



Indications:

- Facilitation of painful or frightening interventions (moderate sedation/dissociation)
- Reduction/splinting of fractures (moderate sedation/dissociation)
- Cardioversion/Transcutaneous Pacing of the awake patient (moderate sedation/dissociation)
- CPAP Anxiolysis (mild sedation)
- Control of the violent or agitated patient (moderate sedation/dissociation)
- Anxiolysis (mild sedation)

Contraindications:

- Medication specific hypersensitivity/allergy
- Management by less aggressive therapy

General:

- The following list of medications are available for the provider to administer when sedation is indicated. There is no single medication that is ideal for all situations. The selection of medication should be based on the provider's clinical impression of the patient, the patient's expected clinical course, and available resources. See individual Medication Reference for contraindications, dosing, and further information.

Equipment:

- All equipment necessary to the procedure (splints, restraints, combo pads) should be at the patient's side.
- All equipment for Airway Management should be readily available.
- Full monitoring capabilities should be utilized as soon as patient condition allows.

Medications:

- **Ketamine** is generally preferred as a first line medication in Excited Delirium, CPAP Anxiolysis, cardioversion, rapid sequence intubation, and extreme agitation. Ketamine as a single agent provides analgesia, sedation, and at higher doses dissociation. Ketamine has positive bronchodilatory effects and positive hemodynamic effects which make it desirable in cases when sedation is required in the hypotensive, or respiratory patient.
- **Midazolam** is a short-acting benzodiazepine and is appropriate for mild/moderate sedation and typically used when anxiolysis is the main objective. Produces anxiolysis and amnesia with no analgesic properties.

Considerations:

- None