

FORMULARY

Epinephrine (Adrenaline)

Class of Drug	Adrenergic stimulant.
Mechanism of Action	Directly stimulates alpha and beta adrenergic receptors in the sympathetic nervous system. Relaxes bronchial smooth muscle, stimulates cardiac muscle and dilates skeletal muscle vasculature.
Indications	Cardiac arrest. Severe anaphylaxis or asthma. Hypotensive shock. Shock in peri-RSI state (ADULT PATIENT ONLY) Bradycardia.
Contraindications	None in the presence of a true indication.
Adverse Effects	Pulmonary edema, dysrhythmia, hypertension, angina, tachycardia, pallor, sweating, dizziness, weakness, tremor, headache, anxiety.
Precautions	Use with caution in patients with cardiac disease.
Dosing/Administration	Available as 1:1000 or 1:10,000. <u>Cardiac Arrest: (1:10,000)</u> Adult: 1 mg IV/IO every 3-5 min. Pediatric: 0.01 mg/kg IV/IO every 3-5 min. <u>Asthma or Anaphylaxis: 1:1000</u> Adult: 0.1 – 0.5 mg IM repeated prn every 5 min. Pediatric: 0.01 mg/kg IM (max of 0.5 mg) repeated prn every 5 min. (May use 1:10,000 IV in severe shock). Pediatric Stridor: 1:1000 5 mL nebulized. <u>Hypotensive Shock</u> <i>Epinephrine Infusion:</i> Adult: 2-10 mcg/min IV/IO. Pediatric: 0.03-0.2 mcg/kg/min IV/IO. <i>Epinephrine Push Dose Pressor (ADULT PATIENT ONLY):</i> 1 mL of 1:10,000 in a syringe with 9 mL (now 1:100,000) For BP < 90 in peri-RSI state push 0.5-2 mL (5-20 mcg) every 1-5 minutes as needed <u>Bradycardia</u> Adult: 2-10 mcg/min epinephrine infusion Pediatric: 0.01 mg/kg IVP repeated every 3-5 min as needed. For persistent bradycardia continuous infusion at 0.1-0.3 mcg/kg/min.
Pregnancy Category	Class C Uncertain safety – animal studies show adverse effect but no human studies exist