

PHYSICIAN'S ORDERS
For IV Epinephrine (Adrenalin)
ER/ICU/Cath Lab Only

As a **VASOPRESSOR** or maintenance dose for IV Infusion. Protect from light, deteriorates rapidly. Do not use if brown or if sediment is present.

Do not mix with any other IV drugs or lines. Must be independently infused.

Another brand of drug identical in form and content may be dispensed unless checked. ☐

Drug Allergies

- Administer via central line if possible, or large vein.

Patient Weight _____ As a **VASOPRESSOR** or maintenance dose; 1 to 10mcg/min titrated to desired response.

Infusion mix 5mg Epinephrine (Adrenalin) in 250ml of D5W (more stable in D5W) or NSS (concentration 20 mcg/ml)

Epinephrine (Adrenalin) (5mg in 250 ml)

Dose mcg/min	Rate ml/hr	Dose mcg/min	Rate ml/hr	Dose mcg/min	Rate ml/hr
0.33	1	7	21	13.67	41
0.67	2	7.33	22	14	42
1	3	7.67	23	14.33	43
1.33	4	8	24	14.67	44
1.67	5	8.33	25	15	45
2	6	8.67	26	15.33	46
2.33	7	9	27	15.67	47
2.67	8	9.33	28	16	48
3	9	9.67	29	16.33	49
3.33	10	10	30	16.67	50
3.67	11	10.33	31	17	51
4	12	10.67	32	17.33	52
4.33	13	11	33	17.67	53
4.67	14	11.33	34	18	54
5	15	11.67	35	18.33	55
5.33	16	12	36	18.67	56
5.67	17	12.33	37	19	57
6	18	12.67	38	19.33	58
6.33	19	13	39	19.67	59
6.67	20	13.33	40	20	60

Obtain BP and heart rate every 5 min x 4 after Epinephrine started, then every 15 x 4 until stable then every 1hr.

Patient Care Implications: Often transitory, anxiety, dizziness, dyspnea, glycosuria, pallor, palpitations. Avoid administering in areas of limited blood supply (e.g., fingers, toes, etc.), or if peripheral vascular disease is present.

(NOTE: In Cardiac Arrest, may be given as a continuous infusion of 30mg in 250ml of D5W or NSS at 100ml/hr and titrate to response.)

MD Signature

Date

Time

Nurse # 1 verifying rate

Nurse # 2 verifying rate