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Important Correction Notice

Pediatric Injectable Drugs Eighth Edition (The Teddy Bear Book)

The publisher wishes to inform you of a correction in the monograph for **Diltiazem HCl (p.146)**

“Dosage” section – atrial tachycardias should read as follows:

Atrial tachycardias: Seven children from 0.6–13 years old were given 0.25 mg/kg over 5 min followed by a continuous infusion of 0.05–0.15 mg/kg/h for up to 126 h as a bridge to definitive treatment.(2) Calcium gluconate and volume were readily available prior to initiation of diltiazem.(2)

We ask you to make this correction in all copies of *Pediatric Injectable Drugs 8th Edition (The Teddy Bear Book)* and to communicate it to all others on your staff who may use the book.

Earlier corrections notices to *Pediatric Injectable Drugs Eighth Edition* :

October 2008

Page 134 – Dextrose

“Dosage” section – Hypoglycemia should read as follows:

Term neonates and infants < 6 months

Infants ≥ 6 months and children

September 2008

Page 92 – Ceftriaxone Sodium

“Dosage” section – Infants and Children

Mild to moderate infections: 50 – 75 mg/kg (up to 2 g/d) given once daily or divided q12h.

Severe infections (including meningitis): 80 – 100 mg/kg (up to 4 g/d) given once daily or divided q12h.

March 2008

Page 394 – Rocuronium Bromide

“Dosage” section, 8th line

Dosage for Infants should be 0.5 mg/kg

Page 402 – Sodium Chloride

“Brand Names” section

First line should read as follows:

0.45% saline (1/2 NS) = 77mEq/L

April 2007

Page 461 in Appendix C is a duplication of the previous page (p. 460). The correct version of page 461 can be found below.

Appendix C

Hydrochloric Acid	C	—	—		31	
Hydrocortisone sodium/phosphate/succinate	C	C	C		3,4,13	
Ifosfamide	C	C	C		3,4	
Imipenem-Cilastatin Sodium	C	C	C		3,4	
Immune Globulin	—/C	—	—	Only supportive of Gammagard® 2.5%; not recommended to infuse with other drugs or solutions	32	
Indomethacin sodium trihydrate	I	—	—			33
Insulin, regular human	C	C	C		3,4,13	
Iron dextran	C/I	—	I/C	For 2:1, found to be compatible in solution at amino acid concentrations of 2% or greater	34,35,36	35,37
Isoproterenol HCl	C	C	C	For 2:1, compatible with dextrose 25%/amino acids 4.25% (electrolytes were not added)	19,38	
Kanamycin sulfate	C	C	C		11,12,38,39	
Lidocaine HCl	C	C	C	For 2:1, compatible with dextrose 25%/amino acids 4.25% (electrolytes were not added)	19,38	
Linezolid	C	—	—	Compatible with dextrose 20%/amino acids 4.9%; electrolytes were not added	40	
Lorazepam	C	I	I	Partial emulsion disruption occurs in 1 h	3	4
Magnesium sulfate	C	C	C		3,4	
Mannitol	C	C	C		3,4	
Meperidine HCl	C	C	C		3,4,41	
Meropenem	—	C	C		4	
Methotrexate	I	C	C	For 2:1, hazy precipitate formed in 0 to 1 h	4	3
Methyldopate HCl	C	C/I	C/I	For 2:1, compatible with dextrose 25%/amino acids 4.25% (electrolytes were not added); cracked the lipid emulsion in select formulations	19,38	20
Methylprednisolone sodium succinate	C	C	C		3,4	
Metoclopramide HCl	I/C	C	C	Substantial loss of natural turbidity occurred immediately in select formulations	1,4	3
Metronidazole HCl	C	C	C		2,3,4,13	
Midazolam HCl	I/C	I	I	White precipitate forms immediately in select formulations	42	3,4,13
Milrinone lactate	C	—	—		43,44	
Morphine sulfate	C	C/I	C/I	For 3:1, morphine 1 mg/mL compatible, but 15 mg/mL was not compatible; emulsion disruption occurs immediately in select formulations	3,4,13,41	4