**Remifentanil**

Newborn use only

### Alert

Remifentanil is a Schedule 8 drug. Chest wall rigidity has been reported in 10–20% of infants given it as a bolus (over <60 seconds) or at higher dose, particularly in preterm infants. Chest wall rigidity can be treated with naloxone and muscle relaxants.

### Indication

1. Premedication for non-emergency intubation;
2. Infusion for analgesia/sedation

### Action

Remifentanil is a potent μ receptor agonist with rapid onset of action – peak analgesic action within 1 minute. Rapidly metabolised into inactive metabolites by non-specific plasma esterases with a half-life of 3-5 minutes.

### Drug Type

Remifentanil is a synthetic opioid analgesic drug related to fentanyl.

### Trade Name

DBL Remifentanil, Remifentanil Alphapharm, Remifentanil APOTEX, Remifentanil-AFT, Ultiva.

### Presentation

Remifentanil Powder [remifentanil hydrochloride] for infusion 1 mg, 2 mg, 5 mg. Also contains glycine, hydrochloric acid and/or sodium hydroxide.

### Dosage / Interval

**Premedication for intubation:**
1 to 3 microgram/kg; may be repeated in 2–3 minutes if needed.

**Infusion for analgesia in spontaneously breathing infants:**
0.03 microgram/kg/minute as intravenous infusion [highest safe dose unknown].

**Infusion for analgesia/sedation in ventilated infants:**
0.15–1 microgram/kg/minute as intravenous infusion.

### Maximum daily dose

1 microgram/kg/minute.

### Route

Intravenous.

### Preparation/Dilution

**IV bolus as premedication for intubation**

Add 1 mL of water for injection to 1 mg vial of remifentanil to make a 1 mg/mL solution. FURTHER DILUTE

Draw up 0.2 mL (200 microgram) of the above solution and add glucose 5% or sodium chloride 0.9% to make a final volume of 40 mL with a concentration of 5 microgram/mL. 0.2 mL/kg of this diluted solution = 1 microgram/kg.

**IV infusion for spontaneously breathing infants**

**2-STEP DILUTION**

<table>
<thead>
<tr>
<th>Prescribed amount</th>
<th>Infusion rate</th>
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<tbody>
<tr>
<td>100 microgram/kg remifentanil and make up to 50 mL with glucose 5% or sodium chloride 0.9%</td>
<td>1 mL/hour = 0.03 microgram/kg/minute</td>
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**Step 1:** Add 1 mL of water for injection to 1 mg vial of remifentanil to make a 1 mg/mL solution.

**Step 2:** From the above solution, draw up 0.1 mL/kg (100 microgram/kg) and further dilute with glucose 5% or sodium chloride 0.9% to make a final volume of 50 mL. Infusing at a rate of 1 mL/hour = 0.03 microgram/kg/minute.

**IV infusion for analgesia/sedation in ventilated infants**

**2-STEP DILUTION**

<table>
<thead>
<tr>
<th>Prescribed amount</th>
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<tr>
<td>3 mg/kg remifentanil and make up to 50 mL with glucose 5% or sodium chloride 0.9%</td>
<td>1 mL/hour = 1 microgram/kg/minute</td>
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**Step 1:** Add 1 mL of water for injection to 1 mg vial of remifentanil to make a 1 mg/mL solution.
**Remifentanil**

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<th>Step 2: From the above solution draw up 3 mL/kg (3 mg/kg) and further dilute with glucose 5% or sodium chloride 0.9% to make a final volume of 50 mL. Infusing at a rate of 1 mL/hour = 1 microgram/kg/minute.</th>
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**Administration**

IV BOLUS: Administer over at least 1 minute. Flush with 1 mL of sodium chloride 0.9%. Onset of action is immediate. Half-life is approximately 3–10 minutes.

CONTINUOUS IV INFUSION: Via syringe driver. Upon ceasing the continuous infusion, flush the line with 1 mL of sodium chloride 0.9% over 1 hour.

Note: It is advisable to use a dedicated IV line where possible.

**Monitoring**

Full cardiorespiratory monitoring.

Monitor for urinary retention.

**Contraindications**

Known hypersensitivity to fentanyl or remifentanil.

**Precautions**

Rapid injection (<60 seconds) of remifentanil is associated with chest wall rigidity. Remifentanil in a bolus dose of 5 microgram/kg may cause hypotension.

**Drug Interactions**

Remifentanil enhances the action of other sedatives and hypnotics.

Cardiovascular effects may be enhanced by beta blockers and calcium channel blockers.

**Adverse Reactions**

Respiratory depression, chest wall rigidity (can be treated with naloxone and muscle relaxants), bradycardia and asystole (may respond to atropine), hypotension, postoperative hypertension.

**Compatibility**

Fluids: Glucose 5%, glucose 5% in sodium chloride 0.9%, sodium chloride 0.9%, sodium chloride 0.45%, water for injection. Not tested with glucose 10%.

Y-site: Aciclovir sodium, adenalinine (epinephrine) hydrochloride, alfentanil hydrochloride, amikacin sulfate, aminophylline, amiodarone hydrochloride, ampicillin sodium, azithromycin, aztreonam, buprenorphine hydrochloride, calcium gluconate, cefazolin sodium, cefepime hydrochloride, cefotaxime, cefotetan disodium, cefoxitin, ceftazidime, ceftriaxone sodium, cefuroxime, cilastatin sodium, ciprofloxacin, clindamycin phosphate, dexamethasone sodium phosphate, digoxin, dobutamine hydrochloride, dopamine hydrochloride, fentanyl, fluconazole, ganciclovir sodium, gentamicin sulfate, heparin sodium, hydrocortisone sodium succinate, imipenem-cilastatin sodium, insulin regular, isoprenaline hydrochloride, lidocaine (lignocaine) hydrochloride, magnesium sulfate, mannitol, methylprednisolone sodium succinate, metoclopramide hydrochloride, metronidazole, midazolam hydrochloride, milrinone lactate, morphine sulfate, netilmicin sulfate, nitroglycerin, noradrenaline (norepinephrine) bitartrate, octreotide acetate, ondansetron hydrochloride, pancuronium bromide, phenylephrine hydrochloride, piperacillin sodium-tazobactam sodium, potassium acetate, potassium chloride, potassium phosphates, ranitidine hydrochloride, rocuronium bromide, sodium acetate, sodium bicarbonate, sufentanil citrate, sulfamethoxazole-trimethoprim, theophylline, thiopental sodium, ticarcillin disodium-clavulanate potassium, tobramycin sulfate, vancomycin hydrochloride, vasopressin, vecuronium bromide, zidovudine.

**Incompatibility**

Amino acid/glucose and lipid infusion: No information.

Propofol, amphotericin, chlorpromazine, diazepam, furosemide (frusemide).

**Stability**

Reconstituted product should be used promptly and any unused material discarded according to local Schedule 8 drug policy.

**Storage**

Store below 25°C. The 1 mg presentation should be stored protected from light.

**Special Comments**

Treat chest wall rigidity with supportive measures, neuromuscular blocking agents or naloxone. Chest wall rigidity can last a few minutes.

Duration of action 5 to 10 minutes.

**Evidence summary**

Refer to full version.

**References**

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