

Sodium Bicarbonate – 20.340

CLASS A: Cardiac Arrest, Hydrogen Cyanide

CLASS B: Hyper K,
Crush injury, Tricyclic Antidepressant OD

PROTOCOL(S) USED IN: Cardiac Arrest protocols, Crush Injury/Entrapment, Hyperkalemia, Poisoning & Overdose, Hydrogen Cyanide Exposure

PHARMACOLOGY AND ACTIONS:

- A. An alkalotic solution which neutralizes acids found in the blood.
- B. Acidosis depresses cardiac contractility, and the cardiac response to catecholamine and makes the heart more likely to fibrillate.

INDICATIONS:

- A. To treat wide complex arrhythmias in:
 - a. Tricyclic Antidepressant OD
 - b. Suspected Hyperkalemia
 - c. Sodium Channel Blocker OD/effect
- B. Suspected Hyperkalemia

CONTRAINDICATIONS: None

SIDE EFFECTS AND NOTES:

- A. Should not be given in with catecholamine or calcium.
- B. May increase cerebral acidosis, especially in diabetics who are ketotic.
- C. In respiratory arrest without cardiac arrest, the treatment of choice is ventilation, no sodium bicarbonate unless cardiac arrest has occurred and the patient does not respond to adequate ventilation or other standard ACLS treatment modalities.

ADULT DOSING:

Cardiac arrest- 1 mEq/kg IV/IO initially followed by 0.5mEq/kg every 10 minutes

Tricyclic Overdose- 1 mEq/kg IV/IO

(If patient exhibits arrhythmias or a widening QRS complex). **Contact OLMC**

Hyper K/Crush Injury- 50 mEq IV/IO. **Contact OLMC**

PEDIATRIC DOSING:

All Indications: 1 mEq/kg IV/IO