days stability or until manufacturer expiration date, whichever is earlier		
Storage			
	*Excursions permitted to 15°C to 30°C (59°F to 86°F) [see USP Controlled Room Temperature].		

Premix Norepinephrine has a distinctly labeled bag, with an overwrap to differentiate product strength (concentration). **Scan the barcodes below to input Baxter Premix Norepinephrine into your system:**



4 mg/250 mL bag Scan for ordering





8 mg/250 mL bag Scan for ordering





16 mg/250 mL bag Scan for ordering



Please see Important Risk Information to follow.



Norepinephrine Bitartrate in 5% Dextrose Injection Indication and Important Risk Information

Indication

Norepinephrine Bitartrate in Dextrose Injection is indicated to raise blood pressure in adult patients with severe, acute hypotension.

Important Risk Information

- Contraindications: None.
- Tissue Ischemia: Administration of Norepinephrine Bitartrate in Dextrose Injection to patients who are hypotensive from hypovolemia can result in severe peripheral and visceral vasoconstriction, decreased renal perfusion and reduced urine output, tissue hypoxia, lactic acidosis, and reduced systemic blood flow despite "normal" blood pressure. Address hypovolemia prior to initiating Norepinephrine Bitartrate in Dextrose Injection. Avoid use in patients with mesenteric or peripheral vascular thrombosis, as this may increase ischemia and extend the area of infarction.

 Gangrene of the extremities has occurred in patients with occlusive or thrombotic vascular disease or who received prolonged or high dose infusions. Monitor for changes to the skin of the extremities in susceptible patients.

 Extravasation of Norepinephrine Bitartrate in Dextrose Injection may cause necrosis and sloughing of surrounding tissue. To reduce the risk of extravasation, infuse into a large vein, check the infusion site frequently for free flow, and monitor for signs of extravasation.

Avoid administration into the veins in the leg in elderly patients.

Emergency Treatment of Extravasation: Infiltrate the ischemic area as soon as possible, using a syringe with a fine hypodermic needle with 5 to 10 mg of phentolamine mesylate in 10 to 15 mL of 0.9% Sodium Chloride Injection in adults.

- **Hypotension after Abrupt Discontinuation:** Sudden cessation of the infusion rate may result in marked hypotension. When discontinuing the infusion, gradually reduce the infusion rate while expanding blood volume with intravenous fluids.
- Cardiac Arrhythmias: Norepinephrine Bitartrate in Dextrose Injection elevates intracellular calcium concentrations and may cause arrhythmias, particularly in the setting of hypoxia or hypercarbia. Perform continuous cardiac monitoring of patients with arrhythmias.
- Elderly Patients: May be at a greater risk of developing adverse reactions.
- Adverse Reactions: Most common adverse reactions are hypertension and bradycardia.
- Drug Interactions:
 - o Co-administration of **Norepinephrine Bitartrate in Dextrose Injection** with monoamine oxidase (MAO) inhibitors or other drugs with MAO-inhibiting properties (e.g., linezolid) or with tricyclic antidepressants can cause severe, prolonged hypertension.
 - o Anti-diabetics: **Norepinephrine Bitartrate in Dextrose Injection** can decrease insulin sensitivity and raise blood alucose.
 - o Concomitant use of **Norepinephrine Bitartrate in Dextrose Injection** with halogenated anesthetics may lead to ventricular tachycardia or ventricular fibrillation. Monitor cardiac rhythm in patients receiving concomitant halogenated anesthetics.

Please see accompanying full <u>Prescribing Information</u>.

References: 1. Institute for Safe Medication Practices. ISMP Guidelines for Sterile Compounding and the Safe Use of Sterile Compounding Technology; 2022. https://www.ismp.org/resources/guidelines-sterile-compounding-and-safe-use-sterile-compounding-technology. Updated May 4, 2022. Accessed June 1, 2023.

2. Billstein-Leber M, Carrillo JD, Cassano AT, et al. ASHP Guidelines on Preventing Medication Errors in Hospitals. Am J Health-Syst Pharm. 2018;75:1493-1517. DOI 10.2146/ajhp170811.

3. American Society of Health-System Pharmacists. ASHP guidelines on medication cost management strategies for hospitals and health systems. Am J Health-Syst Pharm. 2008;65:1368-1384.

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