This information was up to date at the time of release to the Heads of Midwifery.
The editorial board does not accept liability for any errors or omissions following its subsequent publication.
Updating arrangements for the formulary should be decided upon and implemented at a local level.

Gelofusine

Legal status (GSL, P or POM on exemption list, or PGD)	▪ POM - midwife may administer as medicine is on midwives exemptions list
Patient group	Women requiring resuscitation with intravenous fluids post haemorrhage.
Clinical indication	Management of hypovolaemic shock due to haemorrhage. To be used after initial treatment with crystalloids of fluid to maintain circulatory volume until blood is available. Training in management of obstetric haemorrhage is required.
Pharmacology (Onset and duration of action where appropriate)	Colloids are plasma volume substitutes which replace and maintain the circulatory volume. They contain large molecules that do not readily leave the intravascular space and exert osmotic pressure to prevent fluid seeping in to the extracellular space. Administration produces significant increases in blood volume, cardiac output, stroke volume, blood pressure, urinary output and oxygen delivery. It also promotes an osmotic diuresis protecting the kidneys from the adverse effects of hypovolaemia.
Pharmaceutical form, strength, route of administration	Solution for infusion. Each litre contains: succinylated gelatin (modified fluid gelatin, average molecular weight 30 000) 40 g Na^+ 154 mmol Cl^- 120 mmol For intravenous infusion.
Dose, frequency and maximum number of doses or period of time for administration or supply	500ml may be given in 5-10 minutes until signs of hypovolaemia are relieved. Rate of subsequent infusion will depend on clinical state. Maximum of 1.5l Ideally when given rapidly solution should be warmed to no more than 37°C. (In its guideline the RCOG recommends a maximum of 1.5l to be given, with the simultaneous seeking of urgent medical help. If no blood is available this could be given up to a maximum of 2l).
Contra-indications/exclusion criteria	▪ known hypersensitivity to modified fluid gelatine

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Cautions and action that will be taken if a caution applies	▪ give with care in women who are susceptible to circulatory overloading (eg severe congestive cardiac failure or renal failure with oliguria or anuria) since excessive volumes may give rise to circulatory overload and electrolyte imbalance ▪ women with cardiac disease, liver disease, or renal impairment; urine output should be monitored ▪ avoid haematocrit concentration from falling below 25% ▪ monitor for hypersensitivity reactions ▪ check and document any allergies ▪ check and document past medical and drug history and current medication to ascertain potential for overdose ▪ if a caution applies consult with a doctor before administration or supply ▪ record consultation in maternity record
Medicine interactions and action that will be taken if a patient is taking a medicine that may interact	▪ none known ▪ if there is a drug interaction consult with a doctor/GP before administration or supply ▪ document consultation in maternity record ▪ refer to current BNF for latest information on interactions
Potential adverse reactions and side effects including actions to be taken if adverse drug reaction is suspected	▪ *hypersensitivity reactions may occur including, rarely, severe anaphylactic reactions* ▪ *transient increase in bleeding time may occur* *on labour* *Nil* *on the neonate* *Nil* *on breast feeding* *Nil* ▪ *if a serious adverse reaction is suspected please report to the MHRA Yellow Card Scheme http://yellowcard.mhra.gov.uk/*
Overdose	▪ symptoms of circulatory overload and electrolyte imbalance ▪ immediate assessment/ treatment is essential - refer to medical staff ▪ management should be in accordance with established treatment guidelines or see BNF overdose section ▪ for further advice contact National Poisons Centre 0344 892 0111
Action if patient declines	▪ refer to authorised prescriber or doctor ▪ document in maternity record
Additional advice and information	▪ supply the manufacturer's patient information leaflet if requested
Patient monitoring arrangements during and after treatment and follow-up required	Call for help as urgent medical help is required. Monitor serum urea and electrolytes and full blood count. Position woman flat on one side. Monitor pulse and BP. Send blood for group and screen. Follow PPH protocol.

Gelofusine	
Particular storage requirements	Do not store above 25 °C. Do not freeze.

References

1. Summary of Product Characteristics from B Braun text revision 09.01.2018 Personal communication from B Braun. Last updated 09.01.2018. Accessed 23.12.2019.

2. http://www.bnf.org/