

**CLASS A: Chest Pain & Respiratory Distress      CLASS B: Hypertensive Crisis**

**PROTOCOL(S) USED IN: Chest Pain, Hypertension, Respiratory Distress**

**PHARMACOLOGY AND ACTIONS:**

- A. Vasodilator
- B. Decreases peripheral resistance
- C. Generalized smooth muscle relaxation
- D. Reduces venous tone

**INDICATIONS:**

- A. Chest, arm, neck pain thought to be related to coronary ischemia.
- B. Angina
- C. Control of hypertension during hypertensive crisis
- D. Pulmonary edema

**CONTRAINDICATIONS:**

- A. Hypotension
- B. Hypovolemia
- C. Patients with known or suspected elevated ICP
- D. Aortic Stenosis
- E. Severe bradycardia or tachycardia
- F. Patients who have taken Viagra® (sildenafil citrate) or Levitra® (vardenafil HCl) within 24 hours, or who have taken Cilais® (tadalafil) within 48 hours. Contact OLMC for direction.

**SIDE EFFECTS AND NOTES:**

- A. Common side effects are headache, flushing, dizziness or burning under the tongue.
- B. Hypotension; IV line should be established prior to administration
- C. Reflex tachycardia
- D. Syncope
- E. May be effective in relieving chest pain due to esophageal spasm.
- F. Therapeutic effect is enhanced but adverse effects are increased when patient is upright.
- G. NTG loses potency easily; should be stored in a dark glass container with tight lid and not exposed to heat.

**ADULT DOSING:**

**0.4 mg SL** every 3-5 minutes or IV infusion starting at **5 mcg/min** and titrating to effect as long as **systolic BP ≥ 100 mmHg**. Increase IV rate by 10mcg/min every 5 minutes until pain subsides or BP trends lower.

**PEDIATRIC DOSING: Not recommended in pediatric patients.**