

Filtration of Medications

This document is to be used as a supplemental guide in addition to [Medication Management Policy 30.15 Filtration of Medications](#) to support medication administration during the supply constraints of BBraun IV tubing for large volume Infusomat pumps.

- No chemotherapy agents are included in this document. **All chemotherapy agents should follow administration guidance found in chemotherapy protocol(s) and/or on chemotherapy orders.** Consult clinical pharmacist for further information for all chemotherapy administration if unclear.
- All intravenous solutions (including commercial and IWK Pharmacy prepared solutions) may be administered using IV sets containing an in-line filter if no other option is available.
- The following lists are **not comprehensive** and should not replace clinical judgement or usual practices. If unclear, please consult one or more references available on PULSE (i.e [Dynamic Health](#) – see pg 4 & 5 of this document) , [IWK Parenteral Manual](#) or any of the parenteral references available on the [IWK Drug Information page](#) for further clarification.
- *During this period of supply constraint, if the reference does not specify any filtering information such as DO NOT FILTER or administer via in-line filter, the medication *may be* administered using an IV set containing an in-line filter if no other option is available.
- Refer to [Policy 625 “Administration of Blood Component and Plasma Protein Products”](#)

Medications that **SHOULD NOT** be administered using a filter

- Carfilzomib
- Cyclosporine
- Dextrose 25% ANTIDOTE
- Digoxin
- Insulin REG
- Nitroglycerin
- Propofol
- Rasburicase

*******Please note this list is NOT comprehensive*******

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Filtration of Medications

Medications that REQUIRE administration using a 0.22 micron filter:

- Abatacept *
- Abciximab
- Agalsidase Alfa
- Amiodarone
- Anifrolumab
- Anti-thymocyte Globulin (both Equine & Rabbit)
- Cetuximab
- Cytomegalovirus immune globulin, human
- Dextran 40
- Elosulfase Alfa
- Epoprostenol
- galsulfase
- Ibritumomab Tiuxetan
- Imiglucerase
- Infliximab *
- Ipilimumab *
- Laronidase
- Mannitol
- Panitumumab
- Parenteral nutrition (TPN)
- Phenobarbital (diluted solution only)
- Phenytoin DILUTED
- Potassium Phosphate
- Sodium Phosphate
- Sotrovimab
- Ustekinumab

* May be administered using a 1.2 micron filter as well

Medications that REQUIRE administration using a 1.2 micron filter:

- Abatacept **
- Amphotericin B Conventional (Fungizone) **
- Amphotericin B Liposomal (AmBisome) **
- Lipid emulsion

** May be administered using a 0.22 micron filter as well

*******Please note this list is NOT comprehensive*******

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Filtration of Medications

*Medications that may be administered using a 0.22 micron filter during shortage of IV sets without in-line filter

Note: *During this period of supply constraint, if the reference does not specify any filtering information such as *DO NOT FILTER* or *administer via in-line filter*, the medication **may be** administered using an IV set containing an in-line filter if no other option is available.

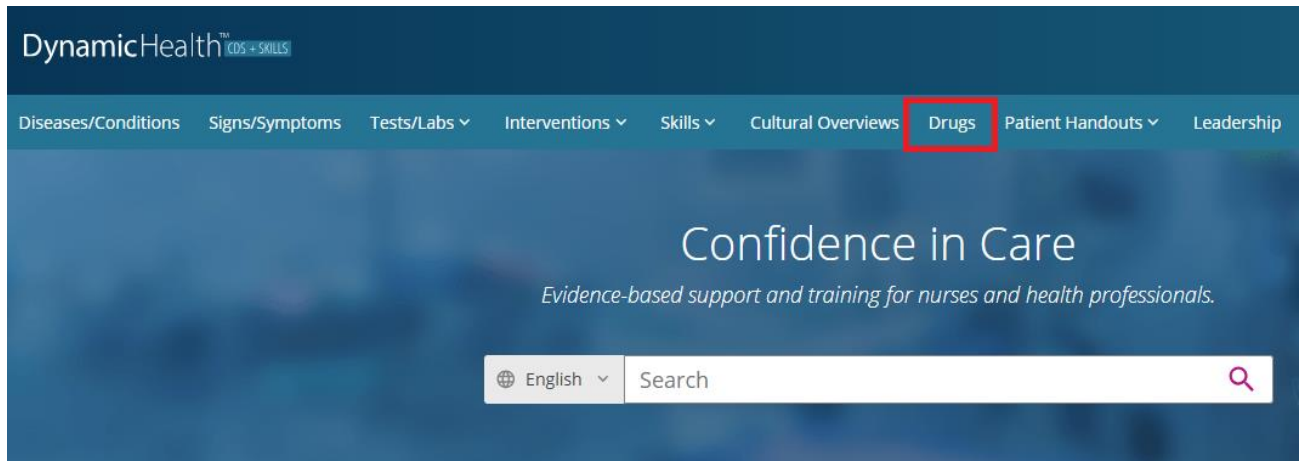
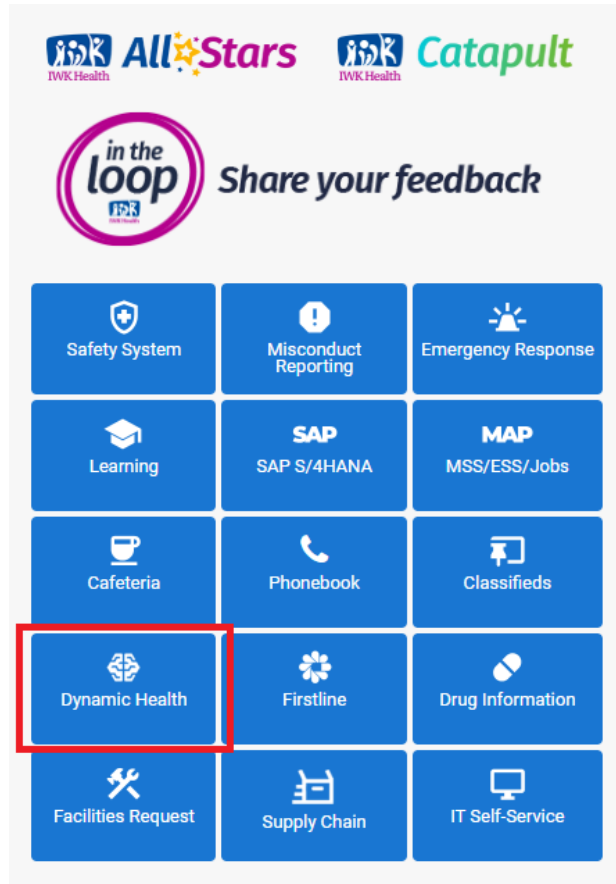
- Ampicillin
- Azithromycin
- Cefazolin
- Clindamycin
- Dobutamine
- Fentanyl
- Fluconazole
- Ferric Derisomaltose (Monoferic*)
- Furosemide
- Gentamicin
- Heparin
- Iron Sucrose
- Ixebepilone *
- Magnesium Sulphate
- Metoclopramide
- Metronidazole
- Morphine
- Norepinephrine
- Oxytocin
- Penicillin G
- Phenytoin **UNDILUTED**
- Tranexamic Acid
- Tobramycin
- Vancomycin

* May be administered using a 1.2 micron filter as well

*******Please note this list is NOT comprehensive*******

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Filteration of Medications



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Filteration of Medications



amiodarone > Implementation

Route/Dosage
Availability (generic available)
Indications
Contraindications/Precautions
Adverse Reactions/Side Effects
Interactions
Assessment
Implementation
Patient/Family Teaching
Evaluation/Desired Outcomes
Action
Pharmacokinetics
Time/Action Profile

Implementation

- **High Alert:** IV vasoactive medications are inherently dangerous; fatalities have occurred from medication errors involving amiodarone. Before administering, have second practitioner check original order, dose calculations, and infusion pump settings. Patients should be hospitalized and monitored closely during IV therapy and initiation of oral therapy. IV therapy should be administered only by clinicians experienced in treating life-threatening arrhythmias.
- Do not confuse amiodarone with amantadine.
- **PO:** May be administered with meals and in divided doses if GI intolerance occurs or if daily dose ≥ 1000 mg.
- **IV Administration**
- **IV:** Administer via volumetric pump; drop size may be ↓, causing altered dosing with drop counter infusion sets.
- **Administer through an in-line filter.**
- Infusions exceeding 2 hr must be administered in glass or polyolefin bottles to prevent adsorption. However, polyvinyl chloride (PVC) tubing must be used during administration because concentrations and infusion rate recommendations have been based on PVC tubing.

*****Please note this list is NOT comprehensive*****

August 1, 2025