

# PRODUCT INFORMATION

**BACTERIOSTATIC SODIUM CHLORIDE INJECTION USP, 0.9%**  
**270mg/30mL**  
**9mg/mL**

**Sterile Isotonic Vehicle - Electrolyte Replenisher**

## **1. Indications**

Treatment or prophylaxis of sodium and/or chloride ion deficiency. Fluid replacement in dehydration. Isotonic solution for vehicle in the parenteral administration of compatible drugs.

## **2. Contraindications**

Patients with conditions in which administration of sodium and/or chloride could be clinically detrimental.

## **3. Precautions**

Cardiovascular disease; patients receiving corticosteroids or corticotropin; impaired renal function; peripheral and pulmonary edema; and toxemia of pregnancy.

Use with care in very young, geriatric and post-operative patients.

*Drug interactions:* High sodium intake may reduce serum lithium concentrations, while restriction of sodium may increase serum lithium.

The administration of saline solutions may aggravate maternal pulmonary edema associated with ritodrine administration, particularly in patients receiving corticosteroids.

*Children:* Bacteriostatic sodium chloride injection containing benzyl alcohol as a preservative should not be used for diluting or reconstituting drugs for administration in neonates nor should it be used to flush intravascular catheters in neonates. Benzyl alcohol contained in bacteriostatic sodium chloride for injection has been associated with toxicity in newborns. Toxicity appears to have resulted from administration of large amounts (99 to 404 mg/Kg daily).

#### **4. Adverse effects**

Excessive amounts by any route may cause hypernatremia; may also cause or aggravate heart failure or hypertension and rarely causes hypokalemia or expansion acidosis.

#### **5. Overdose**

Symptoms:

Overdosage may cause serious electrolyte disturbances and gastrointestinal irritation (nausea, vomiting, diarrhoea and abdominal cramps). Manifestations of hypernatremia may include: weakness, restlessness, dizziness, headache, hypotension, tachycardia, edema, convulsions and coma.

Treatment:

Provide an adequate airway and ventilation. Correct fluid and electrolyte imbalance slowly. Convulsions may be treated with i.v. diazepam. Hemodialysis or peritoneal dialysis may be required for severe cases or in patients with renal failure.

#### **6. Dosage**

Parenterally, I.V., I.M. and S.C.: Amount varies with circumstances.

#### **7. Supplied**

Each mL contains: Sodium chloride 9 mg with Benzyl alcohol 9 mg as a preservative. Vials of 30 mL. Boxes of 10.

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