

Section S: Blood Product Overview – 25% ALBUMIN

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ALERT: There have been numerous reports of the stopper falling into the albumin vial when attempting to spike. The manufacturer (Talecris) is aware of the problem, and we are continuing to report all occurrences to Talecris. Their only recommendation is to ensure that **the spike is pushed through the centre of the stopper at a 90° angle** (perpendicular to the plane of the stopper).

DESCRIPTION of PRODUCT

- Made from pooled human plasma using the Cohn cold ethanol fractionation process.
- Viral inactivation steps include cold ethanol fractionation and heat inactivation.
- 25% sterile solution of albumin contains an approximate sodium content of 145mEq/L.
- 25% albumin is stored and issued in a glass bottle.
- Latex-free albumin is available, but some specific sizes may contain traces of latex from the stopper on the bottle. If not clearly indicated on the packaging that it is latex-free and latex-free products are required, please contact the BTL.

AVAILABILITY of PRODUCT

- All LHSC/SJHC sites have 25% albumin in stock in 100mL sizes.
- Pediatric sites also stock 25% albumin in 50mL sizes.
- 25% albumin is supplied by the CBS, manufactured by either Talecris (Plasbumin[®]25 / Albumin 25%) or CSL Behring (Alburex[®]25)

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STORAGE of PRODUCT

- Store at Room Temperature NOT exceeding 30°C.
- Do NOT freeze.
- Expiry date is indicated on the vial.

CLINICAL INDICATIONS (see package insert for CONTRAINDICATIONS)

- Burn therapy: shock, protein replacement, volume replacement.
- Hypoproteinemia: protein replacement.
- Acute liver failure: bind bilirubin, protein replacement.
- Adult respiratory distress syndrome: correct edema.
- Cardiopulmonary bypass: volume replacement.
- Hemolytic disease of the newborn: bind bilirubin.
- Acute nephritis: correct edema.
- Renal dialysis: shock treatment.

REQUESTS for 25% ALBUMIN

- Issued as requested. No BTL specimen required.

ADMINISTRATION of PRODUCT

- 25% albumin is supplied in glass bottles. Vented infusion sets (HMMS #38680) are required, but the albumin does not need to be filtered.
- 25% albumin is oncologically equivalent to 5 times the volume of plasma; 100mL will draw approximately 350mL of fluid from the extravascular spaces within 15 minutes of administration thus increasing the total blood volume.
- Patient should be monitored for circulatory overload.
- Rate should be specified by ordering physician, but should not exceed 2mL/minute.
- Once a vial is entered, the contents must be infused within 4 hours.
- 25% albumin may be administered either undiluted or diluted in 0.9% Sodium Chloride or 5% Dextrose in Water. If sodium restriction is required, 25% albumin should only be administered in a sodium-free carbohydrate solution such as 5% Dextrose in Water.

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ADDITIONAL COMMENTS

- **CAUTION:** Administering 25% albumin in error, instead of 5% albumin, could result in circulatory overload

LINK to WEBSITE for PRESCRIBING INFORMATION

Talecris product insert: <http://www.talecris-pi.info/inserts/Plasbumin25.pdf>

CSL Behring product monograph:

http://www.cslobehring.ca/docs/306/360/Alburex_PM_app10feb10_CN131096%20and%20131099.pdf