

beractant

200mg/8mL suspension

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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

Synonyms

Survanta®

Dose and Indications

Treatment and prevention of respiratory distress syndrome (RDS) in preterm infants

Endotracheal

100mg/kg (4mL/kg) per dose

Repeat doses may be given every 6 to 12 hours for up to 4 doses in total.

Meconium Aspiration Pneumonitis

Endotracheal

100-150mg/kg (4-6mL/kg) per dose only on consultant's recommendation

Preparation and Administration

Endotracheal

Administer via an endotracheal tube. Follow appropriate Neonatal Unit specific procedures and guidelines.

Store in the refrigerator (4°C), but warm to room temperature before use.

Invert vial gently without shaking to re-suspend the material.

Any remaining in vial should be discarded.

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Compatible Fluids

Do not dilute with any fluid

Adverse Effects

Common

Transient endotracheal tube obstruction, transient bradycardia, decreased oxygen saturation

Infrequent

Hypotension

Practice Points

- > Unopened vials that have been warmed to room temperature at one time may be returned to the refrigerator within 24 hours. Vials should not be warmed and returned to the refrigerator more than once.

References

- > El Shahed AI, Dargaville PA, Ohlsson A, Soll R. Surfactant for meconium aspiration syndrome in term and late preterm infants. Cochrane Database of Systematic Reviews 2014, Issue 12. Art. No.: CD002054. DOI: 10.1002/14651858.CD002054.pub3.
- > Lotze, A., Mitchell, B.R., Bulas, D.I., Zola, E.M., Shalwitz, R.A., Gunkel, J.H. and Group, S.I.T.I.S., 1998. Multicenter study of surfactant (beractant) use in the treatment of term infants with severe respiratory failure. The Journal of Pediatrics, 132(1), pp.40-47.



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Document Ownership & History

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Approval Date	Version	Who approved New/Revised Version	Reason for Change
5/7/2018	V2	SA Health Safety and Quality Strategic Governance Committee	Formally reviewed in line with 5 year scheduled timeline for review.
1/11/2012	V1	SA Maternal & Neonatal Community of Practice	Original SA Maternal & Neonatal Community of Practice approved version.

