FRESENIUS KABI
caring for life

Kabiven®
(Amino Acids, Electrolytes, Dextrose, and Lipid Injectable Emulsion), for intravenous use

Perikabiven®
(Amino Acids, Electrolytes, Dextrose, and Lipid Injectable Emulsion), for intravenous use

Kabiven® and Perikabiven®

Composition Chart*

Kabiven (central PN)					Perikabiven (peripheral or central PN)	
Volume (mL)	1026	1540	2053	2566	1440	1920
Amino Acids (g)	34	51	68	85	34	45
Nitrogen (g)	5.4	8.2	10.9	13.6	5.4	7.2
Dextrose (g)	110	165	220	275	107	143
Lipids (g)	40	60	80	100	51	68
Total kcal	910	1365	1820	2275	1010	1346
Electrolytes†						
Sodium (mEq)	32	48	64	80	32	42
Potassium (mEq)	24	35	47	59	24	33
Magnesium (mEq)	8	12	16	20	8	11
Acetate (mEq)	39	59	78	98	39	52
Chloride (mEq)	46	69	92	115	46	61
Sulfate (mEq)	8	12	16	20	8	11
Calcium (mEq)	4	6	8	10	4	5
Phosphorus (mmol)	10	15	20	25	11	14
Osmolarity (mOsm/L)	1060	1060	1060	1060	750	750

*Calculations in this table are per bag and differ from Table 2 in the Kabiven/Perikabiven Prescribing Information that are calculated per 1000 mL or 100 mL.
†Provided as: sodium acetate, potassium chloride, sodium glycero-phosphate, magnesium sulfate, and calcium chloride.

Please see Indications and Important Safety Information on the next page.

INDICATIONS AND USAGE

KABIVEN and PERIKABIVEN are each indicated as a source of calories, protein, electrolytes and essential fatty acids for adult patients requiring parenteral nutrition when oral or enteral nutrition is not possible, insufficient, or contraindicated. KABIVEN and PERIKABIVEN may be used to prevent essential fatty acid deficiency or treat negative nitrogen balance in adult patients.

Limitations of Use

Neither KABIVEN nor PERIKABIVEN is recommended for use in pediatric patients <2 years including preterm infants because the fixed content of the formulation does not meet nutritional requirements in this age group.

IMPORTANT SAFETY INFORMATION

KABIVEN is indicated for intravenous infusion into a **central vein.** PERIKABIVEN is indicated for intravenous infusion into a **peripheral or central vein**. It is recommended to mix the contents thoroughly by inverting the bags upside down to ensure a homogenous admixture. Ensure the vertical seals between chambers are broken and the contents of all three chambers for KABIVEN and PERIKABIVEN are mixed together prior to infusion. The dosage of KABIVEN and PERIKABIVEN should be individualized based on the patient's clinical condition (ability to adequately metabolize amino acids, dextrose and lipids), body weight and nutritional/fluid requirements, as well as additional energy given orally/enterally to the patient. Prior to administration of KABIVEN and PERIKABIVEN, correct severe fluid, electrolyte and acid-base disorders. Before starting the infusion, obtain serum triglyceride levels to establish the baseline value. Do not exceed the recommended maximum infusion rate of 2.6 mL/kg/hour for KABIVEN and 3.7 mL/kg/hour for PERIKABIVEN.

KABIVEN and PERIKABIVEN are contraindicated in:

- Concomitant treatment with ceftriaxone in neonates (28 days of age or younger)
- Known hypersensitivity to egg, soybean, peanut, or any of the active or inactive ingredients.
- Severe disorders of lipid metabolism characterized by hypertriglyceridemia (with serum triglyceride concentration >1,000 g/dL).
- Inborn errors of amino acid metabolism.
- Cardiopulmonary instability
- Hemophagocytic syndrome

Clinical Decompensation with Rapid Infusion of Lipid Injectable Emulsions in Neonates and Infants: Acute respiratory distress, metabolic acidosis, and death after rapid infusion of intravenous lipid emulsions have been reported.

Parenteral Nutrition-Associated Liver Disease: Increased risk in patients who receive parenteral nutrition for greater than 2 weeks. Monitor liver tests; if abnormalities occur, consider discontinuation or dosage reduction.

Pulmonary Embolism and Respiratory Distress due to Pulmonary Vascular Precipitates: If signs of pulmonary distress occur, stop the infusion and initiate a medical evaluation.

Hypersensitivity reactions: Monitor for signs or symptoms and discontinue infusion if reactions occur.

Precipitation with Ceftriaxone: Do not administer ceftriaxone simultaneously with KABIVEN or PERIKABIVEN via a Y-site.

Infection, fat overload, hyperglycemia and refeeding complications: Monitor for signs and symptoms; monitor laboratory parameters.

The most common adverse reactions for KABIVEN (≥3%) are nausea, pyrexia, hypertension, vomiting, decreased hemoglobin, decreased total protein, hypokalemia, decreased potassium, and increased gamma glutamyltransferase. The most common adverse reactions for PERIKABIVEN (≥3%) are hyperglycemia, hypokalemia, pyrexia, and increased blood triglycerides.

To report SUSPECTED ADVERSE REACTIONS, contact Fresenius Kabi USA, LLC at 1-800-551-7176, option 5, or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Coumarin and coumarin derivatives, including warfarin: Anticoagulant activity may be counteracted; monitor laboratory parameters

This Important Safety Information does not include all the information needed to use KABIVEN and PERIKABIVEN safely and effectively. Please see full prescribing information for KABIVEN at www.FreseniusKabiNutrition.com/KabivenPI and PERIKABIVEN (amino acids, electrolytes, dextrose and lipid injectable emulsion), for intravenous use at www.FreseniusKabiNutrition.com/PerikabivenPI

To order: **1-888-386-1300**
Medical Information phone: **1-800-551-7176** (option 4)

www.FreseniusKabiNutrition.com/products/kabiven-perikabiven

Medical Information email: **Nutrition.MedInfo.USA@fresenius-kabi.com**
Information on coding and billing: **www.kabicare.us**

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