

Guide to the online Wellington ICU Drug Manual



Introduction

The Wellington ICU drug manual is an online resource first published in January 2021. The original drug manual was compiled in 2011 as a series of monographs, intended to provide a single validated source of medication information for the staff of Wellington ICU.

The main domain can be found at <https://drug.wellingtonicu.com>. The website contains a number of resources but primarily the search portal provides access to a number of drug monographs that are displayed in a standardised way. The monographs themselves are individual text files written in [markdown format](#). Each file can be read, edited & published through a Content Management System which is accessed from the drug manual [Admin](#) page. A monograph written in markdown format is a plain text file that contains simple code to indicate how specific parts of the document (headings, sub-headings, drugs doses etc.) are displayed on a web browser. The drug manual website reads this code and renders it in the appropriate format. This means that every monograph appears the same for consistency & familiarity.

The Editing Portal

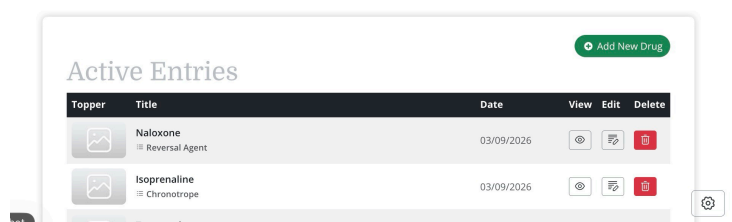
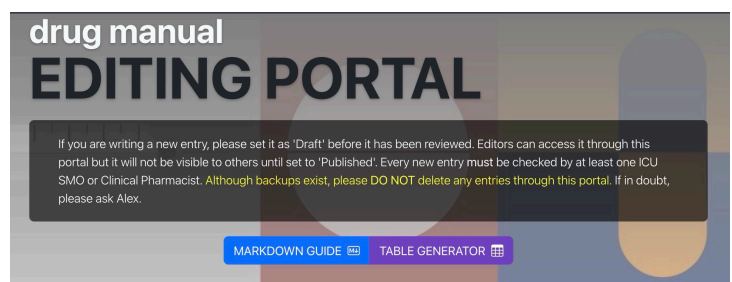
The Editing Portal can be accessed from the drug manual [Admin](#) page using the following login. Please do not share this password.



The portal allows editors to view, edit or delete existing entries, or create new ones. The delete icon will remove the entry from the server completely. **This is irreversible** and should only be used if you know exactly what you are doing.

Links to information on [writing in markdown format](#) and [how to generate tables](#) in markdown are provided at the top of the page as well as replicated here.

When writing a new entry, authors must use the standardised template and follow the style guide (see sections below). Rather than write entries directly in the editing portal, it is recommended that new monographs be written from a copy of the template in any document or text editor, then copied & pasted into the text field on the left side of the edit screen. Specialised markdown software (such as [Obsidian](#) or [Typora](#)) may be helpful when writing new entries as they are able to read the formatting code and show the style



changes in real-time as you type. If you are unsure about formatting, reading one of the pre-existing monographs alongside the template (below) may be helpful.

Creating A New Entry

Once you have written a drug monograph in markdown format, it can be added to the online drug manual by clicking on the green 'Add New Drug' button found in the Editing Portal. This will open a window in the browser that contains a number of empty fields & buttons. Before proceeding, set the '**Draft / Published**' switch to 'Draft'. This will ensure that anything you enter will not be visible on the website until it has been checked (and 'Published' can then be selected to make it go live). Draft versions of the document can be accessed any time from the Editing Portal.

The blank new entry screen is shown below:

Draft ☒ Published

COST

NZ\$

Drug name

B I

⌘

Content

TOPPER

Choose a file...

Alt Tag for your Topper

DATE & TIME

2026-09-20

10:01

EDITOR

Intials

CATEGORY

Category Name

TAGS

Tags (separate with corr

Attach files by drag and dropping or pasting from clipboard.

lines: 1 words: 0 0:0

Cancel Entry

Save Drug

Explanation of each field:

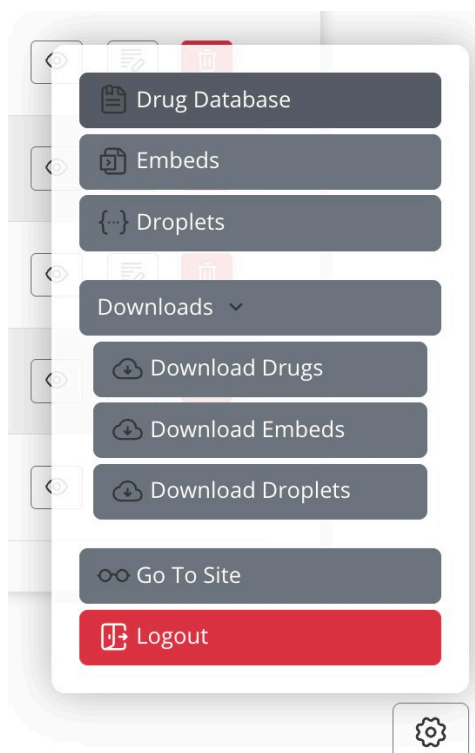
- **Cost:** this is the cost of each preparation in NZ\$. The preferred format is preparation then cost. Each preparation should be capitalised & separated by a comma
 - e.g. 'Vial \$23.15, Tablet \$0.05, Oral liquid bottle \$9.00'
- **Drug name:** this is the preferred name of the drug, with first letter capitalised
- **Icon bar:** this can be used to add styling & links to the text but is only useful if writing entries directly into the Content field
- **Content** (main two columns): the left column contains the markdown text; the right column shows this text with the style changes applied. Changes made in the left text will be reflected in real-time on the right
- **'Choose a file' & 'Alt Tag':** these fields are not currently in use. The graphic 'Topper' field allows an image to be added at the top of each drug entry and may be used in future iterations
- **Date & time:** these are automatically updated with the date & time the monograph was created. They can be amended for subsequent edits
- **Editor:** use the initials of the author(s) of the monograph. If more than one person has contributed, they should be separated by an ampersand i.e. 'AP & NO'
- **Category:** this should be selected from one of the pre-determined drug manual categories listed [here](#). This allows the drug monographs to be searched by their primary indication in ICU, or selected from the Category page. Please check spelling as misspelt words will appear as a separate category
- **'Tags':** this field is not currently in use so should be left blank
- **'Cancel Entry':** this button cancels the entry without creating a new monograph
- **'Save Drug':** this button saves the new monograph to the webserver. It will only appear online if the 'Draft / Published' switch is set to 'Published', otherwise it appears in the 'Draft' section of the Editing Portal

The **gear icon** at the bottom right of the portal can be used to download all drug monographs from the web server. This can be found under the **Downloads** button, then select **Download Drugs**. This will download a single zip archive file to the local drive entitled '*posts-backup.zip*'

Embeds & Droplets are not used in the current iteration of the drug manual so these buttons should be ignored.

The **Go To Site** button opens the Search page of the website.

After editing a monograph and saving any changes, please use the **Logout** button to leave the Editing Portal.



Wellington ICU Drug Manual Style Guide

The style guide, along with the monograph template, standardises the way information is provided across the manual. It is provided to ensure consistency, ease of reading, and compliance with international standards.

Dose Units & Abbreviations:

- **Grams:** Write as 'g'
- **Milligrams:** Write as 'mg'
- **Micrograms:** Write in full as 'micrograms'. Do not abbreviate as ' μ g', 'ug', 'mcg', or 'microg'
- **Nanograms:** Write in full as 'nanograms'. Do not abbreviate as 'ng'
- **Units:** Write in full as 'units'. Do not abbreviate as 'U' or 'IU'
- **Percentages:** If a solution strength is expressed as %, follow with the absolute amount
 - o e.g. lidocaine 1% (10 mg/mL)
- **Duration:** Follows international SI standard abbreviations
 - o **Hours:** Use 'h' instead of 'hr', 'hrs' or 'hs'
 - e.g. '8 h' and '25 mL/h'
 - o **Minutes:** Use 'min' instead of 'm' or 'mins'
 - o **Seconds:** Use 's' instead of 'sec' or 'secs'
 - o Always put a space between the number and unit
 - e.g. '5 min' instead of '5min'
- **Volume:** Use 'mL' and 'L' instead of 'ml' and 'l'
- **Concentration:** Express as dose per mL with space around dose but no space within compound units
 - o e.g. '5 mg/mL', '1 mg/mL', '50 micrograms/mL', '2 units/mL'
- **Weight based dosing:** Expressed as dose per kilogram with/without rate
 - o e.g. 'micrograms/kg', 'mg/kg', 'micrograms/kg/min', 'mg/kg/h'
- **Ranges:** Use hyphen with spaces before and after
 - o e.g. '5 - 10 mg', '2 - 4 mL'

Formatting Numbers & Decimals:

- **No trailing zeros:** Do not place a zero after a decimal point for whole numbers
 - o e.g. write '5 mg', not '5.0 mg'
- **Use leading zeros:** Always place a zero before a decimal point for amounts less than one
 - o e.g. '0.5 mL' instead of '.5 mL'
- **Keep space:** Always leave a space between the number and the unit
 - o e.g. '10 mg' instead of '10mg'
- **Dose as whole number:**
 - o e.g. '500 mg' instead of '0.5 g', '500 micrograms' instead of '0.5 mg'
- **Use commas** to separate groups of three digits for numbers $\geq 1,000$
 - o e.g. 2,750

Medication Frequencies & Routes:

- **Frequencies:** Write in full in plain English. Do not use Latin abbreviations such as 'BD', 'TDS', 'QID', 'PRN', 'mane', or 'nocte'. If stating duration between doses, do not use 'every x-hourly'
 - o e.g. once daily, twice daily, three times daily, four times daily, every 4 h, every 8 h, at night, as required

- **Routes:** Write administration routes in full. Do not abbreviate to 'SC' or 'IV'.

Approved list of terms are:

- o intravenous
- o oral
- o subcutaneous
- o intramuscular
- o inhaled
- o intrathecal
- o intranasal
- o rectal
- o topical

Fluids:

- Use 'glucose' instead of 'dextrose'
- Use 'sodium chloride' instead of 'normal saline'
- Write strength after the fluid name
 - o e.g. glucose 5%, sodium chloride 0.9%

Medicine names:

- Include salts and write them in full
 - o e.g. 'potassium chloride'. Do not abbreviate as 'potassium Cl'
- Use the '+' separator to combine two or more active ingredients with spaces between
 - o e.g. 'piperacillin + tazobactam' instead of 'piperacillin/tazobactam'

Wellington ICU Drug Manual Monograph Template

The following structure & style should be used. As previously described, this can be copied & pasted into any text editor or word processor for writing then copied & pasted into the 'Content' column on the left side of the Editing Portal page to create the monograph.

Drug Name

ADMINISTRATION ROUTES:

Intravenous

ALTERNATIVE NAMES:

Names

ICU INDICATIONS:

1. Indication 1
2. Indication 2

PRESENTATION AND ADMINISTRATION:

INTRAVENOUS:

Compatible with the following intravenous fluids:

Fluid 1, Fluid 2, Fluid 3

List of intravenous preparations available including name, strength, form (e.g. metoprolol 5 mg/5 mL vial)

Storage instructions

Reconstitution: (if applicable)

Stability once reconstituted at room temperature and/or refrigerated (if known)

Administration instructions in separate sections if medicine can be given in different ways, e.g.:

Intravenous injection: (NB: avoid terminology such as IV bolus or IV push)

Intravenous intermittent infusion:

Intravenous continuous infusion:

Specify whether central, peripheral or both can be used – in bold

Include further dilution requirements (if applicable), rates and durations of infusions in this section

Stability of final solution at room temperature and/or refrigerated (if known)

ORAL:

List of preparations available including name, strength, form (e.g., Sotalol 80 mg tablets)

Storage instructions

Any specific information like differing bioavailability based on brand etc.

DOSAGE:

INTRA VENOUS:

Explanatory note if required

Indications written in ****bold**** followed by colon

> dose with spaces & 'once daily'/'twice daily'

DOSAGE IN RENAL FAILURE AND RENAL REPLACEMENT THERAPY:

Dose in renal impairment

Table

Dose in renal replacement therapy

Table

DOSAGE IN HEPATIC IMPAIRMENT:

Text or Table

DOSAGE IN PAEDIATRICS:

INTRA VENOUS:

Explanatory note if required

> dose with spaces & 'once daily'/'twice daily'

Insert links to any relevant Starship Guidelines for further information

CLINICAL PHARMACOLOGY:

- Onset of Action: TIME
- Duration of Action: TIME
- Elimination: TIME

Text with paragraphs ending in full-stop.

Antibiotics have sensitive organisms listed in categories thus:

****Aerobes, Gram-Positive:****

- Microbe 1
- Microbe 2

****Aerobes, Gram-Negative:****

- Microbe 1
- Microbe 2

****Anaerobes, Gram-Positive:****

- Microbe 1
- Microbe 2

****Anaerobes, Gram-Negative:****

- Microbe 1
- Microbe 2

CONTRAINDICATIONS:

1. Contraindication 1
2. Contraindication 2

WARNINGS:

Text with paragraphs ending in full-stop.

If specific subcategories, they should be in **bold** with no following colon

PRECAUTIONS:

General:

Text

*(or can reference thus: See ****WARNINGS**** and ****CONTRAINDICATIONS****)*

Laboratory Tests:

Text

If no specific tests are required, use standardised wording: 'No laboratory tests are required in addition to routine ICU monitoring.'

Drug/Laboratory Test Interactions:

List of interactions.

If none, use standardised wording: 'None known'

IMPORTANT DRUG INTERACTIONS IN ICU:

Text

ADVERSE REACTIONS:

(Use the same terminology for body systems and the same order; Include an exhaustive list of adverse events)

General:

Text

Cardiovascular:

Text

Respiratory:

Text

Neurological:

Text

Gastrointestinal:

Text

Renal:

Text

Hepatic:

Text

Dermatological:

Text

Haematological:

Text

Musculoskeletal:

Text

Metabolic and Endocrine:

Text

Reproductive system and breast disorders:

Text

ADDITIONAL REFERENCES:

References, which are not included in the standard reference list for the manual

If no additional references, write: None
