# CLASS: A

**PROTOCOL(S) USED IN:** Cardiac Dysrhythmia Bradycardia, Poisoning & Overdose, RSI (Pediatric), Organophospates

### PHARMACOLOGY AND ACTIONS:

- A. Muscarine-cholinergic blocking agent.
- B. Increases heart rate by blocking vagal response.
- C. Increases conduction through A-V node and increases ventricular sensitivity to atrial impulses.
- D. Reduces motility and tone of GI tract.
- E. Reduces action and tone of bladder which may cause urinary retention.
- F. Dilates pupils.

# **INDICATIONS:**

- A. Symptomatic bradycardias, 2<sup>nd</sup> and 3<sup>rd</sup> degree heart blocks and pacemaker failure.
- B. Sustained bradycardia induced during pediatric RSI
- C. Organophosphate and nerve gas poisoning.

# **CONTRAINDICATIONS:**

- A. Atrial fibrillation and atrial flutter
- B. Glaucoma

#### **SIDE EFFECTS AND NOTES:**

- A. Bradycardia may be beneficial in the AMI setting. Administer only if there are signs of hypoperfusion (chest pain, low blood perfusion, altered mental status).
- B. In organophosphate poisoning, massive doses of 10-20 mg or more may be needed.
- C. Titrate dose by watching patient response.

## **ADULT DOSING:**

# Symptomatic Bradycardia:

0.5 mg IV/IO push, repeat prn in 3-5 minute intervals to a maximum dose of 3 mg.

# **Organophosphate Poisoning:**

1-5 mg IV/IO push. Doses should be repeated every 5 minutes until excessive secretions and sweating have been controlled

# **PEDIATRIC DOSING:**

# Symptomatic Bradycardia:

**0.02 mg/kg IV/IO** Minimum single dose 0.1 mg, maximum single dose 0.5 mg. If no IV/IO may give 0.04 mg/kg ET. May repeat once.