Hillsborough County Fire Rescue STANDING ORDERS AND PROTOCOL

Section: Drug Reference Page 1 of 1

Subject: Succinylcholine (Anectine®)

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Succinylcholine

1. CLASSIFICATION

a. Depolarizing Neuromuscular Blocker

2. ACTIONS / DESCRIPTIONS

- a. Depolarizing paralytic that affects nicotinic acetylcholine muscle receptors
- Causes depolarization of the muscle membrane leading to fasiculations and some muscular contractions.
- c. Short duration of action

3. INDICATIONS

a. To provide short term paralysis as part of the RSI process

4. CONTRAINDICATIONS

a. Known allergy to medication

5. ADVERSE REACTIONS

- a. Hypotension
- b. Bradycardia and ventricular dysrhythmias
- c. Hyperkalemia
- d. Malignant hyperthermia
- e. May exacerbate hyperkalemia in trauma patients (hours post-trauma)

6. DRUG ACTION TIME

- a. Onset: less than 1 minute
- b. Duration: 4 10 minutes

7. INFORMATIONAL/DISCUSSION POINTS

- Neuromuscular blocking agents will produce respiratory paralysis (intubation & ventilatory support MUST be accomplished).
- b. No effect on the consciousness or pain level of the patient (consider the use of analgesics).
- c. Initial muscle fasiculations.
- d. Premedication with atropine should be strongly considered in pediatrics and with repeat doses in the adult patient.
- e. Premedication with lidocaine may blunt any increase in ICP associated with intubation (used when etomidate is contraindicated).
- f. Children are not as sensitive to succinylcholine on a weight basis and may require higher doses.
- g. Some antibiotics may enhance blocking action.
- h. Effects are not reversible (other than by time).
- i. Some patients may have prolonged paralysis due to low levels of cholinesterase.