

Albumin 5%

12.5 g/250 mL, 25 g/500 mL (Alburex® 5 AU)

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Note:

This guideline provides advice of a general nature. This statewide guideline has been prepared to promote and facilitate standardisation and consistency of practice, using a multidisciplinary approach. The guideline is based on a review of published evidence and expert opinion.

Information in this statewide guideline is current at the time of publication.

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Health practitioners in the South Australian public health sector are expected to review specific details of each patient and professionally assess the applicability of the relevant guideline to that clinical situation.

If for good clinical reasons, a decision is made to depart from the guideline, the responsible clinician must document in the patient's medical record, the decision made, by whom, and detailed reasons for the departure from the guideline.

This statewide guideline does not address all the elements of clinical practice and assumes that the individual clinicians are responsible for discussing care with consumers in an environment that is culturally appropriate and which enables respectful confidential discussion. This includes:

- The use of interpreter services where necessary,
- Advising consumers of their choice and ensuring informed consent is obtained,
- Providing care within scope of practice, meeting all legislative requirements and maintaining standards of professional conduct, and
- Documenting all care in accordance with mandatory and local requirements

Caution

There are multiple strengths of Albumin (human) available, albumin 4% or 5% and albumin 20%. **Incorrect product selection could lead to severe circulatory overload or sudden cardiac failure.**

Albumin is a blood product and requires consent before administration. Order Albumin through Blood Transfusion Service.

Synonyms

Human albumin, normal serum albumin

Dose and Indications

Hypotension, septic shock

Hypovolaemia

Intravenous

10 mL/kg/dose of albumin 5% (0.5 g/kg)

In September 2023, the albumin 4% product (Albumex 4® 2 g/50 mL) will be transitioned to albumin 5% (Alburex 5 AU®, available in 12.5 g/250 mL and 25 g/500 mL vials).



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Preparation and Administration

Intravenous

Albumin 5%

Hypotension, septic shock – Infuse over 20 to 30 minutes or as indicated by clinical scenario

Alburex® 5 AU is stored below 25°C (do not freeze). Warm to room or body temperature before administering. Protect from light. This solution contains 140 mmol/L of sodium.

- > Infuse through a standard IV giving set or blood administration set (with 170-200 microg filter).
- > Due to differences in the manufacturing processes albumin products can vary in colour; it is a clear, almost colourless, yellow, amber, or green liquid. If solution appears cloudy or turbid, do not use.
- > Alburex® does not contain antimicrobial agents so it must be used immediately after opening. Use within 4 hours of opening the vial.

Compatible Fluids

Glucose 5%, glucose 10%, sodium chloride 0.9%, glucose/sodium chloride solutions

Adverse Effects

Common

Chills, fever, vomiting, urticaria

Unknown frequency

Hypotension, hypertension, rigors, sodium overload, vascular overload causing pulmonary oedema, cardiac failure, anaphylaxis/hypersensitivity

Monitoring

- > Temperature, blood pressure, respiration and heart rate at baseline and during infusion
- > Observe for signs of hypervolemia, pulmonary odema and cardiac failure

Practice Points

- > Incompatible with multiple medications (refer to your pharmacy department for more information).
- > Albumin infusions do not confer any advantage over crystalloid in the acute treatment of hypovolaemia. Isotonic crystalloid solutions are recommended for initial volume expansion.
- > See local guidelines for site specific handling and administration procedures.
- > Adhere to site policy for recording use of plasma products (e.g. batch numbers)



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Document Ownership & History

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Approval Date	Version	Who approved New/Revised Version	Reason for Change
07/11/2023	V1.0	Domain Custodian, Clinical Governance, Safety and Quality	Transition of 4% albumin to 5% albumin

