

## **IV Acetylcysteine (NAC) Protocol FAQ**

### **Why has the IV NAC protocol been updated?**

This protocol reflects current toxicology consensus guidelines and aligns practice across Canadian poison centres to support consistent, safe patient care.

### **Is there a maximum infusion rate?**

Yes. NAC dosing is weight-based, with a maximum calculation weight of **100 kg** for patients > 100 kg (maximum loading dose of 15000 mg over 1 hour, and a maximum maintenance rate of 1500 mg/hr).

### **Our IV admixture preparation differs from OPC guidance: is this acceptable?**

Yes. Follow your institutional preparation guidance for a 3% admixture solution where available.

### **Can NAC be stopped after 12 hours?**

Maybe- but every case is different. Patients can be assessed against “Stopping Criteria” after receiving a minimum of 12 hours of NAC (including the loading dose). If criteria are not met, continue the maintenance infusion. Stopping Criteria should be reassessed every 12 hours.

### **Are dosing or management recommendations different for pediatric patients?**

No. Standardized weight-based dosing applies to all patients. Management decisions are based on clinical presentation, laboratory findings, and patient history, not age.

### **Is NACs dosing different for “high-risk” patients, or for patients on dialysis?**

No. The standard dosing applies (150 mg/kg loading dose, then 15 mg/kg/hr maintenance infusion).

### **What are the signs & symptoms of NAC toxicity?**

NB: This refers to NAC toxicity, NOT acetaminophen toxicity.

Clinical presentations can vary. Signs and symptoms can include persistent nausea and vomiting, agitation, hemolytic uremic syndrome, cerebra edema, and seizures. Severe toxicity is rare and associated with very large overdoses of NAC (>770 – 900 mg/kg) over a short period of time.

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