**5% Dextrose and 0.45% Sodium Chloride Injection, USP**

**VISIV™ Container**

**DESCRIPTION**

5% Dextrose and 0.45% Sodium Chloride Injection, USP solution is sterile and nonpyrogenic. It is a large volume parenteral solution containing dextrose and sodium chloride in water for injection intended for intravenous administration.

Each 100 mL of 5% Dextrose and 0.45% Sodium Chloride Injection, USP contains 4.45 g of glucose (C6H12O6), 2.5 g of sodium chloride (NaCl), and 2.0 mEq of sodium (Na+). Sodium chloride (NaCl) is the principal cation of the extracellular fluid and plays a large part in the regulation of fluid and electrolyte balance. Sodium chloride (NaCl) ions play an important role in the regulation of the volume, colloid osmotic pressure, and acid-base balance of the extracellular fluid, and play a large part in the therapy of fluid and electrolyte disorders.

**CONTRAINDICATIONS**

None known.

**WARNINGS**

Solutions containing sodium ions should be used with great care, if at all, in patients with congestive heart failure, severe renal insufficiency and in clinical states in which there exists edema with sodium retention.

Excessive administration of potassium-free solutions may result in significant hypokalemia.

In patients with diminished renal function, administration of solutions containing sodium ions may result in sodium retention.

The intravenous administration of these solutions can cause fluid and/or solute overload resulting in dilution of serum electrolyte concentrations, overhydration, congested states or pulmonary edema.

The risk of distal states is inversely proportional to the electrolyte concentrations of administered parenteral solutions. The risk of solute overload causing congested states with peripheral and pulmonary edema is directly proportional to the electrolyte concentrations of such solutions.

**PRECAUTIONS**

**Clinical Evaluation and Periodic Laboratory Determinations**

It is necessary to monitor changes in fluid balance, electrolyte concentrations and acid-base balance during prolonged parenteral therapy or whenever the condition of the patient warrants such evaluation.

Solutions containing dextrose should be used with caution in patients with known subclinical or overt diabetes mellitus.

Caution must be exercised in the administration of parenteral fluids, especially those containing sodium ions to patients receiving corticosteroids or corticotropin.

Do not administer unless solution is clear and container is unimpaired.

**Drug Interactions**

Additives may be incompatible. Consult with pharmacist, if available. When introducing additives, use aseptic technique, mix thoroughly and do not store.

**INSTRUCTIONS FOR USE**

Check for leaks by agitating container firmly. If leaks are found, discard unit until sterility may be impaired. If supplemental medication is desired, follow directions below before preparing for use.

**To Add Medication (Use aseptic technique)**

1. Remove blue cap from sterile medication additive port at bottom of container.

2. With a needle of appropriate length, puncture resealable additive port and inject medication.

3. Mix container contents thoroughly.

**OVERDOSAGE**

In the event of overhydration or solute overload, re-evaluate the patient and institute appropriate corrective measures. See WARNINGS, PRECAUTIONS, AND ADVERSE REACTIONS.

**DOSAGE AND ADMINISTRATION**

The dose is dependent upon the age, weight and clinical condition of the patient.

As reported in the literature, the dosage and constant infusion rate of intravenous dextrose must be selected with caution in pediatric patients, particularly neonates and low birth weight infants, because of the increased risk of hyperglycemia/hypoglycemia.

**HOW SUPPLIED**

5% Dextrose and 0.45% Sodium Chloride Injection, USP is supplied in single-dose flexible plastic containers as follows:

<table>
<thead>
<tr>
<th>List No.</th>
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<th>Container Size (mL)</th>
</tr>
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**Exposure of pharmaceutical products to heat should be minimized. Avoid excessive heat. Protect from freezing. Store at 20 to 25°C (68 to 77°F).** (See USP Controlled Room Temperature).

**Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration, whenever solution and container permit. See PRECAUTIONS.**

**Pregnancy**

Category C.

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