

## Who can administer

Administration RESTRICTED: see [Appendix 1](#)

## Important information

**Cardiovascular monitoring required** (see monitoring requirements)

For Y-site compatibility [see below](#)

## Available preparations

Dobutamine 250mg per 20ml ampoule

## Reconstitution

Already in solution

**Draw up using a 5 micron filter needle**

**Dilute further prior to administration**

## Infusion fluids

Sodium chloride 0.9% or Glucose 5%

## Methods of intravenous administration

**Continuous intravenous infusion(adminster using an electronically controlled infusion device)**

Add 250mg dobutamine to make a final volume of 50ml, 250ml or 500ml of infusion fluid:

Amount to add (mg)	Final vol (ml)	Final concentration	
250mg	50ml	5mg per ml (5,000micrograms per ml) <b>(usual strength)</b>	Central line only (unless as part of St Marys ward protocol- <a href="#">CLN-CR-083</a> )
250mg	250ml	1mg per ml (1,000 micrograms per ml)	Central line or large peripheral vein <sup>(ref 2)</sup>
250mg	500ml	0.5mg per ml (500 micrograms per ml)	

- Set up as a continuous infusion and adjust rate according to dose information opposite
- **Fluid restricted patients:** If absolutely necessary, anecdotal evidence suggests a 10mg/ml or even undiluted solution may be given via a **central line** <sup>(ref 1)</sup>

## Dose in adults

### Usual dose

- 2.5 to 10 microgram/kg/minute, adjusted according to response

- For a 70kg patient (using 250mg in 50ml) this corresponds to 2.1 to 8.4ml/hour
- Doses up to 40 microgram/kg/minute have been required, but this is rare
- It is recommended that treatment with dobutamine should be discontinued gradually

<b>Using a 250mg in 50ml solution</b>				
<b>Dose (micrograms/kg/minute)</b>	<b>2.5</b>	<b>5</b>	<b>7.5</b>	<b>10</b>
<b>Weight (KG)</b>	<b>Rate in ml per hour</b>			
40	1.2	2.4	3.6	4.8
45	1.4	2.7	4	5.4
50	1.5	3	4.5	6
55	1.7	3.3	5	6.6
60	1.8	3.6	5.4	7.2
65	2	3.9	5.9	7.8
70	2.1	4.2	6.3	8.4
75	2.3	4.5	6.8	9
80	2.4	4.8	7.2	9.6
85	2.6	5.1	7.7	10.2
90	2.7	5.4	8.1	10.8
95	2.9	5.7	8.6	11.4
100	3	6	9	12
105	3.2	6.3	9.5	12.6
110	3.3	6.6	9.9	13.2
115	3.5	6.9	10.4	13.8
120	3.6	7.2	10.8	14.4

**Table 1: Dobutamine 250mg in 50ml (5mg per ml) - rates of administration**

**Other concentrations**

- If using a **250mg in 250ml** strength (**1mg/ml**)- you can **multiply the rates in Table 1 by five** to get the appropriate rate in ml/hour
- Example: for a 95kg patient on 5 micrograms/kg/minute- using a 250mg in 50ml solution, the rate is 5.7ml per hour. If using a 250mg in 250ml strength, the rate is 28.5ml per hour

## Monitoring

- Heart rate and rhythm, arterial blood pressure and infusion rate should be monitored closely
- **Telemetry monitoring required** (But see also guideline 'Continuous Dobutamine infusion in the treatment of refractory fluid overload in patients with Advanced Heart Failure in St Marys ward in University Hospital Galway'- see Q-Pulse document [CLN-CR-083](#)- telemetry monitoring may not be required in a certain subset of patients)

## Further information

- Solutions of dobutamine may have a pink discolouration
- This discolouration, which will increase with time results from a slight oxidation of the drug
- However there is no significant loss of drug potency during the 24 hour infusion period
- For information concerning continuous **dobutamine infusion** in the treatment of refractory fluid overload **in ward areas**, see Q pulse policy [CLN-CR-083](#)

## Storage

- Store below 25<sup>0</sup>C
- A slight pink discoloration should not concern those administering the drug

## References

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1: Critical care group. Minimum infusion volumes 4th edition 2012

2: Injectable Medicines Administration Guide Medusa downloaded 18/02/2025

## Therapeutic classification

Inotropic sympathomimetics