

OLANZAPINE (Zyprexa)

EM SAC JULY 2025

ACTION: Atypical (second-generation) antipsychotic

- Mechanism of Action: 2nd 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: 10-15 minutes; duration is hours

INDICATIONS:

- For anxious, cooperative patients with a suspected psychiatric history or stimulant induced psychosis experiencing symptoms behavioral health emergency (e.g. auditory hallucinations etc)

CONTRAINdications:

- Known Pregnancy
- Dementia related psychosis
- Patients < 14 years AND on the length-based resuscitation tape

ADVERSE POTENTIAL SIDE EFFECTS:

- Dry mouth
- Dystonic reaction
- Drowsiness
- GI Upset
- Headache
- Orthostatic hypotension
- Sedation

ADULT DOSE/ROUTE

→ 10mg ODT given once

PEDIATRIC DOSE DOSE/ROUTE

→ Children ≥14 year, 10mg ODT given once for pediatric patients longer than the length-based

NOTES:

- Caution use in patients >60 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.
- Avoid 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.
- Monitor airway and sedation if concomitant CNS depressant use is suspected as depressant effects may be enhanced.
- Look alike; sound alike medications 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

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ondansetron are similar enough to cause confusion. A second check of drug names
should be performed before administration.

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