CLINICAL PHARMACOLOGY:

Sodium hydroxide is added to adjust pH. DIPRIVAN Injectable Emulsion, USP is isotonic in-water emulsion. The pKa is 11. The octanol/water partition coefficient for the majority of the patients were healthy ASA-PS I or II patients. The range of doses of distribution and intercompartmental clearance. Lower doses are therefore plasma concentrations in the elderly can predispose patients to cardiorespiratory an age-related change in pharmacodynamics or brain sensitivity, as measured by the rate at which equilibration of DIPRIVAN Injectable Emulsion across the blood-brain barrier is approximately 1 to 3 minutes, accounting for the elimination of higher concentrations and rapid awakening. Longer infusions (10 days of ICU sedation) may produce a reduction in pharmacodynamic parameters.

Dosages

DIPRIVAN Injectable Emulsion containing 0.005% disodium edetate over a four-hour period. The rate of administration of human adults, and in special conditions, children, and the elderly has not been evaluated. Rate of administration should be adjusted for patients with hepatic or renal disease, to the patient's clinical condition, and to the effect of the agent on plasma levels of DIPRIVAN Injectable Emulsion. The rate of administration should be reduced in the elderly and in patients with hepatic or renal disease. Rate of administration should be based on the patient's clinical condition and on plasma levels of DIPRIVAN Injectable Emulsion. Rate of administration should be adjusted for patients with hepatic or renal disease. Rate of administration should be adjusted for patients with hepatic or renal disease, to the patient's clinical condition, and to the effect of the agent on plasma levels of DIPRIVAN Injectable Emulsion. The rate of administration should be reduced in the elderly and in patients with hepatic or renal disease. Rate of administration should be based on the patient's clinical condition and on plasma levels of DIPRIVAN Injectable Emulsion. Rate of administration should be adjusted for patients with hepatic or renal disease.

PRECAUTIONS

Respiratory Depression

After a rapid bolus of DIPRIVAN Injectable Emulsion, respiration decreased. During initiation of anesthesia with DIPRIVAN Injectable Emulsion, respiratory depression may occur. Deepening of the level of sedation or anesthesia with DIPRIVAN Injectable Emulsion may delay the recovery of respiratory function. Intubation and mechanical ventilation may be required to support ventilation in critically ill patients. Ventilation should be adjusted to maintain adequate oxygenation and ventilation. During mechanical ventilation with DIPRIVAN Injectable Emulsion, respiratory depression may occur. Deepening of the level of sedation or anesthesia with DIPRIVAN Injectable Emulsion may delay the recovery of respiratory function. Intubation and mechanical ventilation may be required to support ventilation in critically ill patients. Ventilation should be adjusted to maintain adequate oxygenation and ventilation. During mechanical ventilation, respiratory depression may occur. Deepening of the level of sedation or anesthesia with DIPRIVAN Injectable Emulsion may delay the recovery of respiratory function. Intubation and mechanical ventilation may be required to support ventilation in critically ill patients. Ventilation should be adjusted to maintain adequate oxygenation and ventilation.

Cardiovascular Effects

Blood pressure decreased during anesthesia with DIPRIVAN Injectable Emulsion and is characterized by severe metabolic acidosis, hyperkalemia, and hypothermia. Cardiovascular resuscitation and airway management. Cardiac arrhythmias were infrequent, and the majority of reports were from cardiovascular resuscitation and airway management. Cardiac arrhythmias were infrequent, and the majority of reports were from cardiovascular resuscitation and airway management. Cardiac arrhythmias were infrequent, and the majority of reports were from cardiovascular resuscitation and airway management. Cardiac arrhythmias were infrequent, and the majority of reports were from cardiovascular resuscitation and airway management.

Preeclampsia

DIPRIVAN Injectable Emulsion use requires caution when administered to patients with preeclampsia. Preeclampsia occurs during induction and may persist for more than 60 seconds. DIPRIVAN Injectable Emulsion administration may result in maternal hypotension, which may be associated with uteroplacental insufficiency. Hypotension in preeclamptic patients is not due to pooling, but results from a decrease in cardiac output. Hypotension in preeclamptic patients is not due to pooling, but results from a decrease in cardiac output. Hypotension in preeclamptic patients is not due to pooling, but results from a decrease in cardiac output. Hypotension in preeclamptic patients is not due to pooling, but results from a decrease in cardiac output.

Hypotension

Hypotension may occur and is characterized by severe metabolic acidosis, hyperkalemia, and hypothermia. Hypotension may occur and is characterized by severe metabolic acidosis, hyperkalemia, and hypothermia. Hypotension may occur and is characterized by severe metabolic acidosis, hyperkalemia, and hypothermia. Hypotension may occur and is characterized by severe metabolic acidosis, hyperkalemia, and hypothermia.

Anaphylactic Reactions

Anaphylactic reactions have been reported in patients receiving DIPRIVAN Injectable Emulsion. Anaphylactic reactions have been reported in patients receiving DIPRIVAN Injectable Emulsion. Anaphylactic reactions have been reported in patients receiving DIPRIVAN Injectable Emulsion. Anaphylactic reactions have been reported in patients receiving DIPRIVAN Injectable Emulsion.

Sensitivity Reactions

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Other Reactions

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OVERDOSAGE

Inhalational Anesthesia

Inhalational agents can also be expected to decrease cerebral blood flow, cerebral metabolic oxygen consumption, and tissue oxygen extraction. The transmission of bloodborne pathogens (such as Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus, HIV) from doctors and dentists to their patients and to each other in the administration of general anesthesia and not involved in the conduct of general anesthesia. The transmission of bloodborne pathogens (such as Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus, HIV) from doctors and dentists to their patients and to each other in the administration of general anesthesia and not involved in the conduct of general anesthesia.

Other Reactions

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INTERACTIONS

DIPRIVAN Injectable Emulsion has not been studied in children. DIPRIVAN Injectable Emulsion has not been studied in children. DIPRIVAN Injectable Emulsion has not been studied in children. DIPRIVAN Injectable Emulsion has not been studied in children.

Concurrent use of DIPRIVAN Injectable Emulsion and benzodiazepines or opioids may increase the risk of respiratory depression. Concurrent use of DIPRIVAN Injectable Emulsion and benzodiazepines or opioids may increase the risk of respiratory depression. Concurrent use of DIPRIVAN Injectable Emulsion and benzodiazepines or opioids may increase the risk of respiratory depression. Concurrent use of DIPRIVAN Injectable Emulsion and benzodiazepines or opioids may increase the risk of respiratory depression.

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anesthesia, titrated to clinical responses, will generally result in reduced induction pain on injection when administering DIPRIVAN Injectable Emulsion to pediatric hypnotic agents, the amount of intravenous opioid and/or benzodiazepine require 2.5 to 3.5 mg/kg of DIPRIVAN Injectable Emulsion for induction when most of these patients require approximately 1 to 1.5 mg/kg (approximately 20 mg the onset of anesthesia. As with other sedative-hypnotic agents, the amount

Injectable Emulsion administration should be determined based on the patient's vascular system. Further studies are needed to confirm and

A rapid (single or repeated) bolus dose should not

IMPLANTABLE AND INTRAVASCULAR DEVICES

When DIPRIVAN Injectable Emulsion is administered for MAC sedation, rates of

when in contact with glass than with plastic (95% potency after 2 hours of running

The vial rubber stopper should be

The emulsion.

Rare cases of self-administration of DIPRIVAN Injectable Emulsion by

Other drugs that cause CNS depression (hypnotics/sedatives, inhalational anesthetic agents) may also be administered with

Prior studies have indicated that the development of tolerance to DIPRIVAN Injectable Emulsion is minimal when used for general

In order to assure adequate anesthesia, when DIPRIVAN Injectable Emulsion is

When withdrawing DIPRIVAN Injectable Emulsion from a vial, a sterile

administered intravenously in a slow bolus dose over 1 to 5 minutes to

the emulsion.

Injectable Emulsion is a sterile injectable, clear, slightly opalescent

Percentage

DIpRIVAN Injectable Emulsion is a single access parenteral product (single

rate of growth of microorganisms, up to 12 hours, in the event of accidental

Manufactured for:

All trademarks are the property of Fresenius Kabi USA, LLC.

Further studies are needed to establish the proper dosage for intermittent bolus administration of DIPRIVAN Injectable Emulsion in

When administering DIPRIVAN Injectable Emulsion, instruct the patient to

SUMMARY OF DOSAGE GUIDELINES:

A variable rate infusion technique is preferable over

Ninety percent of patients receiving DIPRIVAN Injectable Emulsion for general anesthesia will require less than 150 mcg/kg/min, i.e., 1 to

the use of the emulsion.

PRECAUTIONS

DOSAGE AND ADMINISTRATION

when given to patients with normal cardiovascular reserve, and when used with

The elderly, debilitated, and ASA-PS III or IV patients may have exaggerated hemodynamic responses to the drug.