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新 藥 通 知

料 號 藥 理 藥品名稱

分類號

190043 7814 Ciclesonide (Corticosteroids)
 'Alvesco' 160mcg/dose, 60doses/btl

Usual Dose:

Adult & adolescent: 80-1280 mcg/day.

Child 4-11yr: 80-160 mcg/day.

孕婦安全分級：C

衛生署適應症：成人、青少年及四歲以上兒童之持續性氣喘。

ADR：Paradoxical bronchospasm, hoarseness, bad taste, application site reactions
 such as burning, inflammation, irritation.

禁忌：對此成份過敏者。

備註：第 107 次藥委會同意列入本院處方用藥，並刪除 Fluticasone (Flixotide)
 accuhaler 250mcg/dose, 60dose/btl，將於 Flixotide 用罄後啟用。

成大醫院第十一版處方集更新

頁數	原文	更新
277	Heparin sodium 肝 'Heparin; Agglutex' 25,000IU/5mL/vial Usual Dose: IVD: Adult: Initially, 5,000 units into the tubing after infusion is started, then 20,000-30,000 units/day at an initial rate of 0.5 unit/kg/min.	Heparin sodium 肝 'Heparin; Agglutex' 25,000IU/5mL/vial Usual Dose: Adults: Full-dose therapy (based on 68 kg adult): Loading dose, 5,000 U IV, then 20,000-40,000 U IVD over 24 hr. Alternatively, in ACCP (American College

	Child: 50 units/kg initially, followed by 100 units/kg q4h. Intermittent IV: Adult: 5,000 units initially, followed by 5,000-10,000 units q4h. SC: For low dose prophylaxis: 5,000 units 2 hr before surgery and q12h thereafter until the patient is discharged or is fully ambulatory. For usual full-dose effect: 10,000-12,000 units q8h or 14,000-20,000 units q12h. DIC: Adult: 50 units/kg. Child: 25 units/kg q6h or by continuous infusion.	of Chest Physicians) recommends, LD 80 U/kg then IVD 18 U/kg/hr. Alternatively, LD 10,000 U, then intermittent IV 5,000-10,000 U q4-6h. Alternatively, LD 5,000 U IV, then SC 10,000-20,000 U, followed by 8,000-10,000 U q8h or 15,000-20,000 U q12h. Acute ischemic complication of AMI: LD 60 U/kg (max. 4000 U), then 12 U/kg/hr (max. 1000 U/hr). Adjust to maintain a target aPTT. DIC: IV, 50-100 U/kg q4h. If there is no improvement after 4-8 hr, the drug should be discontinued. DVT prophylaxis: Deep SC, 5,000 U 2 hr prior to surgery and 5,000 U q8-12h post-OP for 7 days or until the patient is fully ambulatory. Child: Full-dose therapy: Initially 50 U/kg, then IVD 100 U/kg q4h; alternatively 20,000 U/m²/24h. ACCP suggests for neonate or child < 1 yr is 28 U/kg/hr and child > 1 yr is 20 U/kg/hr initially, with dosage adjusted to maintain a target aPTT. DIC: IV, 25-50 U/kg q4h or by continuous infusion.
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