Sodium Bicarbonate Injection USP 8.4%

Composition:
Each ml contains:
Sodium Bicarbonate USP 8.4 % W/V
Water For Injection USP QS

Indication: Used as an alkalinising agent in the treatment of metabolic acidosis.

PHARMACOLOGY
Sodium bicarbonate is a systemic alkalinizing agent which, when given intravenously, will increase plasma bicarbonate, buffer excess hydrogen ion concentration, raise blood pH and reverse the clinical manifestations of acidosis.
Sodium bicarbonate dissociates in water to provide sodium and bicarbonate ions ($HCO3–$). Sodium is the principal cation of the extracellular fluid and plays a large part in the therapy of fluid and electrolyte disturbances. Bicarbonate is a normal constituent of body fluids and the normal plasma level ranges from 24 to 31 mmol/L.
The urinary pH will be increased by sodium bicarbonate in patients with normal renal function.
Alkalinising the urine can increase the solubility of certain weak acids, and can increase the ionisation and urinary excretion of lipid-soluble organic acids (e.g. phenobarbitone, salicylates).

INDICATIONS
Sodium Bicarbonate Injection is indicated as an alkalinising agent in the treatment of metabolic acidosis which may occur in many conditions including diabetes, starvation, hepatitis, cardiac arrest, shock, severe dehydration, renal insufficiency, severe diarrhoea, Addison's disease or administration of acidifying salts (e.g. excessive sodium chloride, calcium chloride, ammonium chloride).
Sodium Bicarbonate Injection is also used to increase urinary pH in order to increase the solubility of certain weak acids (e.g. cystine, sulphonamides, uric acid) and in the treatment of certain intoxications
(e.g. methanol, phenobarbitone, salicylates, lithium) to decrease renal absorption of the drug or to correct acidosis.

CONTRAINDICATIONS
Sodium Bicarbonate Injection is contraindicated in patients with renal failure, respiratory or metabolic alkalosis, hypoventilation or chloride depletion, hypernatraemia, hypertension, oedema, congestive heart failure, eclampsia, aldosteronism, a history of urinary calculi and consistent potassium depletion or hypocalcaemia.
It is also generally contraindicated in patients with excessive chloride loss from vomiting or continuous gastrointestinal suctioning and in patients at risk of developing diuretic-induced hypochloraemic alkalosis.

DOSAGE AND ADMINISTRATION
Dosage of Sodium Bicarbonate Injection is determined by the severity of the acidosis, appropriate laboratory determinations, and the patient's age, weight and clinical condition.Sodium Bicarbonate Injection is administered by the intravenous route preferably via a central line.
Extravasation must be avoided; the solution is hypertonic and irritant to veins resulting in extensive skin necrosis if the solution leaks from the vein in the tissues. Intramuscular injection is not recommended.
Contains no antimicrobial agent and is for single use in one patient on one occasion only.

Dosage: As directed by the physician.

Storage: Store in a cool and dry place away from light.

Keep out of reach of children.

Caution: The injection should be discarded if any visible particles appear.

US Pharma®
(INDIA) Private Limited
Pioneering Excellence. Redefining Quality.
www.uspharma.in