

CLASS: A

PROTOCOL(S) USED IN: Endotracheal Intubation RSI, Intraosseous Access & Infusion

PHARMACOLOGY AND ACTIONS:

- A. Depresses automaticity of Purkinje fibers thus increasing ventricular fibrillation threshold.
- B. Decreases conduction rate and force of contraction mainly at toxic levels.
- C. Single bolus effect disappears in 10-20 minutes due to redistribution in the body.
- D. Metabolic half-life is about 2 hours; toxicity develops with repeated doses.

INDICATIONS:

- A. Pre-paralytic for RSI
- B. Local anesthetic for IO placement.

CONTRAINDICATIONS:

- A. Supraventricular dysrhythmias
- B. Atrial fibrillation or flutter
- C. 2nd or 3rd degree heart blocks
- D. Hypotension

SIDE EFFECTS AND NOTES:

- A. Seizures, slurred speech, AMS

ADULT DOSING:

Preparalytic (RSI)

1-1.5 mg/kg IV/IO

IO insertion

0.5 mg/kg IO not to exceed 50 mg

PEDIATRIC DOSING:

Preparalytic (RSI)

1.5-2 mg/kg IV up to 6 years old

IO Insertion

Same as adult

V-tach/V-fib

1 mg/kg loading dose. Maintenance of 20-50 mcg/kg/min.