

INTRODUCING

Glycophos®

(sodium glycerophosphate injection),
for intravenous use

**A new organic phosphate
option** for parenteral
nutrition (PN)



Glycophos brings sodium glycerophosphate injection to the Fresenius Kabi PN portfolio.



**The first and only
organic phosphate
additive available
in the US^{1,2}**



**Used globally since 1993
and approved in
48 countries²**



**As part of our *More
in America* commitment,
Glycophos is filled and
packaged in the US¹**

INDICATION

Glycophos is a phosphorus replacement product indicated as a source of phosphorus in adult and pediatric patients 12 years and older as part of PN when oral or enteral nutrition is not possible, insufficient, or contraindicated.

CONTRAINDICATIONS

Glycophos is contraindicated in patients with hyperphosphatemia, hypernatremia, hypercalcemia or hypocalcemia, eGFR less than 30 mL/min/1.73 m² and patients receiving dialysis treatment, history of a hypersensitivity reaction to sodium glycerophosphate or any of the inactive ingredients.

Why choose organic?

- Calcium phosphate precipitation is an important consideration in PN admixtures³⁻⁵
- Published literature describes organic phosphate compounds as one way to help reduce the risk of calcium phosphate precipitation³⁻⁵
- Glycophos contains sodium glycerophosphate, an organic phosphate source¹
- "...the phosphate component of sodium glycerophosphate is covalently bound to a glycerol backbone, which hinders the formation of a precipitate with divalent calcium ions"³



Evaluate all additions to the PN container for compatibility and stability of the resulting preparation.

IMPORTANT SAFETY INFORMATION

INDICATIONS AND USAGE

Glycophos is a phosphorus replacement product indicated as a source of phosphorus in adults and pediatric patients 12 years and older as part of parenteral nutrition (PN) when oral or enteral nutrition is not possible, insufficient, or contraindicated.

DOSAGE AND ADMINISTRATION

Glycophos is not for direct intravenous infusion. Glycophos must be diluted and used as a PN admixture.

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WARNINGS AND PRECAUTIONS

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

Hyperphosphatemia and Hypocalcemia: Monitor serum phosphorus and calcium concentrations during and following infusion.

Risk of Sodium Retention: Closely monitor patients with congestive heart failure, renal impairment, cirrhosis, and other conditions with risk for edema and/or sodium retention. Consider all sources of sodium, including concomitant use of sodium-retaining drugs, and adjust dose as needed.

Hypersensitivity Reactions: Monitor for signs or symptoms and discontinue infusion if reactions occur.

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

Hypomagnesemia: Reported in patients with hypercalcemia and diabetic ketoacidosis. Monitor serum magnesium concentrations during treatment.

Vein Damage and Thrombosis: Infuse concentrated or hyperosmolar solutions through a central catheter.

ADVERSE REACTIONS

Common adverse reactions include hyperphosphatemia, hypocalcemia, hypernatremia, and hypomagnesemia.

To report SUSPECTED ADVERSE REACTIONS, contact Fresenius Kabi USA, LLC at 1-800-551-7176, option 5, or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

This Important Safety Information does not include all the information needed to use Glycophos safely and effectively. Please see full prescribing information, for intravenous use at www.FreseniusKabiNutrition.com/GlycophosPI.



Glycophos.com



ORDERING INFORMATION

Product Number	344020	344100
Unit of Sale NDC 65219-	346-20 25-unit tray	348-10 20-unit tray
Description	20 mL single dose vial	100 mL pharmacy bulk package

Sources: 1. Glycophos Prescribing Information, Fresenius Kabi USA, LLC. 2026. 2. Data on file 6/1/26. 3. Boullata JI, Mirtallo JM, Sacks GS, et al. Parenteral nutrition compatibility and stability: A comprehensive review. *JPEN J Parenter Enteral Nutr.* 2022;46(2):273-299. 4. Boullata JI, Salman G, Mirtallo JM, et al. Parenteral nutrition compatibility and stability: Practical considerations. *Nutr Clin Pract.* 2024;39(5):1150-1163. 5. Allwood MC, Kearney MC. Compatibility and stability of additives in parenteral nutrition admixtures. *Nutrition.* 1998;14(9):697-706.