



MorphineSulfate Injection, USP

2 mg per mL and 4 mg per mL Simplist® ready-to-administer prefilled syringes available from Fresenius Kabi

Manufacturer prepared

36-month shelf life

Preservative free

MicroVault® tamper-evident packaging

Morphine Sulfate Injection, USP IMPORTANT SAFETY INFORMATION:

WARNING: ADDICTION, ABUSE, AND MISUSE; LIFE-THREATENING RESPIRATORY DEPRESSION; NEONATAL OPIOID WITHDRAWAL SYNDROME; and RISKS FROM CONCOMITANT USE WITH BENZODIAZEPINES OR OTHER CNS DEPRESSANTS

Addiction, Abuse, and Misuse

Morphine Sulfate Injection exposes patients and other users to the risks of opioid addiction, abuse, and misuse, which can lead to overdose and death. Assess each patient's risk prior to prescribing Morphine Sulfate Injection, and monitor all patients regularly for the development of these behaviors and conditions.

Life-Threatening Respiratory Depression
Serious, life-threatening, or fatal respiratory
depression may occur with use of Morphine Sulfate
Injection. Monitor for respiratory depression,
especially during initiation of Morphine Sulfate
Injection, or following a dose increase. Because of
delay in maximum CNS effect with intravenously
administered morphine (30 min), rapid IV
administration may result in overdosing.

Neonatal Opioid Withdrawal Syndrome
Prolonged use of Morphine Sulfate Injection during
pregnancy can result in neonatal opioid withdrawal
syndrome, which may be life-threatening if not
recognized and treated, and requires management
according to protocols developed by neonatology
experts. If opioid use is required for a prolonged period
in a pregnant woman, advise the patient of the risk of
neonatal opioid withdrawal syndrome and ensure that
appropriate treatment will be available.

Risks from Concomitant Use with Benzodiazepines or Other CNS Depressants

Concomitant use of opioids with benzodiazepines or other central nervous system (CNS) depressants, including alcohol, may result in profound sedation, respiratory depression, coma, and death.

- Reserve concomitant prescribing of Morphine Sulfate Injection and benzodiazepines or other CNS depressants for use in patients for whom alternative treatment options are inadequate.
- · Limit dosages and durations to the minimum required.
- Follow patients for signs and symptoms of respiratory depression and sedation.

INDICATIONS AND USAGE

Morphine Sulfate Injection is an opioid agonist indicated for the management of pain severe enough to require an opioid analgesic and for which alternative treatments are inadequate.

Use the lowest effective dosage for the shortest duration consistent with individual patient treatment goals. Individualize dosing based on the severity of pain, patient response, prior analgesic experience, and risk factors for addiction, abuse, and misuse. Do not stop Morphine Sulfate Injection abruptly in a physically dependent patient.

<u>Limitations of Use:</u> Because of the risks of addiction, abuse, and misuse with opioids, even at recommended doses, reserve Morphine Sulfate Injection for use in patients for whom alternative treatment options [e.g., non-opioid analgesics or opioid combination products]:

· Have not been tolerated, or are not expected to be

tolerated.

 Have not provided adequate analgesia, or are not expected to provide adequate analgesia.

Morphine Sulfate Injection is contraindicated in patients with:

- · Significant respiratory depression.
- Acute or severe bronchial asthma in an unmonitored setting or in the absence of resuscitative equipment.
- Concurrent use of monoamine oxidase inhibitors (MAOIs) or use of MAOIs within the last 14 days.
- Known or suspected gastrointestinal obstruction, including paralytic ileus.
- $\cdot \ {\sf Hypersensitivity} \ to \ {\sf morphine}.$

Warnings and Precautions

<u>Cardiovascular Instability:</u> High doses are excitatory. Have Naloxone Injection and resuscitative equipment immediately available.

Life-Threatening Respiratory Depression in Patients with Chronic Pulmonary Disease or in Elderly, Cachectic, or Debilitated Patients: Monitor closely, particularly during initiation and titration.

Adrenal Insufficiency: If diagnosed, treat with physiologic replacement of corticosteroids, and wean patient off of the opioid.

<u>Severe Hypotension</u>: Monitor during dosage initiation and titration. Avoid use of Morphine Sulfate Injection in patients with circulatory shock.

Risks of Use in Patients with Increased Intracranial Pressure, Brain Tumors, Head Injury, or Impaired Consciousness: Monitor for sedation and respiratory depression. Avoid use of Morphine Sulfate Injection in patients with impaired consciousness or coma.

Adverse Reactions

The most serious adverse reactions encountered are respiratory depression, apnea, circulatory depression, respiratory arrest, shock and cardiac arrest. Common frequently observed adverse reactions include: sedation, lightheadedness, dizziness, nausea, vomiting, constipation and diaphoresis.

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

<u>Serotonergic Drugs:</u> Concomitant use may result in serotonin syndrome. Discontinue Morphine Sulfate Injection if serotonin syndrome is suspected.

Mixed Agonist/Antagonist and Partial Agonist Opioid Analgesics: Avoid use with Morphine Sulfate Injection because they may reduce analgesic effect of Morphine Sulfate Injection or precipitate withdrawal symptoms.

Pregnancy: May cause fetal harm.

Overdosage: Acute overdose with Morphine Sulfate Injection can be manifested by respiratory depression, somnolence progressing to stupor or coma, skeletal muscle flaccidity, cold and clammy skin, constricted pupils, and, in some cases, pulmonary edema, bradycardia, hypotension, partial or complete airway obstruction, snoring, and death. Marked mydriasis rather than miosis may be seen with hypoxia in overdose.

This important safety information does not include all the information needed to use Morphine Sulfate Injection, USP safely and effectively. Please see full prescribing information, including BOXED WARNING, for Morphine Sulfate Injection, USP at www.simplist-us.com.

MorphineSulfate Injection, USP

	Morphine 2	Morphine 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Strength	2 mg per mL	4 mg per mL
Concentration	2 mg per mL	4 mg per mL
Fill volume	1 mL	1 mL
Unit of sale NDC	76045-004-11	76045-005-11
Unit of sale bar code	N(01)30376045004114	N(01)30376045005111
Pack size	10 per Carton (Bundles of 5)	10 per Carton (Bundles of 5)
MicroVault* dimensions	3.625" x .75"	3.625" x .75"
Carton dimensions	3.125" x 2.625" x 4.375"	3.125" x 2.625" x 4.375"
Wholesale numbers		
Cardinal	5642756	5642764
Cencora	10235130	10235113
McKesson	1531185	1531169
Morris & Dickson	901561	901587

To place an order, contact your Sales Representative or call Customer Service at 1.888.386.1300 | www.simplist-us.com

