

### Denver Metro Drug Protocol Pocket Reference

DRUG	Standing Orders / Call-In Orders
Atrovent	<b>Adult and Pediatric:</b> 0.5mg in 3cc NS Nebulized with Proventil.
<b>Adenosine</b>	<b>Adult:</b> 1 <sup>st</sup> Dose—6.0mg IVP, 2 <sup>nd</sup> Dose—12.0 mg IVP. <b>Pediatric:</b> 1 <sup>st</sup> Dose—0.1mg/kg IVP, 2 <sup>nd</sup> Dose—0.2mg/kg IVP. <b>Contact base following second dose.</b>
<b>Albuterol</b> (Proventil)	<b>Adult and Pediatric:</b> Mild—2.5mg/3cc NS nebulized. Moderate and Severe—7.5mg/9cc NS continuous nebulizer.
<b>Amiodarone</b> (Cordarone)	<b>Cardiac Arrest</b> – adult--300 mg IV bolus May repeat 150mg IV bolus (x1) in 3 - 5 minutes. <b>Contact base for further doses.</b> <b>Successfully defibrillated cardiac arrest from VF/VT –</b> <b>Adult :</b> 150mg IV over 10 minutes <b>Adult:</b> Contact base for all indications with a pulse except for post arrest dosing. <b>Wide complex tachycardia (Stable) –</b> Dose is 150mg IV over 10 minutes. Contact base for additional doses. <b>Unstable wide complex tachycardia after unsuccessful cardioversion</b> Contact base -Dose is 150mg IV over 10 minutes <b>Pediatric pulseless VT or VF after unsuccessful defibrillation: .</b> 5mg/kg IV over 3-5 minutes. <b>Contact base for additional doses</b> <b>May be given IV only.</b>
<b>Aspirin</b>	<b>Adult:</b> 324mg chewable (four 81mg tablets).
<b>Atropine</b>	<b>Asystole:</b> Adult—1.0mg IV every 3-5min to max of .04mg/kg. <b>Bradycardia:</b> Adult-0.5-1mg IV every 3-5 min to max of .04mg/kg. <b>Pediatric—0.02mg/kg IV (minimum of .1mg) x two doses;Contact base if bradycardia persists after two doses.</b> <b>Contact base for symptomatic insecticide exposure.</b>
<b>D50%</b>	<b>Adult:</b> One 50mL amp IVP (25.0gm). <b>Children</b> (age between 1 and 8): 2-4mL/kg of D25. <b>Infants</b> (age less than 1): 2-4mL/kg of D10. <b>Contact base prior to second dose.</b>
<b>Diazepam</b> (Valium)	<b>Seizure:</b> Adult—1.0-10.0mg SIVP Pediatric—0.3mg/kg or 0.5mg/kg rectal up to 10.0 mg <b>Contact base for:</b> Combative; Cocaine or amphetamines tachycardia or HTN; Head Injury; or Back Spasm.
<b>Benadryl</b>	<b>Adult:</b> 50.0mg SIVP or IM. <b>Pediatrics:</b> 1.0-2.0mg/kg SIVP.
<b>Dopamine</b>	<b>All indications and dosages</b>
<b>Epinephrine</b>	<b>Cardiac Arrest:</b> Adult—1.0mg every 3-5min IVP. Pediatric—0.1mg/kg every 3-5min IV/IO/ET (1:1,000), then; 0.2mg/kg every 3-5 min IV/IO/ET (1:1,000) subsequent doses. <b>Severe Allergic reactions:</b> Adult -- 0.3mg (1:1,000) SQ. Pediatric – 0.01mg/kg (1:1,000) SQ. <b>Anaphylaxis:</b> (refractory to NS bolus). <b>Adult—0.1mg 1:10,000 IVP.</b> followed by 1mg in 250cc NS infused at 2mcg/min. <b>Pediatric— 0.01mg/kg IV 1:10,000</b>
<b>Cont'd →</b>	

<b>Epinephrine (Cont'd)</b>	<b>Asthma:</b> Adult—0.3mg (1:1,000) SQ. Pediatric—0.01mg/kg (1:1,000) SQ. <b>Bradycardia:</b> Adult—1.0mg in 250cc NS infused at 2.0mcg/min. Pediatric—0.01mg/kg (1:10,000) IVP
<b>Fentanyl</b>	<b>Adult and Pediatric:</b> 1.0-2.0mcg/Kg. <b>Contact base for accumulative or initial doses over 100mcg.</b>
<b>Lasix</b>	Adult only: <b>20.0 – 80.0mg SIVP.</b>
<b>Glucagon</b>	<b>Hypoglycemia:</b> Adult—1.0mg IM. Pediatric—0.1mg/kg IV <b>OD: Adult—2.0mg IV</b>
<b>IV Solutions</b>	<b>Bolus:</b> 1 at 20cc/kg <b>Challenge:</b> up to 2 of 250cc's NS <b>Contact base if additional fluid may be needed.</b>
<b>Haloperidol (Haldol)</b>	<b>Chemical Restraint:</b> 5.0 to 10.0mg IM: may be followed by: Benedryl 25.0 to 50.0mg IV or IM.
<b>Mag. Sulfate</b>	<b>Cardiac arrest:</b> Adult only—2.0gm SIVP <b>Respiratory or Torsades:</b> Adult only—2.0 grams SIVP <b>Pre-eclampsia/eclampsia:</b> 6.0 grams in 50ml NS infused over 15-30 minutes.
<b>Solu-Medrol</b>	<b>Adult:</b> 125.0mg SIVP <b>Pediatric:</b> 2.0mg/kg SIVP
<b>Metoclopramide (Reglan)</b>	Intractable Vomiting: <b>Adult:</b> 10.0mg SIVP (1-2min) or IM. <b>Children 8-12y/o:</b> 5.0mg SIVP or IM. Do not give to children < 8.
<b>Midazolam (Versed)</b>	For: Sedation for Cardioversion & Seizure in Pt. > 8 w/o IV access <b>Adult—</b> 1.0-5.0mg IV/IM. <b>Pediatric—</b> 0.1mg/kg IV/IM/IO <b>Contact Base for airway management.</b>
<b>Morphine</b>	<b>Adult:</b> up to 4.0mg initial dose followed by 2.0mg increments up to 10.0mg max or until desired effect is achieved. <b>Pediatric:</b> 0.1-0.2mg/kg SIVP single bolus. <b>Contact base if max has been reached and desired effect has not been achieved.</b>
<b>Naloxone (Narcan)</b>	<b>Age greater than 6:</b> 2.0mg SIVP/IM. <b>Age less than 6:</b> 1.0mg SIVP/IM. Dose may be repeated once after 5 minutes.
<b>Nitroglycerin</b>	<b>Adult only:</b> 0.4mg tablet or spray SL every 5 min up to 3. <b>Contact base for administration greater than 3 paramedic administered doses.</b>
<b>Oral Glucose</b>	One full tube (25.0gm)
<b>Phenylephrine</b>	2 drops in nostril prior to intubation.
<b>Racemic Epinephrine</b>	<b>Adult and Pediatric:</b> 0.5mL in 2cc's NS nebulized.
<b>Sodium Bicarb.</b>	<b>Cardiac Arrest:</b> Adult and Pediatric—1.0mEq/Kg. For neonatal administration, dilute 1:1 with NS. <b>Tricyclic OD:</b> Adult and Pediatric—1.0mEq/Kg For neonatal administration, dilute 1:1 with NS.
<b>Topical Ophthalmic Anesthetics</b>	Two drops in eye <b>Contact base if any repeat dose is necessary.</b>