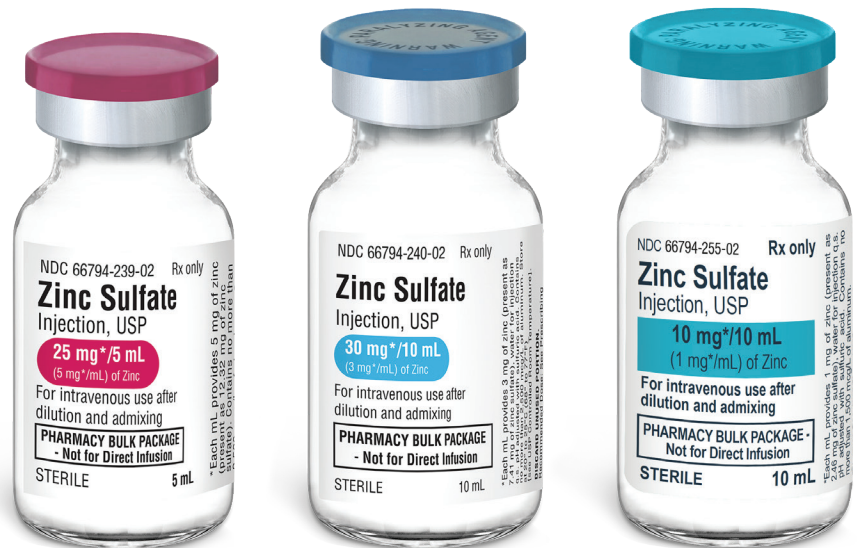


Piramal Critical Care is a world leader in inhaled anesthetics, intrathecal therapy, and generic injectables, with a strong presence in more than 100 countries.

Backed by 25 years of quality, dependability, and growth, we are proud to offer a comprehensive U.S. product portfolio and bring you high-quality critical care drugs at affordable prices.

Zinc Sulfate for Injection, USP

For Intravenous Infusion Only



Available through the wholesaler or distributor of your choice:

WHOLESALER/ DISTRIBUTOR	25 Multi-Dose Vials in a carton: NDC 66794-239-42 Zinc Sulfate Injection, USP 25 mg/5 mL (5 mg/mL) Catalog Numbers	25 Multi-Dose Vials in a carton: NDC 66794-240-42 Zinc Sulfate Injection, USP 30 mg/10 mL (3 mg/mL) Catalog Numbers	25 Multi-Dose Vials in a carton: NDC 66794-255-02 Zinc Sulfate Injection, USP 10 mg/10 mL (1 mg/mL) Catalog Numbers
AmerisourceBergen	023942	024042	10285130
Cardinal	5794052	5794060	5884879
McKesson	2626034	2626059	2881803
Morris & Dickson	228338	228395	329565

ABBREVIATED PRESCRIBING INFORMATION

PRODUCT NAME AND COMPOSITION:

Zinc Sulfate for Injection, an injectable solution.

Please refer to the Full Prescribing Information (FPI) before prescribing.

INDICATIONS:

Zinc Sulfate is a trace element indicated in adult and pediatric patients as a source of zinc for parenteral nutrition when oral or enteral nutrition is not possible, insufficient, or contraindicated.

DOSAGE AND ADMINISTRATION:

Important Administration Information Zinc Sulfate Injection is not for direct intravenous infusion. Prior to administration, Zinc Sulfate Injection must be transferred to a separate parenteral nutrition container, diluted, and used as an admixture in parenteral nutrition solutions.

See FPI for full details.

Zinc Sulfate Injection provides 3 mg/mL or 5 mg/mL of zinc. Zinc Sulfate Injection in a concentration of 1 mg/mL is recommended for use in pediatric patients, particularly those weighing less than 12 kg.

The dosage of Zinc Sulfate Injection should be individualized based on the patient's clinical condition, nutritional requirements, and the contribution of oral or enteral zinc intake.

Adults: The recommended adult dosage is 3 mg/day for metabolically stable patients, with potential need for higher daily dosage in monitored patients with small bowel fluid loss or excess stool or ileostomy output.

Pediatrics: The recommended dosage in pediatric patients is shown by age and estimated weight. Doses are general recommendations intended for most pediatric patients. However, based on clinical requirements, some patients may require a higher dosage.

Population	Estimated Weight for Age	Recommended Daily Dosage
Pediatric Patients	10 kg and above	50 mcg/kg (up to 3 mg/day)
	5 kg to less than 10 kg	100 mcg/kg
Term Neonates	3 kg to less than 5 kg	250 mcg/kg ¹
Preterm Neonates	Less than 3 kg	400 mcg/kg

1. Term neonates have higher requirements in the first 3 months of life.

Monitor zinc concentrations and signs and symptoms of zinc deficiency, especially in pediatric patients, during treatment. Zinc concentrations may vary depending on the assay used and the laboratory reference range. The collections, processing, and storage of the blood samples for zinc analysis should be performed according to the laboratory's sample requirements. Zinc concentrations in hemolyzed samples are falsely elevated due to release of zinc from erythrocytes. The lower end of the reported range in healthy adults in serum is 60 mcg/dL.

See FPI for full details.

CONTRAINDICATIONS:

Known hypersensitivity to zinc.

WARNINGS AND PRECAUTIONS:

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

Vein Damage and Thrombosis: Solutions with osmolarity of 900mOsm/L or more must be infused through a central catheter.

Aluminum Toxicity: Increase risk in patients with renal impairment, including preterm infants.

Monitoring and Laboratory Tests: Monitor fluid and electrolyte status, serum osmolarity, blood glucose, liver and kidney function, blood count, and coagulation parameters throughout treatment.

Copper Deficiency: If signs and symptoms develop, interrupt treatment with Zinc Sulfate Injection and check zinc, copper, and ceruloplasmin levels.

Hypersensitivity Reactions: If reactions occur, discontinue Zinc Sulfate Injection and initiate appropriate medical treatment.

See FPI for full details.

ADVERSE REACTIONS:

No zinc-related adverse reactions in patients receiving parenteral nutrition solutions containing zinc within the recommended dosage range have been reported.

See FPI for full details.

OVERDOSAGE:

Symptoms of zinc overdosage may include hyperamylasemia, thrombocytopenia, anemia, vomiting, and diarrhea. There is no known antidote for acute zinc toxicity. Management of zinc overdosage is supportive care based on presenting signs and symptoms.

See FPI for full details.

HOW SUPPLIED/STORAGE AND HANDLING

• 30 mg/10 mL (3 mg/mL) of zinc in a 10 mL vial. (Each mL contains 3 mg of zinc present as 7.41 mg of zinc sulfate and WFI.)

• 25 mg/5 mL (5 mg/mL) of zinc in a 5 mL vial. (Each mL contains 5 mg of zinc present as 12.32 mg of zinc sulfate and WFI.)

• 10 mg/10 mL (1 mg/mL) of zinc in a 10 mL Pharmacy Bulk Package vial. Cartons of 25 vials. Vial closure is not made with natural rubber latex.

Store at 20°C to 25°C (68°F to 77°F), excursions permitted to 15° to 30°C (59° to 86°F). For storage of admixed solution see FPI for full details.

See USP Controlled Room Temperature.

See FPI for full details.

To report **SUSPECTED ADVERSE REACTIONS**, contact Piramal Critical Care at 1-888-822-8431 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.



- Full prescribing information of Zinc Sulfate Injection, USP 25 mg and 30 mg can be seen at: <https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=dfa8a859-c285-17a3-e053-2a95a90a9343>
- Full prescribing information of Zinc Sulfate Injection, USP 10 mg can be seen at: <https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=0b6078d9-624c-e162-e063-6394a90a147d>
- Adverse events should be reported to Piramal Critical Care at <http://pcc-chex.force.com/SiteComplaintForm>.
- You are encouraged to report adverse events of prescription drugs to the FDA. Visit MedWatch or call 1-800-FDA-1088.



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MKT-ZS-0002 Oct 2024