

**SOUTH PLAINS
EMERGENCY MEDICAL
SERVICE**

**SUPPLEMENT
2008-2009**

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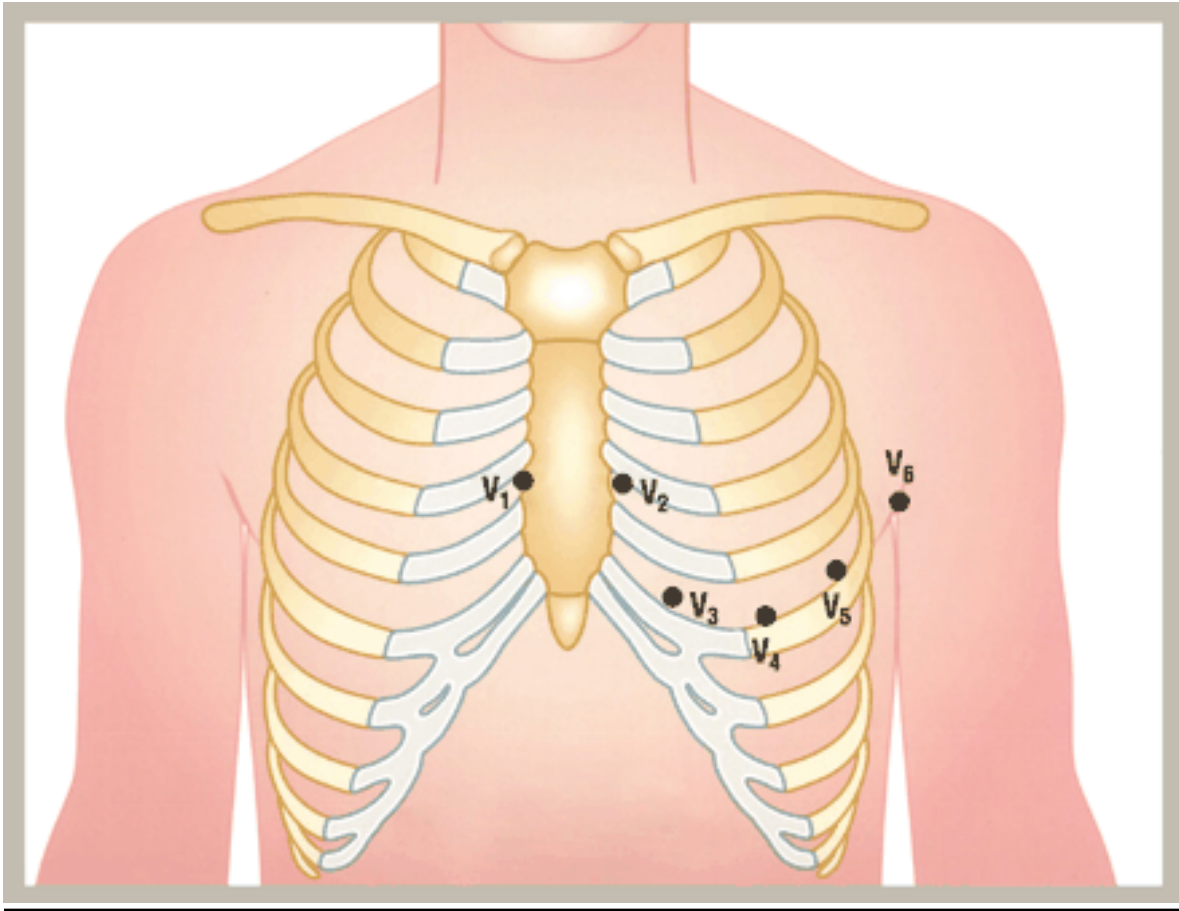
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SOUTH PLAINS EMERGENCY MEDICAL SERVICE

12 LEAD EKG PLACEMENT CHARTS



LEFT SIDED V-LEAD PLACEMENT



V₁: Right 4th intercostal space

V₂: Left 4th intercostal space

V₃: Halfway between V₂ and V₄

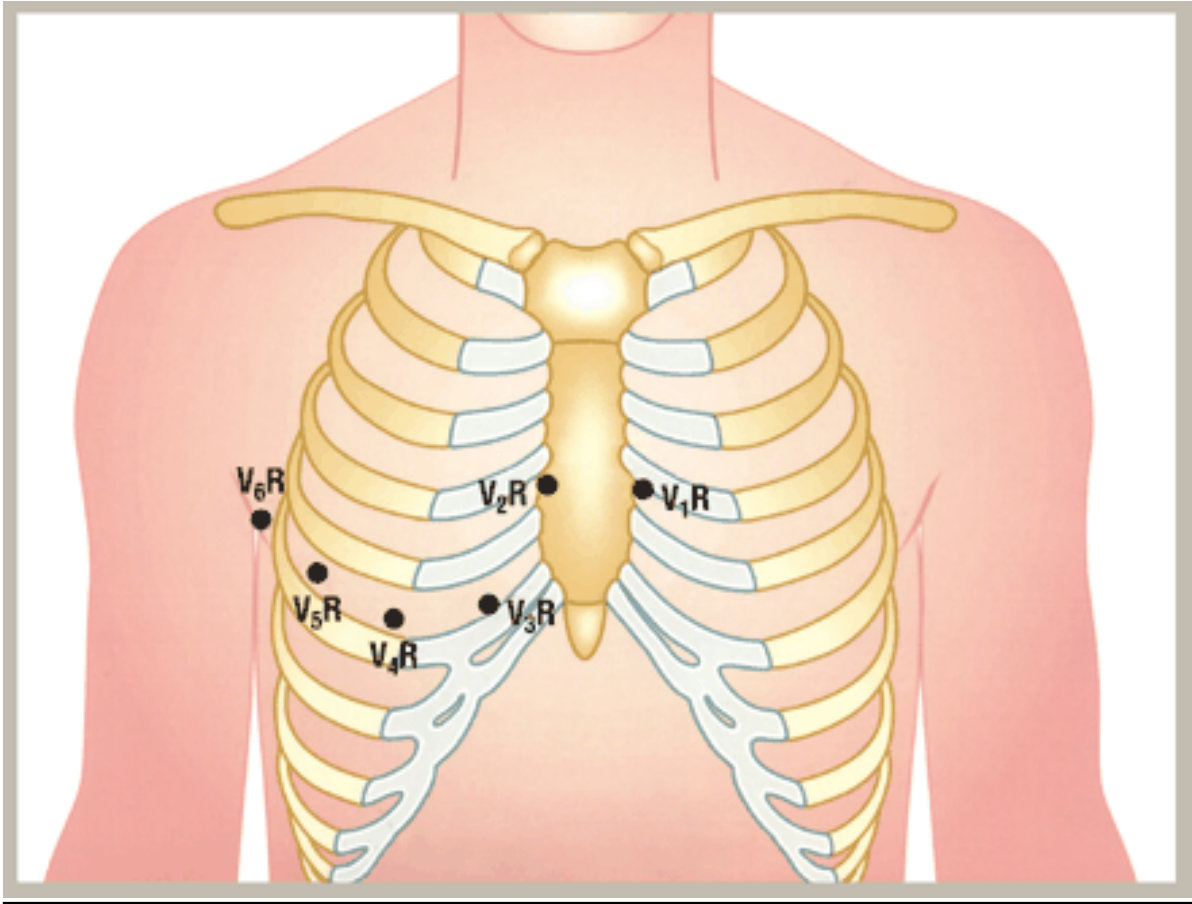
V₄: Left 5th intercostal space, mid-clavicular line

V₅: Horizontal to V₄, anterior axillary line

V₆: Horizontal to V₅, mid-axillary line

In an emergent situation and time does not permit a complete right sided EKG, move **V₄** to the **V_{4R}** position to confirm a right ventricular infarct.

RIGHT SIDED V-LEAD PLACEMENT



V₁R: Left 4th intercostal space

V₂R: Right 4th intercostal space

V₃R: Halfway between V₂ and V₄

V₄R: Right 5th intercostal space, mid-clavicular line

V₅R: Horizontal to V₄, anterior axillary line

V₆R: Horizontal to V₅, mid-axillary line

In an emergent situation and time does not permit a complete right sided EKG, move V₄ to the V₄R position to confirm a right ventricular infarct.

ASPIRIN

INDICATIONS	Myocardial Infarction, Chest Pain
ADMINISTRATION	Chewed PO
DOSAGE	
ADULT	1 Adult ASA 325mg
PEDIATRIC	Not Indicated
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Inhibits platelet aggregation by blocking formation of Thromboxane A₂ • Reduces overall mortality of Acute MI • Reduces non-fatal re-infarction
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Hypersensitivity to Aspirin • Active bleeding condition or ulcer • Pregnancy
SIDE EFFECTS	<ul style="list-style-type: none"> • Heartburn • Indigestion • Nausea
SPECIAL NOTES/RESTRICTIONS	Patients on Coumadin (Warfarin) MAY take Aspirin in the acute setting

ATROPINE

(ATROPINE, COMPONENT OF MARK-I AUTO INJECTOR)

INDICATIONS	Symptomatic Bradycardia, Asystole, Pulseless Electrical Activity, Organophosphate Poisoning and prior to RSI in patients < 16 y/o
ADMINISTRATION	IV, IO, ETT
DOSAGE	
ADULT	<ul style="list-style-type: none"> • Symptomatic Bradycardia: 0.5mg IVP every 3-5minutes to a max of 3mg. • Asystole: 1mg IV/IO or 2mg ETT every 3-5 minutes to a max of 3mg. Max ETT dose 6mg. • PEA: If rate of monitored activity is < 60 give 1mg IV/IO or 2mg ETT every 3-5 minutes to a max of 3mg. Max ETT dose 6mg • Organophosphate Poisoning: 2mg IVP every 5 minutes until lungs clear or BP >90 systolic and pulse > 60.
PEDIATRIC	<ul style="list-style-type: none"> • Symptomatic Bradycardia: 0.02mg/kg IV, minimum does 0.1mg, maximum single does 0.5mg may repeat in 3-5 minutes. Max dose for children 0-8 years old is 1mg, max dose for children 9-15 years old is 2mg. • Organophosphate Poisoning: 0.05mg/kg to a max of 2mg per dose every 10-15 minutes, or until lungs clear or BP >90 systolic and pulse >60. (Minimum does if 0.1mg) • RSI: 0.04mg/kg to a max of 1.0mg to all patients <16 years old
THERAPRUTIC EFFECTS	<ul style="list-style-type: none"> • Blocks acetylcholine receptor sites • Decreases vagal tone • Increases SA and Av nodal conduction • Dries Secretions
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Allergy • Tachycardia
SIDE EFFECTS	<ul style="list-style-type: none"> • Blurred Vision • Dry Mouth • Headache • Pupillary dilation • Tachycardia
SPECIAL NOTES/RESTRICTIONS	Organophosphate may require larger doses

DEXTROSE 50%
(D50W)

INDICATIONS	Hypoglycemia
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	25g (50cc D50) IVP, IO
PEDIATRIC	Dextrose 25% (D25W), 2cc/kg, IV, IO to a max of 100cc. (D50W may be diluted 1 to 1 with NS to achieve D25W)
THERAPEUTIC EFFECTS	Immediate source of glucose
CONTRAINDICATIONS	CVA with normal serum glucose
SIDE EFFECTS	Local irritation
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Dilute dextrose before administration to pediatric patients • Can potentially precipitate acute neurological symptoms in alcoholics • Causes local tissue necrosis is IV infiltrates

DECADRON
(Dexamethasone)

INDICATIONS	<ul style="list-style-type: none"> • Severe respiratory distress with wheezing • Allergic reactions that are accompanied with respiratory distress • Bee Stings
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	20mg SIVP
PEDIATRIC	0.6mg/kg to a max of 20mg SIVP
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Anti-inflammatory agent • May prevent the release of histamine
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Psychosis • Hypersensitivity to the drug • Fungal infections • Non-Asthmatic bronchial disease • CHILD < 2 years of age • AIDS • TB
SIDE EFFECTS	<ul style="list-style-type: none"> • Tachycardia • Bradycardia • Hypertension • Increase sweating • Seizures • Headache
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • To be used in conjunction with Albuterol • Use caution in women who are pregnant

DIAZEPAM (VALIUM)

INDICATIONS	Major motor seizures, Status Epilepticus
ADMINISTRATION	IV,IO, and Rectal
DOSAGE	
ADULT	Seizures: 5mg IV, if no changes repeat 5 mg every 5 minutes until seizures controlled. Rectally one dose 10mg
PEDIATRIC	<ul style="list-style-type: none"> • Seizures: 0.1mg/kg, IV to a max of 5mg per dose, may repeat dose every 5 minutes until seizures controlled. • Rectal: 0.5mg/kg, rectal to a max of 10 mg per dose
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Suppresses spread of seizure activity through the motor cortex • Skeletal muscle relaxant • Reduces anxiety and causes sedation
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Respiratory depression • Hypotension • Allergy
SIDE EFFECTS	<ul style="list-style-type: none"> • Hypotension • Respiratory depression • Use caution in the elderly patients
SPECIAL NOTES/RESTRICTIONS	Intramuscularly administration leads to widely variable absorption and should be avoided if possible.

DIPHENHYDRAMINE (Benadryl)

INDICATIONS	Allergic Reaction
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	50mg IV or IO
PEDIATRIC	1.0mg/kg IV or IO to a max of 50mg
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Inhibits histamine release and effects • Anticholinergic effects antagonize extra pyramidal symptoms
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Acute asthma exacerbation • Acute Glaucoma • Pregnancy • Sensitivity to drug
SIDE EFFECTS	<ul style="list-style-type: none"> • Blurred vision • Headache • Palpitations • Sedation
SPECIAL NOTES/RESTRICTIONS	Contact Medical Control if patient is suspected to be having a dystonic reaction

DOPAMINE (Intropin)

INDICATIONS	Cardiogenic shock, Bradycardia, Refractory Hypotension
ADMINISTRATION	IV or IO infusion
DOSAGE	
ADULT	<ul style="list-style-type: none"> • 5mcg/kg/min, IV or IO, increased by 5mcg/kg/min every 2 minutes until: Max of 20mcg/kg/min given or Systolic BP 90-110mmHg
PEDIATRIC	<ul style="list-style-type: none"> • 5mcg/kg/min, IV or IO • If perfusion not adequate after 2 minutes, increase to a max of 10mcg/kg/min
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Stimulates alpha, beta, and dopamine receptors, depending on dose • Increases cardiac output and systemic arterial pressure • Dilates vessels to the brain, heart and kidneys • Increases heart rate
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Uncorrected hypovolemic shock • Uncorrected tachydysrhythmias • Allergy
SIDE EFFECTS	<ul style="list-style-type: none"> • Angina • Ectopy • Headache • Tachydysrhythmias
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Titrate to blood pressure • Hypovolemia should be corrected with volume expansion fluids prior to the administration of Dopamine.

EPINEPHRINE

(Epi 1:10,000 and Epi 1:1,000)

INDICATIONS	Cardiac Arrest, Allergic reaction, and Pediatric Bradycardia
ADMINISTRATION	IV, IO, SC, ETT
DOSAGE	
ADULT	<ul style="list-style-type: none"> • Cardiac arrest: 1mg IV or IO every 3-5 minutes or 2mg via ETT every 3-5 minutes of 1:10,000 • Allergic Reaction Stable: 0.2mg of 1:10,000 IV • Allergic Reaction Unstable: 0.5mg of 1:10,000 IV
PEDIATRIC	<ul style="list-style-type: none"> • Cardiac Arrest-: 1:10,000 0.01mg/kg IV, IO or 0.1mg/kg ETT of 1:1,000 solution up to a max on 1 mg per single dose • Bradycardia-: 0.01mg/kg of 1:10,000 solution IV or IO to a max of 5cc per single dose, or 0.1mg/kg ETT 1:1,000 solution to a max of 0.5cc per single dose repeat every 3-5 minutes at same dose • Allergic Reaction: 0.01mg/kg IV or IO of 1:10,000, max dose of 0.5mg (ADMINISTER ONLY IF EVIDENCE OF SHOCK IS PRESENT) • Epinephrine 1:1,000: 0.01mg/kg to a max of 0.15mg SC
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Stimulates alpha and beta adrenergic receptors • Increases heart rate, systemic blood pressure and coronary blood flow
CONTRANDICATIONS	<ul style="list-style-type: none"> • Hypertension • Tachycardia
SIDE EFFECTS	<ul style="list-style-type: none"> • Hypertension • Palpitations • Tachycardia • Tremors
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Pay special attention to the concentration either 1:1,000 or 1:10,000 • Epinephrine 1:1,000 is NEVER GIVEN IV

ETOMIDATE (Amidate)

INDICATIONS	Chemical Sedation, RSI
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	0.3mg/kg IV or IO to a max of 40mg
PEDIATRIC	0.3mg/kg IV or IO to a max of 40mg
THERAPEUTIC EFFECTS	
CONTRAINDICATIONS	Hypersensitivity
SIDE EFFECTS	<ul style="list-style-type: none"> • Pain at injection site • Respiratory depression
SPECIAL NOTES/RESTRICTIONS	

FUROSEMIDE

(Lasix)

INDICATIONS	Pulmonary Edema, CHF
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	40mg IVP or IO
PEDIATRIC	1mg/kg IVP or IO to a max of 40mg
THERAPEUTIC EFFECTS	<ul style="list-style-type: none">• Loop diuretic which inhibits resorption of sodium and chloride• Mild vasodilator
CONTRAINDICATIONS	<ul style="list-style-type: none">• Hypokalemia• Hypovolemia• Pregnancy• Allergy
SIDE EFFECTS	<ul style="list-style-type: none">• Dehydration• Dysrhythmias
SPECIAL NOTES/RESTRICTION	<ul style="list-style-type: none">• May cause transient deafness with too fast of IV push• May cause hyperglycemia and impairment of glucose tolerance

LABETLOL
(Normodyne)

INDICATIONS	Hypertensive Crisis
ADMINISTRATION	IV, IO
DOSEAGE	
ADULT	10-20mg IV or IO per online medical control
PEDIATRIC	Not indicated
THERAPEUTIC EFFECTS	Decreases blood pressure without reflex tachycardia or significant reduction in heart rate.
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Hypersensitivity to Beta blockers, Cardiogenic shock • 2nd or 3rd degree AV blocks, Sinus Bradycardia, CHF, or Bronchial Asthma
SIDE EFFECTS	<ul style="list-style-type: none"> • Orthostatic hypotension • CHF • Chest Pain • Ventricular dysrhythmias • AV Block
SPECIALNOTES/RESTRICTIONS	Use caution in patients who are pregnant, or have diabetes, or well compensated heart failure, and in the elderly

LEVALBUTEROL

(Xopenex)

INDICATIONS	Respiratory distress with patients that have Asthma or COPD
ADMINISTRATION	Nebulized via supplemental oxygen
DOSAGE	
ADULT	1.25mg/3ml nebulized, may repeat once if no relief
PEDIATRIC	1.25mg/3ml nebulized, may repeat once if no relief
THERAPEUTIC EFFECTS	<ul style="list-style-type: none">• Relaxes soft muscles• Causes bronchodilation• Causes cardiac stimulation
CONTRAINDICATIONS	<ul style="list-style-type: none">• Hypersensitivity to drug• Tachydysrhythmias• Severe cardiac disease
SIDE EFFECTS	<ul style="list-style-type: none">• Dizziness• Migraine• Nervousness• Anxiety• Tachycardia• Increased cough
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none">• Use with caution in patients with Cardio Vascular disorders• Use caution in patients with Diabetes and seizure disorders

ALBUTEROL (Ventolin)

INDICATIONS	Acute Bronchospasm, Respiratory distress, Allergic reaction, CHF
ADMINISTRATION	Hand held Nebulizer, Nebulizer Mask, Inline ETT Nebulizer
DOSAGE	
ADULT	2.5mg/3cc
PEDIATRIC	2.5mg/3cc
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Decreased bronchospasm via beta receptors • Improves pulmonary function
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Hypersensitivity to any of the contents of the solution • Tachydyrthmias
SIDE EFFECTS	<ul style="list-style-type: none"> • Cough • Dizziness or Nervousness • Nausea • Tachycardia • Tremor
SPECIAL NOTES/RESTRICTIONS	May be nebulized via ETT in intubated asthmatics or COPD patients

LIDOCAINE

(Xylocaine)

INDICATIONS	Ventricular arrhythmias, Pre IO fluid Infusion. RSI for patients with head injuries
ADMINISTRATION	IV, IO, ETT, IV infusion, IO infusion
DOSAGE	
ADULT	<ul style="list-style-type: none"> • PVCs: 1mg/kg, if not suppressed give 0.5mg/kg every five minutes until PVCs suppressed or 3mg/kg has been given • Lidocaine Drip must be started at 2mg/minute after using Lidocaine to treat Ventricular arrhythmias • RSI: 1mg/kg for patients with a head injury • Adult IO: Prior to infusion of fluids or flushes in the conscious adult patient you may administer 1mg/kg to a max of 50 mg, if there are no contraindications
PEDIATRIC	<ul style="list-style-type: none"> • 2mg/kg ETT to a max of 6mg/kg for patients with V-Tach with a pulse, and V-Fib and V-Tach without a pulse • Lidocaine Drip must be started at 2mg/minute after using Lidocaine to treat Ventricular arrhythmias • Head Injury 0.5mg/kg
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Suppresses Ventricular ectopy • Elevates threshold for ventricular fibrillation • Suppresses re-entry arrhythmias
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Idioventricular rhythms • 2nd and 3rd degree AV blocks • Allergy to local anesthetics • Sinus bradycardia
SIDE EFFECTS	<ul style="list-style-type: none"> • Arrhythmias • Hypotension • Irritability • Muscle twitching • Seizures
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Successful use of Lidocaine IVP or IO should be followed by additional boluses • Boluses should be reduced in cases of shock, CHF, or elderly patients

MIDAZOLAM

(Versed)

INDICATIONS	Premedication for cardioversion, Seizures and Chemical Sedation and Restraint
ADMINISTRATION	IV, IO, IM
DOSAGE	
ADULT	<ul style="list-style-type: none"> • Cardioversion: 5mg IV or IO if BP>90mmHg (2.5mg if patient is >60 years of age) • Chemical Sedation: 1-5mg IV, IO or IM 0.5mg/kg to a max of 5mg per dose • Seizure: 5mg IM, may be repeated at 2.5mg every 10 minutes as needed to control seizure activity.
PEDIATRIC	<ul style="list-style-type: none"> • Cardioversion: 0.1mg/kg IV or IO to a max of 2.5mg • Chemical Sedation: 0.1mg/kg IV or IO to a max of 10mg • Seizures: 0.2mg/kg IM to a max of 5mg, may repeat 0.1mg/kg every 10 minutes as needed.
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • C.N.S. depressant • The agent causes amnesia by unknown mechanism
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Hypersensitivity • Pre-existing respiratory depression due to drugs or C.N.S. dysfunction • Use with caution, if at all, for shock states, head injury patients and comatose patients
SIDE EFFECTS	<ul style="list-style-type: none"> • Amnesia, Tonic-clonic activity, drowsiness, and lethargy • Tachycardia and Hypotension • Photophobia, blurred vision and nystagmus • Nausea, vomiting, depressed gag reflex • Pain and phlebitis at injection site
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • This agent is 3-4 times as potent as diazepam on a milligram to milligram basis. Its has a more rapid onset and shorter half-life than Valium • Monitor ECG, V/S, and SPO2 continuously

MORPHINE

INDICATIONS	Pain management, Pulmonary Edema, CHF, and Cardiac Chest pain or AMI
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	<ul style="list-style-type: none"> • Pain: 2-6mg may repeat if needed every 10 minutes or until systolic BP is <90mmHg • Pulmonary Edema/CHF: 2-6mg may repeat once in 10 minutes if systolic BP >90mmHg • Chest Pain: 2-6mg may repeat as need every 10 minutes until pain is relieved or systolic BP <90mmHg
PEDIATRIC	<ul style="list-style-type: none"> • Pain: 0.1mg/kg up to a max single does of 3mg • Pulmonary Edema: 0.1mg/kg to a max single does of 3mg
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Binds with opiate receptors to reduce pain • Peripheral vasodilation
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Use of Monoamine Oxidase Inhibitors (MAOI's) within the past 14 days • Asthma • COPD • Head Injury • Hypotension • Hypovolemia • Respiratory depression
SIDE EFFECTS	<ul style="list-style-type: none"> • Bradycardia • Hypotension • Nausea and vomiting • Respiratory depression
SPECIAL NOTES/RESTRICTIONS	Naloxone (Narcan) and respiratory equipment should be immediately accessible.

NALOXONE

(Narcan)

INDICATIONS	Opiate Overdose, Decreased LOC
ADMINISTRATION	IV, IO, ETT
DOSAGE	
ADULT	<ul style="list-style-type: none">• 2mg may be repeated if no changes in patients mental status• Patients on chronic high dosages of Narcotics give 0.1mg every 2-3 minutes for clinical effect.
PEDIATRIC	0.05mg/kg to a max of 2mg
THERAPEUTIC EFFECTS	Reverses effects of most narcotic agents
CONTRAINDICATIONS	Hypersensitivity to Naloxone
SIDE EFFECTS	<ul style="list-style-type: none">• Acute Narcotic withdrawal• Hypertension• Irritability• Nausea and vomiting• Tachycardia
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none">• Does not reverse benzodiazepine overdoses• May precipitate acute withdrawal symptoms• Caution should be exercised when administering Naloxone to patients addicted to narcotics

NITROGLYCERIN

(Nitro-Bid, Nitrostat)

INDICATIONS	Chest Pain, Pulmonary Edema, CHF
ADMINISTRATION	SL
DOSAGE	
ADULT	<ul style="list-style-type: none"> • Chest Pain: If systolic BP is >90mmHg give 0.4mg SL or 1 metered spray of Nitro spray, every 5 minutes until pain is relieved, total of 3 doses given or Systolic blood pressure < 90mmHg • Pulmonary Edema/CHF: If systolic BP > 90mmHg give one Nitro 0.4mg SL or one metered Nitro Spray
PEDIATRIC	NOT INDICATED
THERAPEUTIC EFFECTS	Dilates coronary and systemic arteries
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Head trauma • Hypertrophic Cardiomyopathy • Glaucoma • Hypotension • Use of Viagra, Cialis or Levitra within past 48 hours
SIDE EFFECTS	<ul style="list-style-type: none"> • Dizziness • Headache • Hypotension
SPECIAL NOTES/RESTRICTIONS	Contact Medical Control prior to administration if taking Viagra, Cialis or Levitra

NORCURON

(Vecuronium)

INDICATIONS	<ul style="list-style-type: none"> • To facilitate emergent endotracheal intubation • Provide skeletal muscle relaxation during artificial ventilations
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	0.15mg/kg to a max of 20mg and may repeat dosage at 0.01mg/kg if needed
PEDIATRIC	For patients <9 years of age give 0.2mg/kg to a max of 20mg, and may be repeated at 0.01mg/kg if needed
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • The agent is a non-depolarizing skeletal muscle relaxant • This agent acts by competing for cholinergic receptors, which prevents acetylcholine from binding to the receptors on the muscle end plate, thus blocking depolarization
CONTRAINICATIONS	Hypersensitivity to the drug
SIDE EFFECTS	<ul style="list-style-type: none"> • Serious histamine mediated flushing • Hypotension • Bronchoconstriction • Transient increase in heart rate • Respiratory depression and Apnea • Redness and itching at IV site
SPECIAL NOTES/ RESTRICTIONS	<ul style="list-style-type: none"> • The patient will be completely paralyzed and in respiratory arrest for 20-30 minutes following the administration of norcuron- Complete airway control management will be necessary • The agent has no effect on consciousness, cerebation or pain threshold • Use with Anectine may enhance the neuromuscular blocking effect of Norcuron

NORMAL SALINE

INDICATION	Trauma, Hypovolemic status, Burns, as a flushing agent, D.K.A. and as an irrigation solution for eyes. First line IV fluid of choice
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	T.K.O. to W/O IV or IO
PEDIATRIC	T.K.O. to W/O (20mg/kg) IV or IO
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Expands circulation volume • Isotonic solution
CONTRAINDICATIONS	High doses in Congestive Heart Failure
SIDE EFFECTS	<ul style="list-style-type: none"> • Edema • Fluid Overload • Electrolyte imbalance • Hypertension
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Monitor vital signs and ECG continuously • Listen to breath sounds for signs of pulmonary edema • Can cause hypertension

ORAL GLUCOSE

INDICATIONS	Low blood sugar
ADMINISTRATION	PO (by mouth)
DOSAGE	
ADULT	15g between cheek and gum, may repeat to desired effect
PEDIATRIC	15g between cheek and gum, may repeat to desired effect
THERAPEUTIC EFFECTS	Increases blood sugar in patients that are alert and able to swallow
CONTRAINDICATIONS	<ul style="list-style-type: none">• Unconscious patients• Hyperglycemia
SIDE EFFECTS	None
SPECIAL NOTES/RESTRICTIONS	Only administer to patients that are alert and able to swallow

OXYGEN

INDICATIONS	<ul style="list-style-type: none"> • Treat Hypoxemia • Help decrease work of breathing • Decreases myocardial work
ADMINISTRATION	Inhalation
DOSAGE	
ADULT	<ul style="list-style-type: none"> • 1-6lpm via Nasal cannula • 8-15lpm via Non-Rebreather Mask • 3-6lpm via Hand Held Nebulizer • 6-10lpm via Venturi • 15lpm via ETT
PEDIATRIC	<ul style="list-style-type: none"> • 1-6lpm via Nasal cannula • 8-15lpm via Non-Rebreather Mask • 3-6lpm via Hand Held Nebulizer • 6-10lpm via Venturi • 15lpm via ETT
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Supplemental Oxygen increases alveolar oxygen tension • Reduces both the magnitude and extent of ST changes during an AMI
CONTRAINDICATIONS	DO NOT GIVE SUPPLEMENTAL OXYGEN IN A PARAQUAT POISONING
SIDE EFFECTS	None for short term emergency use
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Do NOT withhold Oxygen from a COPD patient if he/she needs it • Monitor SPO2 continuously

Promethazine (Phenergan)

INDICATIONS	Nausea and Vomiting
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	<ul style="list-style-type: none"> • 12.5mg SIVP or IO (Dilute 1:9 with Saline)
PEDIATRIC	<ul style="list-style-type: none"> • NOT INDICATED FOR CHILDREN < 2 YEARS OF AGE • Over 2 years of age 12.5mg SIVP or IO (Dilute 1:9 with Saline)
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Helps reverse the effects of nausea • May potentate the effects of CNS depressants
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Hypersensitivity to drug • Intestinal obstruction • Seizure disorder
SIDE EFFECTS	<ul style="list-style-type: none"> • Sedation • Confusion • Dizziness • Drowsiness • Blurred Vision • Dry Mouth • Nausea • Vomiting • Hypotension • Hypertension
SPECIAL NOTES/RESTRICTIONS	Use with caution in patients over 60 years of age. MUST dilute 1 to 1 with NS to avoid damage to veins

SODIUM BICARBONATE

INDICATIONS	Cardiac Arrest, May also be given for KNOWN Tricyclic Antidepressant O.D., Hyperkalemia or Acidosis
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	1mEq/kg up to 100mEq. May be repeated at 0.5mEq/kg every 10 minutes to a max of 50 mEq.
PEDIATRIC	NOT INDICATED
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Buffers strong acids in the blood • Antagonizes sodium channel blockade in TCA overdose • Prevents resorption of salicylates in renal tubes
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Hypokalemia • Pulmonary Edema
SIDE EFFECTS	<ul style="list-style-type: none"> • Dysrhythmias secondary to potassium effects • Metabolic alkalosis • Pulmonary edema
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • MUST CONTACT ON-LINE MEDICAL CONTROL • Not to be used in place of proper ventilation to prevent acidosis • In patients less than 2 year of age you must dilute 1:1 with NS

SUCCINYLBCHOLINE

(Anectine)

INDICATIONS	Chemical Sedation
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	2mg/kg rapid IV or IO push, to a max of 200mg. Do not repeat without medical control authorization.
PEDIATRIC	2mg/kg rapid IV or IO push, to a max of 200mg. Do not repeat without medical control authorization
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Inhibits transmission of nerve impulses by binding with cholinergic receptors sites, antagonizing action of acetylcholine causes release of histamine
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Burns greater than 48 hours old • Kidney Dialysis • Chronic neuromuscular disease or any chronic paralysis • Hypersensitivity
SIDE EFFECTS	<ul style="list-style-type: none"> • Bradycardia • Tachycardia • Hypertension • Dysrhythmias • Apnea • Respiratory depression
SPECIAL NOTES/ RESTRICTIONS	Monitor vital signs closely

ACTIVATED CHARCOAL

INDICATIONS	Used to treat certain types of poisonings and overdoses
ADMINISTRATION	PO
DOSAGE	
ADULT	1g/kg up to a max of 50g
PEDIATRIC	1g/kg up to a max of 50g
THERAPEUTIC EFFECTS	Binds and absorbs various chemicals and poisonous compounds, thereby reducing their absorption into the body
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Caustic/Corrosive substances • Cyanide poisonings • Semi-conscious or unconscious patients
SIDE EFFECTS	Abdominal cramping, constipation, dark stools, and nausea and vomiting
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Online medical control orders required • Does not absorb all drugs or toxic substances (i.e. Cyanide, Lithium, Iron, Lead, Arsenic, etc) • Has no effect in methanol or organophosphate poisonings • Has little therapeutic value in caustic alkalis and acid poisonings • Should not be given with ice cream, milk, sherbet or syrup of Ipecac

ADENOSINE

(Adenocard)

INDICATIONS	<ul style="list-style-type: none"> • Paroxysmal Supraventricular Tachycardia • Supraventricular Tachycardia • Wolfe-Parkinson-White Syndrome
ADMINISTRATION	Rapid IV or IO push with immediate 10cc NS flush
DOSAGE	
ADULT	Initial dose is 12mg rapid IV or IO push, may repeat once at 12mg rapid IV or IO push
PEDIATRIC	0.1mg/kg rapid IV or IO push to a max of 12mg
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Slows conduction time through AV node • Interrupts reentry pathways through AV node • Restores Sinus Rhythm in patients with SVT
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Hypersensitivity • 2nd or 3rd degree AV blocks • Sinus node dysfunction, such as sick sinus syndrome or symptomatic bradycardia • Atrial Flutter/Atrial Fibrillation • Ventricular Tachycardia
SIDE EFFECTS	<ul style="list-style-type: none"> • Transient AV block, Asystole and other Dysrhythmias • Chest pressure • Dizziness • Flushing • Nausea/Vomiting • Shortness of Breath
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Onset is generally within less than one minute • Adverse effects are usually short lived and easily tolerated • Effects may be more pronounced in patients on Dipyridamole • Effects may be attenuated in patients on Theophylline preparations

AMIODARONE

(Cordarone)

INDICATIONS	Ventricular Fibrillation, Ventricular Tachycardia, SVT
ADMINISTRATION	IVP, IO or IV infusion
DOSAGE	
ADULT	<ul style="list-style-type: none"> • Pulseless VF/VT-Initial 300mg IVP or IO • Pulseless VF/VT- Repeat 150mg IVP or IO • Stable V-Tach-150mg over 10 minutes, may repeat every 10 minutes to a max of 450mg • SVT-150mg IV or IO over 10 minutes. May be repeated once if needed.
PEDIATRIC	<ul style="list-style-type: none"> • Pulseless VF/VT Initial-5mg/kg to a max of 300mg IV or IO May repeat once in 3-5 minutes at 2.5mg/kg to a max of 150mg • V-Tach with a pulse-5mg/kg, IVP or IO over 20 minutes to a max of 15mg/kg • SVT-5mg/kg, IV or IO over 20 minutes, to a max of 150mg
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Prolongs action potential and refractory period • Reduces ventricular dysrhythmias and raises fibrillatory threshold
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Cardiogenic shock • Hypersensitivity to drug • 2nd or 3rd degree AV block • Severe Sinus Bradycardia • Severe sinus node dysfunction
SIDE EFFECTS	<ul style="list-style-type: none"> • Hypotension • Bradycardia • Asystole • PEA
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Serial use of calcium channel blockers, Beta blockers and other antiarrhythmics may cause additive hypotensive bradycardia and proarrhythmogenic effects • Draw up slowly to prevent bubbling

RACEMIC EPINEPHRINE

(Micronefrin, Vapo Nefrin)

INDICATIONS	Croup
ADMINISTRATION	Inhalation
DOSAGE	
ADULT	DO NOT GIVE TO ADULT PATIENTS
PEDIATRIC	<40KG: 11.25mg Racemic Epinephrine in 2mL 2.25% saline solution via nebulizer
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Bronchodilator • Vasoconstrictor
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Hypersensitivity • Epiglottitis • Significant underlying cardiovascular disease
SIDE EFFECTS	<ul style="list-style-type: none"> • Anxiety • Palpitations • Headache • Tremors • Tachycardia • Nausea/Vomiting
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Monitor vital signs closely • Should be used only once prehospital (contact medical control if another is needed) • Excessive use may cause bronchospasms • May develop “rebound worsening” within 30-60 minutes • Effects last from 90-120 minutes • PATIENT MUST BE TRANSPORTED AFTER RECEIVING RACEMIC EPINEPHRINE • Heat and Light sensitive should be stored in a dark cool place

FENTANYL

(Duragesic)

INDICATIONS	Pain Management
ADMINISTRATION	IV, IO
DOSAGE	
ADULT	<ul style="list-style-type: none"> • 5mcg/kg for single dose max of 50 mcg, (2.5mcg/kg if >60 years of age) • May repeat once at same dosage if needed in 3-5 minutes
PEDIATRIC	<ul style="list-style-type: none"> • 5 mcg/kg for a single does max of 50 mcg • May repeat once at same dosage if needed in 3-5 minutes • Not indicated for children < 2 years of age
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Inhibits ascending pain pathways in CNS • Increases pain threshold • Alters pain perception by binding to opiate receptors
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Hypersensitivity • Asthma • Severe renal disease • Severe hepatic disease
SIDE EFFECTS	<ul style="list-style-type: none"> • Dizziness • Bradycardia • Hypotension • Hypertension • Blurred vision • Nausea/Vomiting • Urinary Retention • Diaphoresis • Respiratory depression
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Light Sensitive • DO NOT use in children < 2 years of age

Glucagon

INDICATIONS	Hypoglycemia
ADMINISTRATION	IM
DOSAGE	
ADULT	1mg IM
PEDIATRIC	0.5mg IM
THERAPEUTIC EFFECTS	<ul style="list-style-type: none"> • Increases blood sugar • Improves mental status
CONTRAINDICATIONS	<ul style="list-style-type: none"> • Hypersensitivity • Hyperglycemia
SIDE EFFECTS	<ul style="list-style-type: none"> • Hypotension • Nausea and Vomiting
SPECIAL NOTES/RESTRICTIONS	<ul style="list-style-type: none"> • Peak effect occurs within 30 minutes • Pts can be hyperglycemic for one to two hours after

**SOUTH PLAINS
EMERGENCY MEDICAL
SERVICE**

**ADULT
DRUG CHARTS**



ADULT MEDICATIONS

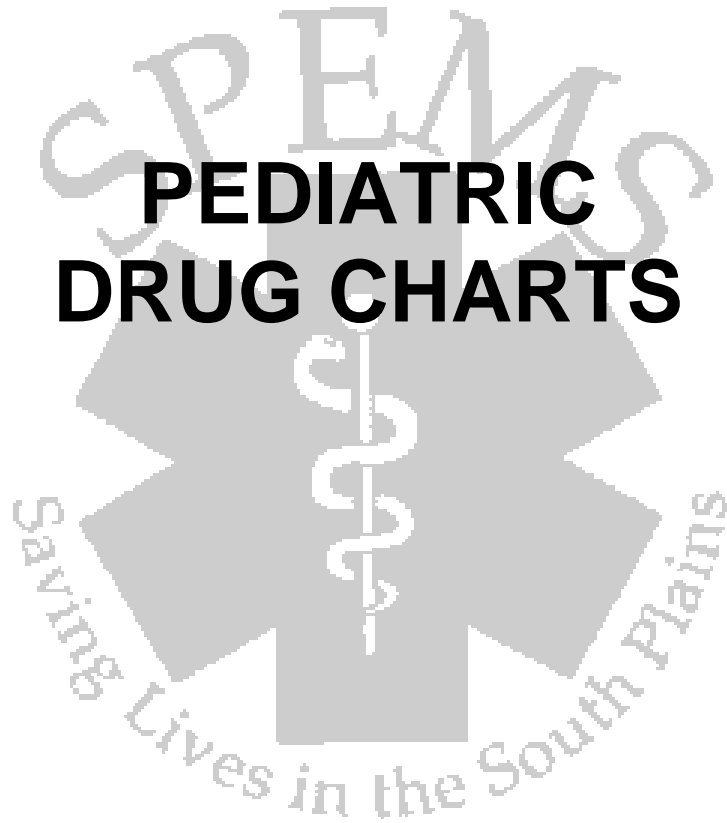
Weight (lbs)	110lbs	143lbs	165lbs	187lbs	209lbs	220lbs
Weight (kg)	50kg	60kg	70kg	80kg	90kg	100kg
Activated Charcoal 1g/kg up to 50g	50g PO	50g PO	50g PO	50g PO	50g PO	50g PO
Adenosine 12mg Rapid IV push, may be repeated once at 12mg rapid IV push	12mg	12mg	12mg	12mg	12mg	12mg
Albuterol 2.5mg nebulized	2.5mg	2.5mg	2.5mg	2.5mg	2.5mg	2.5mg
Amiodarone 300mg rapid IV for VF/VT without a pulse may repeat once at 150mg	300mg	300mg	300mg	300mg	300mg	300mg
Amiodarone 150mg IV over 10 minutes for VF/VT with a pulse	150mg	150mg	150mg	150mg	150mg	150mg
ASA 325mg PO	325mg	325mg	325mg	325mg	325mg	325mg
Atropine for Bradycardia 0.5mg may be repeated to a max of 3mg	0.5mg	0.5mg	0.5mg	0.5mg	0.5mg	0.5mg
Atropine for Asystole and PEA 1mg every 3-5 minutes to a max of 3mg	1mg	1mg	1mg	1mg	1mg	1mg
Benadryl 50mg IVP	50mg	50mg	50mg	50mg	50mg	50mg
Sodium Bicarb 1meq/kg to a max of 100meq, may repeat at 0.5meq every 10 minutes up to 50meq	50meq	60meq	70meq	80meq	90meq	100meq
Dextrose 50% (D50W) 25g/50cc may repeat once if blood glucose < 70.	25grams	25grams	25grams	25grams	25grams	25grams
Decadron 20mg SIVP	20mg	20mg	20mg	20mg	20mg	20mg
Dopamine 5mcg/kg/min 200mg/250mL	18gts/min	23gts/min	26gts/min	30gts/min	34gts/min	38gts/min
Dopamine 10mcg/kg/min 200mg/250mL	38gts/min	45gts/min	53gts/min	60gts/min	68gts/min	75gts/min
Dopamine 15mcg/kg/min 200mg/250mL	56gts/min	68gts/min	79gts/min	90gts/min	101gts/min	113gts/min
Dopamine 20mcg/kg/min 200mg/250mL	75gts/min	90gts/min	105gts/min	120gts/min	135gts/min	150gts/min
Epi 1:1,100 0.3mg SQ	0.3mg	0.3mg	0.3mg	0.3mg	0.3mg	0.3mg
Epi 1:10,000 1mg IVP or 2mg ETT	1mg/2mg	1mg/2mg	1mg/2mg	1mg/2mg	1mg/2mg	1mg/2mg
Labetalol 10-20mg IVP (MUST CONTACT MEDICAL CONTROL BEFORE ADMINISTERING)	10-20mg	10-20mg	10-20mg	10-20mg	10-20mg	10-20mg
Lasix 40mg SIVP	40mg	40mg	40mg	40mg	40mg	40mg
Lidocaine Drip 2-4mg/minute	30-60ggt/hr	30-60ggt/hr	30-60ggt/hr	30-60ggt/hr	30-60ggt/hr	30-60ggt/hr
Lidocaine for PVCs 1mg/kg IV may be repeated at 0.5mg/kg to a max of 3mg/kg	50mg/25mg	60mg/30mg	70mg/35mg	80mg/40mg	90mg/45mg	100mg/50mg
Lidocaine for VF/VT given via ETT 2mg/kg may repeat at 2mg/kg to a max of 6mg/kg	100mg	120mg	140mg	160mg	180mg	200mg
Morphine 2-6mg every 10 minutes (half dosage in pts >60y/o)	2-6mg	2-6mg	2-6mg	2-6mg	2-6mg	2-6mg
Narcan 2mg may repeat once if no change in mental status	2mg	2mg	2mg	2mg	2mg	2mg
Nitro Spray 0.4mg SL max of 3 if BP>90 systolic	0.4mg	0.4mg	0.4mg	0.4mg	0.4mg	0.4mg
Phenergan 12.5mg SIVP (must be diluted in 9cc NS)	12.5mg	12.5mg	12.5mg	12.5mg	12.5mg	12.5mg
Valium 5mg IV for active seizures may repeat as needed at 5mg every 5 minutes	5mg	5mg	5mg	5mg	5mg	5mg
Etomidate 0.3mg/kg IV to a max of 40mg	15mg	18mg	21mg	24mg	27mg	30mg
Succinylcholine 2mg/kg rapid IVP	100mg	120mg	140mg	160mg	180mg	200mg
Versed 5mg IVP if BP>90 systolic (2.5mg if pt >60)	5mg	5mg	5mg	5mg	5mg	5mg
Fentanyl 5mcg/kg to a max of 50mcg single does. May repeat once	50mcg	50mcg	50mcg	50mcg	50mcg	50mcg
Xopenex 1.25mg/3cc NS Nebulized may be repeated once at same dose if needed	1.25mg	1.25mg	1.25mg	1.25mg	1.25mg	1.25mg
Norcuron 0.15mg/kg to a max of 20mg may repeat at 0.01mg/kg if needed	7.5mg	9mg	10.5mg	12mg	13.5mg	15mg
Oral Glucose 15g between check and gum may repeat to desired effect	15g	15g	15g	15g	15g	15g
Racemic Epi	Not indicated	Not indicated	Not indicated	Not indicated	Not indicated	Not indicated
Glucagon 1mg IM	1mg	1mg	1mg	1mg	1mg	1mg

ADULT MEDICATIONS

Weight (lbs)	242lbs	264lbs	286lbs	308lbs	330lbs
Weight (kg)	110kg	120kg	130kg	140kg	150kg
Activated Charcoal 1g/kg up to 50g	50g PO	50g PO	50g PO	50g PO	50g PO
Adenosine 12mg Rapid IV push, may be repeated once at 12mg rapid IV push	50g	50g	50g	50g	50g
Albuterol 2.5mg nebulized	12mg	12mg	12mg	12mg	12mg
Amiodarone 300mg rapid IV for VF/VT without a pulse may repeat once at 150mg	2.5mg	2.5mg	2.5mg	2.5mg	2.5mg
Amiodarone 150mg IV over 10 minutes for VF/VT with a pulse	300mg	300mg	300mg	300mg	300mg
ASA 325mg PO	150mg	150mg	150mg	150mg	150mg
Atropine for Bradycardia 0.5mg may be repeated to a max of 3mg	0.5mg	0.5mg	0.5mg	0.5mg	0.5mg
Atropine for Asystole and PEA 1mg every 3-5 minutes to a max of 3mg	1mg	1mg	1mg	1mg	1mg
Benadryl 50mg IVP	50mg	50mg	50mg	50mg	50mg
Sodium Bicarb 1meq/kg to a max of 100meq, may repeat at 0.5meq every 10 minutes up to 50meq	100meq	100meq	100meq	100meq	100meq
Dextrose 50% (D50W) 25g/50cc may repeat once if blood glucose < 70.	25g	25g	25g	25g	25g
Decadron 20mg SIVP	20mg	20mg	20mg	20mg	20mg
Dopamine 5mcg/kg/min 200mg/250mL	40gtts/min	45gtts/min	49gtts/min	53gtts/min	56gtts/min
Dopamine 10mcg/kg/min 200mg/250mL	84gtts/min	90gtts/min	98gtts/min	105gtts/min	113gtts/min
Dopamine 15mcg/kg/min 200mg/250mL	124gtts/min	135gtts/min	146gtts/min	158gtts/min	169gtts/min
Dopamine 20mcg/kg/min 200mg/250mL	165gtts/min	180gtts/min	195gtts/min	210gtts/min	225gtts/min
Epi 1:1,100 0.3mg SQ	0.3mg	0.3mg	0.3mg	0.3mg	0.3mg
Epi 1:10,000 1mg IVP or 2mg ETT	1mg/2mg	1mg/2mg	1mg/2mg	1mg/2mg	1mg/2mg
Labetalol 10-20mg IVP (MUST CONTACT MEDICAL CONTROL BEFORE ADMINISTERING)	10-20mg	10-20mg	10-20mg	10-20mg	10-20mg
Lasix 40mg SIVP	40mg	40mg	40mg	40mg	40mg
Lidocaine Drip 2-4mg/minute	30-60gtt/hr	30-60gtt/hr	30-60gtt/hr	30-60gtt/hr	30-60gtt/hr
Lidocaine for PVCs 1mg/kg IV may be repeated at 0.5mg/kg to a max of 3mg/kg	110mg/55mg	120mg/60mg	130mg/65mg	140mg/70mg	150mg/75mg
Lidocaine for VF/VT given via ETT 2mg/kg may repeat at 2mg/kg to a max of 6mg/kg	220mg	240mg	260mg	280mg	300mg
Morphine 2-6mg every 10 minutes (half dosage in pts >60y/o)	2-6mg	2-6mg	2-6mg	2-6mg	2-6mg
Narcan 2mg may repeat once if no change in mental status	2mg	2mg	2mg	2mg	2mg
Nitro Spray 0.4mg SL max of 3 if BP>90 systolic	0.4mg	0.4mg	0.4mg	0.4mg	0.4mg
Phenergan 12.5mg SIVP (must be diluted in 9cc NS)	12.5mg	12.5mg	12.5mg	12.5mg	12.5mg
Valium 5mg IV for active seizures may repeat as needed at 5mg every 5 minutes	5mg	5mg	5mg	5mg	5mg
Etomidate 0.3mg/kg IV to a max of 40mg	33mg	36mg	39mg	40mg	40mg
Succinylcholine 2mg/kg rapid IVP	200mg	200mg	200mg	200mg	200mg
Versed 5mg IVP if BP >90 systolic (give half dosage if pt >60y/o)	5mg	5mg	5mg	5mg	5mg
Fentanyl 5mcg/kg to a max of 50mcg single does. May repeat once	50mcg	50mcg	50mcg	50mcg	50mcg
Xopenex 1.25mg/3cc NS Nebulized may be repeated once at same dose if needed	1.25mg	1.25mg	1.25mg	1.25mg	1.25mg
Norcuron 0.15mg/kg to a max of 20mg may repeat at 0.01mg/kg if needed	16.5mg	18mg	19.5mg	20mg	20mg
Oral Glucose 15g between check and gum may repeat to desired effect	15g	15g	15g	15g	15g
Racemic Epi	Not Indicated	Not indicated	Not indicated	Not indicated	Not indicated
Glucagon 1mg IM	1mg	1mg	1mg	1mg	1mg

**SOUTH PLAINS
EMERGENCY MEDICAL
SERVICE**

**PEDIATRIC
DRUG CHARTS**



PEDIATRIC MEDICATIONS

Weight (lbs)	7.5lbs	15lbs	22lbs	33lbs	44lbs	55lbs	66lbs	77lbs	88lbs	99lbs
Weight (kg)	3.5kg	7kg	10kg	15kg	20kg	25kg	30kg	35kg	40kg	45kg
Activated Charcoal 1g/kg up to 50g	3.5g	7g	10g	15g	20g	25g	30g	35g	40g	45g
Adenosine 0.1mg/kg to a max of 12mg	0.4mg	0.7mg	1mg	1.5mg	2mg	2.5mg	3mg	3.5mg	4mg	4.5mg
Albuterol 2.5mg nebulized	2.5mg	2.5mg	2.5mg	2.5mg	2.5mg	2.5mg	2.5mg	2.5mg	2.5mg	2.5mg
Amiodarone 5mg/kg rapid IV for VF/VT without a pulse may repeat once in 3-5 minutes at 2.5mg/kg to a max of 150mg	17.5mg	35mg	50mg	75mg	100mg	125mg	150mg	175mg	200mg	225mg
Amiodarone 5mg/kg IV or IO over 20 minutes for VF/VT with a pulse to a max of 15mg/kg	17.5mg	35mg	50mg	75mg	100mg	125mg	150mg	175mg	200mg	225mg
ASA	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated
Atropine for Bradycardia 0.02mg/kg, minimum dose 0.1mg, max single dose 0.5mg may repeat in 3-5 minutes	0.1mg	0.1mg	0.2mg	0.3mg	0.4mg	0.5mg	0.5mg	0.5mg	0.5mg	0.5mg
Atropine for RSI 0.04mg/kg to a max of 1mg to all pts less than 16 years old	0.1mg	0.3mg	0.4mg	0.6mg	0.8mg	1mg	1mg	1mg	1mg	1mg
Atropine for Organophosphate Poisoning 0.05mg/kg to a max of 2mg single dose may repeat in 10-15 minutes (minimum dose 0.1mg)	0.2mg	0.4mg	0.5mg	0.8mg	1mg	1.3mg	1.5mg	1.8mg	2mg	2mg
Benadryl 1mg/kg to a max of 50mg	3.5mg	7mg	10mg	15mg	20mg	25mg	30mg	35mg	40mg	45mg
Sodium Bicarb	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated
Dextrose 50% (D50W) 25g/50cc must dilute 1 to 1 with NS to make D25W	7cc	14cc	20cc	30cc	40cc	50cc	60cc	70cc	80cc	90cc
Decadron 0.6mg/kg to a max of 20mg	2mg	4mg	6mg	9mg	12mg	15mg	18mg	20mg	20mg	20mg
Dopamine 5mcg/kg/min 200mg/250mL	1gtt/min	3gtts/min	4gtts/min	6gtts/min	8gtts/min	9gtts/min	11gtts/min	13gtts/min	15gtts/min	17gtts/min
Dopamine 10mcg/kg/min 200mg/250mL	3gtts/min	5gtts/min	8gtts/min	11gtts/min	15gtts/min	19gtts/min	23gtts/min	26gtts/min	30gtts/min	34gtts/min
Epi 1:10,000 for cardiac arrest 0.01mg/kg IV or IO to a max of 1mg per single dose	0.03mg	0.07mg	0.1mg	0.15mg	0.2mg	0.25mg	0.3mg	0.35mg	0.4mg	0.45mg
Epi 1:1,000 for cardiac arrest ETT 0.1mg/kg to a max of 1mf per single dose	0.35mg	0.7mg	1mg	1mg	1mg	1mg	1mg	1mg	1mg	1mg
Epi for Bradycardia 0.01mg/kg of 1:10,000 solution to a max of 5cc per single dose	0.03mg	0.07mg	0.1mg	0.15mg	0.2mg	0.25mg	0.3mg	0.35mg	0.4mg	0.45mg
Epi for Bradycardia via ETT 0.1mg/kg of 1:1,000 solution to a max of 0.5cc per single dose may repeat at same dose every 3-5minutes	0.35mg	0.7mg	1mg	1mg	1mg	1mg	1mg	1mg	1mg	1mg
Epi for Allergic Reactions 0.01mg/kg IV or IO of 1:10,000 solution to a max of 0.5mg	0.03mg	0.07mg	0.1mg	0.15mg	0.2mg	0.25mg	0.3mg	0.35mg	0.4mg	0.45mg
Epi SC for Allergic Reactions 1:1,000 solution 0.01mg/kg to a max of 0.15mg SC	0.03mg	0.7mg	0.1mg	0.15mg	0.15mg	0.15mg	0.15mg	0.15mg	0.15mg	0.15mg
Labetalol	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated	Not Indicated
Lasix 1mg/kg to a max of 40mg	3.5mg	7mg	10mg	15mg	20mg	25mg	30mg	35mg	40mg	45mg
Lidocaine Drip 2/minute										
Lidocaine for V Tach and V Fib with and without a pulse 2mg/kg ETT to a max of 6mg/kg	7mg	14mg	20mg	30mg	40mg	50mg	60mg	70mg	80mg	90mg
Lidocaine for Head Injury 0.5mg/kg	2mg	4mg	5mg	8mg	10mg	13mg	15mg	18mg	20mg	23mg
Morphine 0.1mg/kg to a max of 3mg single dose	0.4mg	0.7mg	1mg	1.5mg	2mg	2.5mg	3mg	3mg	3mg	3mg
Narcan 0.005mg/kg to a max of 2mg since dose	0.2mg	0.4mg	0.5mg	0.8mg	1mg	1.3mg	1.5mg	1.8mg	2mg	2mg

