

# TauroLock Urokinase 25,000 Catheter Lock Solution for Adults



## Who can administer

May be administered by registered competent doctor or nurse/midwife

## Important information

- Used as a catheter lock solution only: **NOT FOR SYSTEMIC INJECTION**
- **Anaphylaxis** can be a concern with this product- ensure adrenaline, corticosteroids, antihistamine and paracetamol are available

## Available preparations

TauroLock U25,000 vial with 5mL solvent ampoule

- The vial contains the Urokinase powder
- The solvent ampoule contains TauroLock

## Reconstitution

- Add 5mL from TauroLock ampoule to the vial containing the powder

## Methods of intravenous administration

### Used as a catheter lock: **NOT FOR SYSTEMIC INJECTION**

- Ensure the product has been prescribed on the prescription sheet
- Instil into the line slowly (not more than 1mL per second), in a quantity sufficient to fill the lumen completely
- TauroLock Urokinase will remain inside the access device until the next treatment (for a maximum of 30 days)
- Prior to the next treatment, TauroLock Urokinase must be aspirated and discarded
- Flush the device with 10mL Sodium chloride 0.9%

### To unblock lines (Unlicensed use)

- Ensure the product has been prescribed on the prescription sheet
- Draw up the required volume of solution according to the volume of the lumen
- Instil into the line slowly (not more than 1mL per second), in a quantity sufficient to fill the lumen completely
- Leave for 30 to 120 minutes <sup>(ref 1,2)</sup> - then check for patency by withdrawing 5mL volume from the lumen. If patency has been restored, flush the lumen with 15mL Sodium chloride 0.9%

## Further information

- TauroLock Urokinase is licensed to ensure patency and provide infection control in the device.
- It is instilled in the device lumen between treatments in order to make the internal flow passages resistant to clot formation and hostile to bacterial and fungal growth
- The solution is withdrawn prior to the next treatment

- In the case of accidental administration into systemic circulation, citrate is metabolised within 10 minutes of administration. Taurolidine is non-toxic and is quickly degraded to the physiological amino acid taurine. Urokinase is eliminated rapidly from the circulation by the liver with a half-life of up to 20 minutes. No known adverse effects in humans due to the active ingredients in TauroLocks when used as directed. There are no known risks associated with concomitant systemic antibiotic therapy or exposure to magnetic fields. TauroLock products may cause mild hypocalcaemic symptoms (e. g. metallic taste) caused by the contents of 4% citrate if instillation is not done slowly as directed. <sup>(ref 3)</sup>

## Storage

- Store between 15 and 25°C
- Do not freeze

## References

Package leaflet 17/05/2019

- 1: Guideline: the use of antithrombotic agent to unblock thrombosed haemodialysis catheters, Version 5, March 2019. Cambridge University Hospitals NHS Foundation trust
- 2: Patient information Urokinase, Renal Department, East and North Hertfordshire NHS trust August 2018
- 3: Interim central venous catheter (CVC) occlusion guidance while supply of urokinase is low. University Hospitals Bristol and Weston Version 1.5 Nov 21