

Standard Operating Procedure (SOP)

IV Curcumin Administration Protocol - 300mg in 500mL Saline

Purpose

Adjunct treatment for inflammation, cancer-related support, or neurodegenerative conditions using IV curcumin in a controlled clinical setting.

Materials Needed

- 300 mg cyclodextrin-encapsulated IV curcumin
- 500 mL bag of normal saline or lactated Ringer's
- 0.22 micron inline filter
- IV tubing and infusion pump
- Venous access supplies (angiocatheter, gloves, etc.)

Pre-Treatment Checklist

1. Obtain informed consent and review patient history
2. Screen for gallbladder issues, anticoagulant use, and drug interactions
3. Optional: test dose (10 mg in 100 mL over 30 minutes) for first-time patients

Preparation Steps

1. Draw 300 mg of curcumin into syringe under sterile conditions
2. Inject into 500 mL IV bag and mix
3. Prime IV line with solution and attach 0.22 micron filter

Infusion Protocol

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- Begin at 50 mL/hr for first 15 min, monitor patient
- If tolerated, increase to 100-150 mL/hr
- Total infusion time: do not exceed 2.5 hours
- Monitor for phlebitis or hypersensitivity reactions

Post-Infusion

- Monitor for 15-30 minutes post-treatment
- Advise hydration and document response

Frequency

- Standard: 1-2 times per week for 4-6 weeks
- Autoimmune/oncology: up to 3 times weekly depending on response

Clinical Notes

- Avoid rapid infusion to reduce risk of irritation
- Use a dedicated line, do not mix with other medications
- Rotate IV sites for safety

Optional Enhancements

- Consider IV glutathione or vitamin C on alternate days
- Maintain plasma levels with oral liposomal curcumin between infusions