

San Mateo County Adult Drug List *See San Mateo County Pediatric Drug Card for Pediatric Drug Doses

Drug	Dose and Route	Indication	Protocols Included In
Activated Charcoal	• 50 gm PO	Ingestion	POISONING AND OVERDOSE POISONING AND OVERDOSE - PEDIATRIC
Adenosine	G mg 1st dose, 12 mg if needed (both rapid) IV Push	Supraventricular Tachycardia	DYSRHYTHMIAS: NARROW-COMPLEX TACHYCARDIA DYSRHYTHMIAS: WIDE-COMPLEX TACHYCARDIA WITH A PULSE DYSRYTHMIAS: TACHYCARDIA - PEDIATRIC
Albuterol	 2.5-5 mg normal saline via nebulizer May repeat as needed 	Bronchoconstriction/wheezing Crush Injury	ALLERGIC REACTIONS RESPIRATORY DISTRESS TRAUMA EVALUATION AND MANAGEMENT: ADULT AND PEDIATRIC PATIENTS ALLERGIC REACTION - PEDIATRIC PEDIATRIC RESPIRATORY DISTRESS SUSPECTED ACUTE CORONARY SYNDROME
Aspirin	• 324 mg po (chewed)	Chest pain of cardiac origin	SUSPECTED ACUTE CORONARY SYNDROME
Atropine Sulfate	0.50 mg IV/IO push, repeat q 3-5 minutes to a max dose of 3 mg	Symptomatic bradycardia	DYSRHYTHMIAS: SYMPTOMATIC BRADYCARDIA POISONING AND OVERDOSE DYSRHYTHMIAS: BRADYCARDIA - PEDIATRIC
	2 mg IV/IO push, repeat q 2-5 minutes until respiratory symptoms improve	Organophosphate poisoning	POISONING AND OVERDOSE - PEDIATRIC
Calcium Chloride	1 gm slow IV/IO	Suspected hyperkalemia and widened QRS with hypotension Calcium channel blocker overdose with hypotension	CARDIAC ARREST: PULSELESS ELECTRICAL ACTIVITY (PEA) and ASYSTOLE CARDIAC ARREST: VENTRICULAR FIBRILLATION/PULSELESS VENTRICULAR TACHYCARDIA DYSRHYTHMIAS: WIDE-COMPLEX TACHYCARDIA WITH A PULSE DYSRHYTHMIAS: OVERVIEW POISONING AND OVERDOSE POISONING AND OVERDOSE - PEDIATRIC
		Crush Injury	TRAUMA EVALUATION AND MANAGEMENT: ADULT AND PEDIATRIC PATIENTS
Dextrose 10% (D10W)	10-15 gm Dextrose 10% IV/IO drip (repeat). Administer 10 g (100 ml) IV/IO for blood glucose <80 mg/dL. May repeat at 15 g (150 ml) and reassess the patient. May repeat as indicated	Symptomatic hypoglycemia	ALTERED MENTAL STATUS/SEIZURE CARDIAC ARREST: PULSELESS ELECTRICAL ACTIVITY (PEA) and ASYSTOLE POISONING AND OVERDOSE ALTERED MENTAL STATUS – PEDIATRIC POISONING AND OVERDOSE - PEDIATRIC PEDIATRIC SEIZURES
Diphenhydramine (Benadryl)	25-50 mg IV/IM/IO up to 50 mg total	Urticaria or allergic reaction Dystonic reaction	CARDIAC ARREST: PULSELESS ELECTRICAL ACTIVITY (PEA) and ASYSTOLE POISONING AND OVERDOSE ALTERED MENTAL STATUS – PEDIATRIC POISONING AND OVERDOSE - PEDIATRIC PEDIATRIC SEIZURES
Dopamine	400 mg in 250 ml NS infuse at 5-20 mcg/kg/min titrated to response	Persistent hypotension unrelated to hypovolemia	SUSPECTED ACUTE CARDIOGENIC SHOCK DYSRHYTHMIAS: SYMPTOMATIC BRADYCARDIA RESPIRATORY DISTRESS CARDIAC ARREST: VENTRICULAR FIBRILLATION/PULSELESS VENTRICULAR TACHYCARDIA
Epinephrine 1:1,000	• 0.3 mg/0.3 ml IM	Moderate to severe allergic reactions Severe asthma unresponsive to Albuterol	ALLERGIC REACTIONS RESPIRATORY DISTRESS ALLERGIC REACTION - PEDIATRIC PEDIATRIC RESPIRATORY DISTRESS
Epinephrine 1:10,000	0.01 mg/kg IV/IO may repeat every 5 min. (max 0.3mg) 1mg IV push	Severe allergic reaction Cardiac Arrest	ALLERGIC REACTIONS CARDIAC ARREST: PULSELESS ELECTRICAL ACTIVITY (PEA) and ASYSTOLE CARDIAC ARREST: VENTRICULAR FIBRILLATION/PULSELESS VENTRICULAR TACHYCARDIA NEONATAL RESUSCITATION

				ALLERGIC REACTION - PEDIATRIC CARDIAC ARREST - PEDIATRIC-ASYSTOLE/PEA
				PEDIATRIC CARDIAC ARREST/ VENTRICULAR FIBRILLATION/ PULSELESS VENTRICULAR TACHYCARDIA DYSRHYTHMIAS: BRADYCARDIA - PEDIATRIC
Glucagon	•	1 mg IM 1-2 mg IV/IO if IV access is not	Symptomatic Hypoglycemia	ALTERED MENTAL STATUS SEIZURES
		immediately available. May repeat once	For symptomatic beta blocker overdose	POISONING AND OVERDOSE
		after 10 minutes if blood glucose is	, ,	ALTERED MENTAL STATUS – PEDIATRIC POISONING AND OVERDOSE - PEDIATRIC
		<80mg/dl.		PEDIATRIC SEIZURES
				SHOCK – PEDIATRIC
Glucose paste	•	24 gm po (one tube)	Hypoglycemia	POISONING AND OVERDOSE
Glucola	•	50 gm	Hypoglycemia	ALTERED MENTAL STATUS – PEDIATRIC
Morphine Sulfate	•	Morphine sulfate 2-5 mg slow increments	Extremity trauma	ABDOMINAL PAIN NON-TRAUMATIC ADULT PAIN ASSESSMENT AND MANAGEMENT
		q 10 minute to max of 20 mg IV push as	Cardiac chest pain	BITES AND STINGS
		needed for discomfort. May repeat in 2-5	Pulmonary edema	BURNS
		mg increments q 5 min to max of 20 mg.	Discomfort of transcutaneous pacing	SUSPECTED ACUTE CORONARY SYNDROME
		If unable to establish an IV up to 5 mg of	For treatment of pain when indicated	DECOMPRESSION ILLNESS DYSRHYTHMIAS: SYMPTOMATIC BRADYCARDIA
		MS may be administered IM. May repeat		HYPOTHERMIA
		in up to 5 mg.	Not indicated in:	SNAKEBITE
			Systolic BP < 90	TRAUMA EVALUATION AND MANAGEMENT: ADULT AND PEDIATRIC PATIENTS
			Child birth or active labor	PAIN ASSESSMENT AND MANAGEMENT - PEDIATRIC BURNS - PEDIATRIC
			Sudden onset of severe headache	BONNS - PEDIATNIC
	•	Max dose of 10 mg for pulmonary edema	Altered mental status	RESPIRATORY DISTRESS
			Closed head injury	
Lidocaine 2% for	•	1.0-1.5 mg/kg IV push/IO, may repeat x 1	Persistent Ventricular Fibrillation	CARDIAC ARREST: VENTRICULAR FIBRILLATION/PULSELESS VENTRICULAR TACHYCARDIA
cardiac use		1.0-1.5 mg/kg IV push may repeat 0.5		PEDIATRIC CARDIAC ARREST/ VENTRICULAR FIBRILLATION/ PULSELESS VENTRICULAR TACHYCARDIA
		mg/kg to a max of 3mg/kg		
		3. 3	Pain Management for Interossious	INTEROSSEOUS INFUSION-ADULT AND PEDIATRIC
	•	Adult: 40 mg-(2ml), Ped-0.5 ml/kg	Infusion in alert patients	
Midazolam	•	1-2 mg IV or IM, may repeat every 5 min	Persistent seizures with respiratory	ALTERED MENTAL STATUS
(Versed)		up to a max of 10 mg. Monitor breathing.	compromise	DYSRHYTHMIAS: SYMPTOMATIC BRADYCARDIA
, ,			·	DYSRHYTHMIAS: NARROW-COMPLEX TACHYCARDIA DYSRHYTHMIAS: WIDE-COMPLEX TACHYCARDIA WITH A PULSE
			For amnesic effect pacing or cardioversion	DYSRYTHMIAS: TACHYCARDIA - PEDIATRIC
				OBSTETRICAL EMERGENCIES/CHILDBIRTH
				POISONING AND OVERDOSE - PEDIATRIC
Naloxone	_	4.2 11/114/10	Suspected opiate overdose with	PEDIATRIC SEIZURES Altered Mental Status/ Seizure
	•	1-2 mg IV/IM/IO		POISONING AND OVERDOSE
(Narcan)			hypoventilation	POISONING AND OVERDOSE - PEDATRIC
				ALTERED MENTAL STATUS – PEDIATRIC
Nitroglycerine	•	0.4 mg SL repeat as need every 5 min	Chest pain/discomfort of suspected acute	SUSPECTED ACUTE CORONARY SYNDROME RESPIRATORY DISTRESS
			coronary syndrome	
Ondansetron	•	4 mg ODT (Oral Dissolving Tablet). May	Nausea and vomiting	NAUSEA AND VOMITING PEDIATRIC NAUSEA AND VOMITING
(Zofran)		repeat every 15 min to a total of 12 mg.		PEDIATRIC NAUSEA AND VOIVITING
	•	PEDS see chart in policy		
Sodium	•	1 mEq/kg IV/IO	Tricyclic antidepressant overdose	CARDIAC ARREST: PULSELESS ELECTRICAL ACTIVITY (PEA) and ASYSTOLE
Bicarbonate			Cardiac Arrest with Renal Failure	CARDIAC ARREST: VENTRICULAR FIBRILLATION/PULSELESS VENTRICULAR TACHYCARDIA DYSRHYTHMIAS: OVERVIEW
			Suspected hyperkalemia and widened QRS	DYSKHYTHMIAS: OVERVIEW DYSKHYTHMIAS: WIDE-COMPLEX TACHYCARDIA WITH A PULSE
			with hypotension	POISONING AND OVERDOSE
			Crush Injury	POISONING AND OVERDOSE - PEDIATRIC
			J: 1	TRAUMA EVALUATION AND MANAGEMENT: ADULT AND PEDIATRIC PATIENTS