**Phenylephrine**  
**Newborn Use Only**  

### Alert
Watch for apnoeas and abdominal distension following administration. Lower concentration solutions and regimens minimising number of additional drops are recommended.

### Indication
Mydriatic (dilates the pupil) for ophthalmic examinations and therapeutic procedures.

### Action
Selective alpha-1-adrenoceptor agonist. Contracts dilator muscle of pupil and constricts arterioles in conjunctiva.

### Drug Type
Sympathomimetic.

### Trade Name
Minims® Phenylephrine hydrochloride.

### Presentation
Phenylephrine hydrochloride 2.5% (25 mg/mL) single-use sterile eye drop, approximately 0.5 mL.

### Dosage/Interval
Use in conjunction with cyclopentolate 0.5% and/or tropicamide 0.5% eye drops.

**REGIMEN 1:**  
Phenylephrine 2.5% + cyclopentolate 0.5% + tropicamide 0.5% eye drops [1-4]. Instil one drop of each agent (5 minutes apart) into each eye 60 minutes prior to examination. Repeat if pupillary dilatation inadequate. Perform examination 60 to 120 minutes after instillation.

**REGIMEN 2:**  
Phenylephrine 2.5% + cyclopentolate 0.5% eye drops [5]. Instil one drop of each agent (5 minutes apart) into each eye 60 minutes prior to examination. Repeat if pupillary dilatation inadequate. Perform examination 60 to 120 minutes after instillation. Dark irides may require additional drops.

### Maximum daily dose
REGIMEN 1: 3 drops of each eye drop.  
REGIMEN 2: 4 drops of each eye drop.

### Route
Topical instillation into the eyes from the container or use a microdrop (5–7 microL) cannula.

### Preparation/Dilution
Apply pressure to the lacrimal sac during and for 60 seconds after instillation of eye drop to minimise systemic absorption. Wipe away excess medication. Consider withholding feeds for four hours from administration of the last drops to reduce incidence of feed intolerance.

### Monitoring
Blood pressure, heart rate and oxygen saturation in infants with bronchopulmonary dysplasia.

### Contraindications
Necrotising enterocolitis (NEC) at the time of eye examination. Concurrent use with beta-adrenoceptor antagonists (beta-blockers).

### Precautions
Infants with bronchopulmonary dysplasia. Lower concentration solutions and regimens minimising number of additional drops are recommended to minimise toxicity.

### Drug Interactions
Atropine, beta-adrenoceptor antagonists (beta-blockers).

### Adverse Reactions
Decreased pulmonary compliance, tidal volume and peak air flow in babies with bronchopulmonary dysplasia. Increased blood pressure. Skin pallor around eyes.

### Compatibility
Cyclopentolate, tropicamide, amethocaine

### Incompatibility

### Stability
Discard immediately after use.

### Storage
Store in refrigerator at 2°C to 8°C. Do not freeze. Protect from light.
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Special Comments
Cross check correct strength of Minims® Phenylephrine hydrochloride is used.
Do NOT use 10 % in neonates.

Evidence summary
Refer to full version.

References
Refer to full version.

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