

## FORMULARY

### Atropine

<b>Class of Drug</b>	Anticholinergic, vagolytic.
<b>Mechanism of Action</b>	Blocks acetylcholine's effects on the SA and AV nodes, increasing conduction velocity. Also increases sinus node discharge rate and decreases the AV node's refractory period. Result is an increased heart rate. Decreases the action of the parasympathetic nervous system on bronchial, salivary, and sweat glands resulting in decreased secretions. Decreases cholinergic effects on the iris, ciliary body and bronchial smooth muscle.
<b>Indications</b>	Symptomatic bradycardia. Need to diminish cardiac vagal reflexes (prelaryngoscopy). Anticholinesterase insecticide poisoning.
<b>Contraindications</b>	Hypersensitivity to drug or components.
<b>Adverse Effects</b>	Bradycardia, anaphylaxis, headache, dry mouth, GI distress, blurred vision, mydriasis, constipation, delirium, tachycardia, ataxia, tremor, dry hot skin.
<b>Precautions</b>	Small doses may lead to a paradoxical slowing of the heart rate. Use with caution in acute cardiac ischemia, glaucoma, obstructive uropathy, paralytic ileus, toxic megacolon, myasthenia gravis.
<b>Dosing/Administration</b>	<b>Bradycardia:</b> Adult: 0.5 – 1 mg repeated every 5 min to max of 0.04 mg/kg Pediatric: 0.02 mg/kg repeated every 5 min to max of 0.04 mg/kg <b>Nerve Agent Poisoning:</b> Adult: 2 mg IV/IO every 5 – 10 min prn (2 – 4 mg for moderate symptoms, 6 mg for severe symptoms). Pediatric: 0.05 mg/kg IM or 0.02 mg/kg IV every 5 – 10 min (0.05 mg/kg for moderate and 0.1 mg/kg for severe symptoms).
<b>Pregnancy Category</b>	<b>Class C</b> Uncertain safety – animal studies show adverse effect but no human studies exist