

INTRAVENOUS STAT DOSES

50 kg

Diluents:

NS = Sodium Chloride 0.9%, G5 = Glucose 5%, WFI = Water for Injections

• = Central or intraosseus route only

CD = Controlled drug

Maximum doses highlighted in red



Note: Ideal or adjusted body weight should be used where clinically appropriate

Intubation/Induction				
Drug	Dose/kg		Calculated Dose	Dilution
Atracurium besilate	0.5	mg/kg	25 mg	Neat or with NS/G5 to convenient vol.
Atropine sulfate	20	microg/kg	600 microg	Neat or with NS/G5 to convenient vol.
Fentanyl CD	1 - 5	microg/kg	50 - 200 microg	Neat or with NS/G5 to convenient vol.
Ketamine CD	1 - 2	mg/kg	50 - 100 mg	Neat or with NS/G5 to convenient vol.
Midazolam CD	0.1 - 0.2	mg/kg	5 mg	Neat or with NS/G5 to convenient vol.
Rocuronium bromide	0.6 - 1	mg/kg	30 - 50 mg	Neat or with NS/G5 to convenient vol.
Suxamethonium chloride	2	mg/kg	100 mg	Neat or with NS/G5 to convenient vol.
Thiopental sodium	2 - 5	mg/kg	100 - 250 mg	Reconstitute to 25mg/mL with 20mL NS/G5/WFI

Fluid Bolus	
Dose/kg	Calculated Volume
10mL/kg	500 mL
5mL/kg	250 mL

Maintenance Fluids		
%	Daily Allowance	Rate
100%	2000 mL/day	83.3 mL/hr
75%	1500 mL/day	62.5 mL/hr
50%	1000 mL/day	41.7 mL/hr

Cardiac Arrest/Arrhythmias					
Drug	Dose/kg		Calculated Dose	Administer Over	Dilution
Adenosine	0.1 - 0.5	mg/kg	3 - 12 mg	2 seconds	Neat or dilute to 0.5mg/mL with 6mL NS
Adrenaline (1:10,000) [100microg/mL]	0.01	mg/kg	0.5 mg	Rapid injection	Neat
Amiodarone hydrochloride cardiac arrest loading dose - arrhythmias	5 - 10	mg/kg	250 - 300 mg	3 minutes 20 minutes - 2 hours	Neat or dilute to 7.5 - 15mg/mL with G5 Dilute to 0.6 - 2.4mg/mL with G5
Calcium GLUCONATE 10% [0.22mmol/mL]	0.11	mmol/kg	5.5 mmol	5 - 10 minutes	Neat or dilute each 1mL with 4mL of NS/G5
Glucose 10%	2	mL/kg	100 mL	2 - 5 minutes	Neat
Magnesium sulfate 50% [500mg/mL]	25 - 50	mg/kg	1250 - 2000 mg	20 minutes	Dilute each 1mL with 4mL of NS/G5
• Potassium chloride 15% [2mmol/mL] CD	0.4	mmol/kg	20 mmol	1 hour	Dilute to 0.5mmol/mL with NS (preferred)/G5
Sodium bicarbonate 8.4% [1mmol/mL]	1	mmol/kg	50 mmol	Rate of 10mmol/min	<2 years: dilute with equal vol. of NS/G5/WFI

Seizures/Intracranial Pressure					
Drug	Dose/kg		Calculated Dose	Administer Over	Dilution
Lorazepam CD	0.1	mg/kg	4 mg	Rapid injection over 1 minute	Dilute to 2mg/mL with equal volume of NS/G5
Levetiracetam	40	mg/kg	2 g	5 minutes	Dilute to 50mg/mL (neonates: 100mg/mL) with NS/G5
Phenobarbital CD	20	mg/kg	1 g	20 minutes	Dilute to 20mg/mL with WFI
Phenytoin	20	mg/kg	1 g	Rate of 50mg/min	Dilute to 5-10mg/mL with NS (use 0.22-0.5micron filter)
Sodium chloride 2.7 - 3%	3 - 5	mL/kg	150 - 250 mL	10 - 15 minutes	Neat (2.7% preferred as pre-made solution)
Mannitol 20%	0.25 - 1	g/kg	62.5 - 250 mL	15 - 30 minutes	Neat (15micron filter recommended)

Asthma					
Drug	Dose/kg		Calculated Dose	Administer Over	Dilution
Magnesium sulfate 50% [500mg/mL]	40	mg/kg	2 g	Over 20 minutes	Dilute to 20mL with NS
Salbutamol 1-23 months	5	microg/kg	250 microg	5-10 minutes	Dilute to 5mL with NS/G5
over 2 years	15	microg/kg	250 microg	5-10 minutes	Dilute to 5mL with NS/G5

INTRAVENOUS INFUSIONS

50 kg

Affix Patient Label Here

Diluents:

NS = Sodium Chloride 0.9%, G5 = Glucose 5%,
WFI = Water for Injections

● = Central or intraosseus route only

CD = Controlled drug

Maximum doses highlighted in red



Note: Ideal or adjusted body weight should be used where clinically appropriate

Inotropes/Vasoactives

Infusion	Drug Amount	Diluent	Total Volume	Dose	Rate
● Adrenaline (1:1000) [1mg/mL] central	15 mg	NS or G5	50 mL	0.1 - 1.5 microg/kg/min	1 mL/hr = 0.1 microg/kg/min
Adrenaline (1:1000) [1mg/mL] peripheral	15 mg	NS or G5	500 mL	0.1 - 1.5 microg/kg/min	10 mL/hr = 0.1 microg/kg/min
● Amiodarone hydrochloride	120 mg	G5	50 mL	5 - 25 microg/kg/min	12.5 mL/hr = 10 microg/kg/min
Dinoprostone (Prostin®) neonates only					
● Isoprenaline under 12 years	1.5 mg	G5	50 mL	0.02 - 1 microg/kg/min	10 mL/hr = 0.1 microg/kg/min
over 12 years	3 mg	G5	50 mL	0.5 - 20 microg/min	1 mL/hr = 1 microg/min
Milrinone peripheral	10 mg	NS or G5	50 mL	0.25 - 0.75 microg/kg/min	7.5 mL/hr = 0.5 microg/kg/min
● Noradrenaline central	15 mg	NS or G5	50 mL	0.1 - 1.5 microg/kg/min	1 mL/hr = 0.1 microg/kg/min
Noradrenaline peripheral	8 mg	NS or G5	500 mL	0.1 - 1.5 microg/kg/min	18.75 mL/hr = 0.1 microg/kg/min
● Vasopressin (argipressin)	50 units	NS or G5	50 mL	0.0003 - 0.002 units/kg/min	1 mL/hr = 0.0003 units/kg/min

Sedatives/Analgesics/Muscle Relaxants

Infusion	Drug Amount	Diluent	Total Volume	Dose	Rate
Fentanyl CD	2500 microg	Neat	50 mL	1 - 10 microg/kg/hr	1 mL/hr = 1 microg/kg/hr
● Ketamine CD central	1500 mg	NS or G5	50 mL	10 - 45 microg/kg/min	1 mL/hr = 10 microg/kg/min
Ketamine CD peripheral	500 mg	Neat	50 mL	10 - 45 microg/kg/min	4.5 mL/hr = 15 microg/kg/min
Morphine CD	50 mg	NS or G5	50 mL	5 - 60 microg/kg/hr	1 mL/hr = 20 microg/kg/hr
Midazolam CD	100 mg	NS or G5 or Neat	50 mL	0 - 10 mg/hr	1 mL/hr = 2 mg/hr
Propofol 1% maximum 12 hours	500 mg	Neat	50 mL	50 - 200 mg/hr	10 mL/hr = 100 mg/hr
Rocuronium bromide	500 mg	Neat	50 mL	300 - 1000 microg/kg/hr	5 mL/hr = 1000 microg/kg/hr

Bronchodilators

Infusion	Drug Amount	Diluent	Total Volume	Dose	Rate
Aminophylline loading dose	500 mg	NS	500 mL	300 mg (6mg/kg)	300 mL over 20 minutes
followed by under 12 years	500 mg	NS	500 mL	1 mg/kg/hr	50 mL/hr = 1 mg/kg/hr
over 12 years	500 mg	NS	500 mL	0.5 - 0.7 mg/kg/hr	25 mL/hr = 0.5 mg/kg/hr
Magnesium sulphate 50% [500mg/mL]	5 g	G5	50 mL	2 g/hr	20 mL/hr over 4 hours
Salbutamol peripheral	10 mg	NS or G5	50 mL	20 microg/min	6 mL/hr = 20 microg/min

monitor for extravasation

Disclaimer: All medicines to be given INTRAVENOUSLY unless otherwise stated. It is the responsibility of the clinician to ensure drugs are used appropriately according to the clinical situation and doses double checked. NWTs/ODN does not accept any liability. Use of these monographs is at the clinician's own risk. Due to stock shortages and regional variation in available preparations, not every dose can be rounded to a measurable volume - clinical judgement is required to determine the most appropriate dose.

Version 1.2 (updated December 2025), Ratified by: MFT Paediatric Medicines Management Committee (January 2025) Review date: January 2028