

FORMULARY

Amiodarone (Cordorone)

Class of Drug	Antiarrhythmic with predominantly class III effects.
Mechanism of Action	Amiodarone is generally considered a class III antiarrhythmic drug, but it possesses electrophysiological characteristics of all four classes. Like class I it blocks Na ⁺ channels at rapid pacing frequencies, and like class II drugs it exerts a noncompetitive antisympathetic action. One of its main effects is to lengthen the cardiac action potential, a class III action. It also has negative chronotropic effect much like class IV drugs. It also blocks both K ⁺ and Ca ⁺ channels which contribute to the slowing of conduction. Its vasodilatory action can decrease cardiac workload decreasing myocardial oxygen consumption. Onset: within min of IV administration. Duration: hours to days not firmly established.
Indications	<ul style="list-style-type: none"> ▪ Treatment and prophylaxis of VF refractory to other therapy. ▪ Treatment and prophylaxis of hemodynamically unstable VT refractory to other therapy.
Contraindications	<ul style="list-style-type: none"> ▪ Known hypersensitivity. ▪ Cardiogenic shock. ▪ Marked sinus bradycardia. ▪ Second- or third-degree AV blocks unless functioning pacemaker is available.
Adverse Effects	Bradycardia (4.9%), CHF (2.1%), asystole (2.9%), hypotension (16%), VT (2.4%), nausea (3.9%), fever (2%).
Precautions	May cause worsening of existing dysrhythmias or precipitate a new dysrhythmia. Patients with hypokalemia or hypomagnesemia should have the condition corrected whenever possible before treatment with amiodarone, as these disorders can exaggerate the degree of QTc prolongation and increase the potential for Torsades de Points.
Dosing/Administration	<u>Pulseless VF/VT</u> Adult: 300 mg IVP followed prn in 3-5 min by an additional 150 mg IVP Pediatric: 5 mg/kg IVP (not to exceed adult dose) may be repeated in 3-5 min X 2 times <u>Perfusing Dysrhythmia Initial Bolus Infusion:</u> 150 mg over 10 min. Dilute in at least 50 mL D5W or NS. <u>Followed by slow IV load:</u> 360 mg over the NEXT 6 hours (1 mg/min). Add 360 mg to 250 mL D5W (concentration = 1.8 mg/mL). Rate 42 mL/hr. Not to exceed 2.2 grams in a 24-hour period.
Pregnancy Category	Class D Unsafe – evidence of risk that may be justifiable in certain circumstances