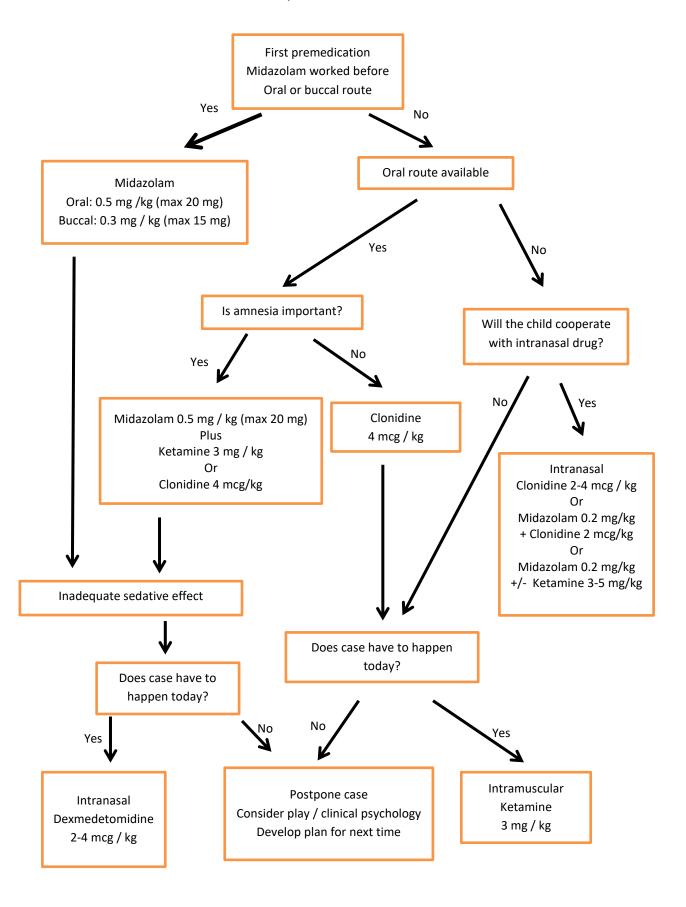
Sedative Premedication

	Oral				Nasal	
	1st line	2nd line/previous failure			Oral route not available	
Drug/dose	Midazolam 0.5mg/kg (max 20mg)	Clonidine 4mcg/kg (max dose 200mcg)	Midazolam 0.5mg/kg plus clonidine 4mcg/kg	Midazolam 0.5kg plus ketamine 3- 5 mg/kg	Clonidine 2-4 mcg/kg	Midazolam 0.2mg/kg +/-ketamine 3-5mg/kg
Onset	20 mins	45mins	30 mins	20 mins	30 mins	10 mins
Duration	1-2 hrs	Up to 6 hrs	Up to 6 hrs	1-3 hrs	Up to 6 hrs	1-3 hrs

- 1) The above sedative premeds aim to provide a combination of anxiolysis, sedation and amnesia.
- 2) Exercise caution when prescribing for patients with respiratory compromise, sleep disordered breathing, cardiovascular instability or potential drug interactions, e.g. antihypertensives, beta blockers.
- 3) Midazolam can cause a paradoxical reaction, consider giving it in combination with ketamine or clonidine in these patients. Midazolam stings intranasally.
- 4) Ketamine can cause excessive salivation (an antisialagogue may be needed, glycopyrrolate 10-20 mcg/ kg oral, 1-2 mcg/kg iv), nightmares (addition of benzodiazepine reduces incidence) and a dissociated state. Consider a quiet room during recovery.
- 5) Clonidine can cause significant bradycardia and hypotension, and will not reliably produce amnesia. Clonidine has a duration of up to 6 hours so may not be appropriate for afternoon day case use.
- 6) If neither the oral nor intranasal route is available and it is necessary that the procedure is carried out, consider intramuscular ketamine (3 mg/kg). You will need to order the 50 mg/ml preparation from pharmacy. Make sure it is given intramuscularly, as subcutaneous ketamine is much less effective.
- 7) If the desired effect is not achieved, postponing the case should be an option. Ensure that there is a plan arranged for next time (alternative premedication, play therapy, clinical psychology).
- 8) Intranasal Dexmedetomidine 2-4mcg/mg (max dose 200mcg) should be reserved as a rescue drug when the above options have failed, the procedure needs to be completed and clonidine is deemed inappropriate.

Sedative premedication flow chart



Author: A Tatman Version: 1.0 Review date: June 2021