

Who can administer

May be administered by registered competent doctor or nurse/midwife

Important information

- Unlicensed preparation

Available preparations

Famotidine 20mg per 2ml vial

Reconstitution

Already in solution

Dilute further prior to administration

Infusion fluids

Sodium chloride 0.9% or Glucose 5%

Methods of intravenous administration

Intermittent intravenous infusion (preferred route)

- Dilute 20mg with 100ml infusion fluid, and administer over 15 to 30 minutes

Slow intravenous injection

- Dilute each 20mg to a volume of 5 to 10ml with infusion fluid and administer over at least two minutes

Dose in adults

Usual dose

- Give 20mg every 12 hours until oral therapy can be introduced

Premedication of infusion reactions ^(ref 1)

- Give 20mg thirty to sixty minutes prior to infusion
- Usually given in conjunction with an H1 antihistamine and glucocorticoid

Prophylaxis of acid aspiration (Mendelson's) syndrome ^(ref 1)

- Give 20mg forty to ninety minutes before induction of general anaesthesia

Prophylaxis of upper gastrointestinal haemorrhage from stress ulceration in seriously ill patients ^(ref 1)

- Give 20mg twice daily

Renal impairment

- **Complete atrioventricular block** has been reported in association with administration of famotidine injection ^(ref 2)
- **Prolonged QT interval** has been reported in patients with moderate to severe renal impairment ^(ref 1)
- The manufacturers advise that CNS adverse effects have been reported in patients with moderate and severe renal insufficiency
- For patients with CrCl <50 mL/minute: advise increase the dosing interval to 36-48 hours ^(ref 1)

Storage

Storage in a **refrigerator** at 2-8⁰C

References

SPC for Famotidine IV (Mylan) revised April 2022

1: UpToDate, accessed 07/05/2025

2: Complete Atrioventricular Block and Cardiac Arrest following Intravenous Famotidine Administration
Anesthesiology 2 1999, Vol.90, 623-626.Â

Therapeutic classification

H2-receptor antagonists