

FORMULARY

Norepinephrine (Levophed)

Class of Drug	Adrenergic vasopressor.
Mechanism of Action	Directly stimulates alpha adrenergic receptors resulting in constriction of all vessels and an increase in peripheral vascular resistance, increase in systolic and diastolic blood pressure, decreased blood flow to vital organs, skin, and muscle. Directly stimulates beta-1 receptors with a positive inotropic effect.
Indications	Hypotension Push Dose Pressor in Peri RSI state
Contraindications	Hypersensitivity to drug or components. Patients with peripheral or mesenteric vascular thrombosis, profound hypoxia or hypercapnea, hypovolemia
Adverse Effects	Headache, weakness, dizziness, hypertension, severe peripheral and visceral vasoconstriction, dysrhythmias, bradycardia, GI distress, decreased urine output, necrosis with extravasation, dyspnea, apnea, pallor, cerebral hemorrhage, seizures, metabolic acidosis, hyperglycemia, hyperthermia.
Precautions	Caution in sulfite allergic patients.
Dosing/Administration	<p><u>Hypotension:</u> Mix 4 mg/250 mL in D5W or NS. Adult: 2 – 20 mcg/min IV infusion titrated to goal BP. Pediatric (< 2 years): 0.1 – 2 mcg/kg/min IV infusion titrated to goal BP.</p> <p><u>Rapid Sequence Intubation Push Dose for hypotension</u> Critical Care Only: <i>ADULT PATIENT ONLY</i></p> <ul style="list-style-type: none"> • Begin by mixing 4 mg norepinephrine in 250 mL • Obtain a 10 mL syringe and fill it with 9 mL of sterile normal saline • Into the syringe, draw up 1 mL of norepinephrine 4 mg/250 mL • Concentration of norepinephrine is now 16 mcg/10 mL <p>Dose: 6-10 mcg for BP < 90 by giving 3.75 mL to 6.25 mL IVP Onset: near immediate to 1 minute Duration: 1 minute</p>
Pregnancy Category	Class D Unsafe – evidence of risk that may be justifiable in certain circumstances