## Medical Control Guideline: DRUG REFERENCE – OLANZAPINE

Ref. No. 1317.32

#### Classification

Atypical anti-psychotic

# **LA County Prehospital Indications**

Agitation in a cooperative patient (able to self-administer medication)

## Other Common Indications (Not authorized for EMS administration in LA County)

None

#### **Adult Dose**

10 mg ODT given ONCE

## **Pediatric Dose**

10mg ODT given ONCE for pediatric patients longer than the length-based resuscitation tape

### **Mechanism of Action**

2<sup>nd</sup> generation anti-psychotic. Antagonizes serotonin 5-HT, dopamine, histamine and alpha-1 receptors. The precise mechanism is unknown but thought to be mediated through serotonin 5-HT and dopamine receptor sites.

#### **Pharmacokinetics**

Onset is 10-15 min; duration is hours

### **Contraindications**

Pregnancy

Dementia related psychosis

Patients ≤14 years AND on the length-based resuscitation tape

Ondansetron co-administration (QT prolongation)

#### Interactions

CNS Depressant (enhances sedative effect)

Blood pressure lowering agents (enhances hypotensive effect)

QT prolonging drugs (additive prolongation of QT may produce torsade depointes/polymorphic ventricular tachycardia)

#### **Adverse Effects**

Dry mouth

Dystonic reaction

**Drowsiness** 

GI upset

Headache

Orthostatic hypotension

Sedation

#### **Prehospital Considerations**

- Caution use in patients >70 years of age.
- May cause prolonged QT interval. Caution in patients with known prolonged QT syndrome or recent/simultaneous use of other QT-prolonging drugs.
- Should not be administered in patients known to be pregnant, regardless of gestational age.
- Patients with known schizophrenia or bipolar disorder that are symptomatic (i.e., hearing voices, paranoid thoughts) may benefit most for symptom management. May be administered safely for undifferentiated agitation.

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- Monitor airway and sedation if concomitant CNS depressant use is suspected as depressant effects may be enhanced.
- Look Alike; Sound Alike mediations are defined as those medications when written or verbally pronounced have the potential to lead to a medication error by mimicking the appearance or sound of another medication. The drug names Olanzapine and Ondansetron are similar enough to cause confusion. A second check of drug names should be performed before administration.

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