

## San Mateo County Adult Drug List (March 2019) \*See San Mateo County Pediatric Drug Card for Pediatric Drug Doses

Drug		Dose and Route	Indication	Protocols Included In
Activated Charcoal	٠	50 gm PO	Ingestion	POISONING & OVERSODE
Adenosine	•	6 mg - 1st dose, 12 mg if needed (both rapid) IV Push followed by 20 ml saline flush	Supraventricular Tachycardia	CARDIAC DYSRHYTHMIA-TACHYCARDIA
Albuterol	•	2.5-5 mg normal saline via nebulizer May repeat as needed.	Bronchoconstriction/wheezing Crush Injury	ALLERGIC REACTION RESPIRATORY DISTRESS TRAUMA EVALUATION AND MANAGEMENT
Aspirin	٠	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	CARDIAC DYSRHYTHMIA-BRADYCARDIA (SYMPTOMATIC) POISONING OVERDOSE
	•	2 mg IV/IO push, repeat q 2-5 minutes until respiratory symptoms improve	Organophosphate poisoning	
Calcium Chloride	•	1 gm slow IV/IO	Suspected hyperkalemia and widened QRS with hypotension Calcium channel blocker overdose with hypotension Crush Injury	CARDIAC ARREST: ASYSTOLE/PEA CARDIAC ARREST: VENTRICULAR FIBRILLATION/PULSELESS VENTRICULAR TACHYCARDIA CARDIAC DYSRHYTHMIA-TACHYCARDIA (WIDE COMPLEX) POISONING AND OVERDOSE TRAUMA EVALUATION AND MANAGEMENT
Dextrose 10% (D10W)	•	10-15 gm Dextrose 10% IV/IO drip (repeat). Administer 10 gm (100 ml) IV/IO for blood glucose <80 mg/dL. May repeat at 15 gm (150 ml) and reassess the patient. May repeat as indicated.	Symptomatic hypoglycemia	ALTERED MENTAL STATUS/SEIZURE CARDIAC ARREST: NON-TRAUMATIC POISONING AND OVERDOSE
Diphenhydramine (Benadryl)	•	25-50 mg IV/IM/IO up to 50 mg total	Urticaria or allergic reaction Dystonic reaction	ALLERGIC REACTION POISONING AND OVERDOSE ALTERED MENTAL STATUS
Dopamine	•	400 mg in 250 ml NS infuse at 5-20 mcg/kg/min titrated to response	Persistent hypotension unrelated to hypovolemia	CARDIAC ARREST-POST ROSC RESPIRATORY DISTRESS CARDIAC DYSRHYTHMIA-BRADYCARIA (SYMPTOMATIC)
Epinephrine 1:1,000	•	0.3 mg/0.3 ml IM	Moderate to severe allergic reactions Severe asthma unresponsive to Albuterol	ALLERGIC REACTION RESPIRATORY DISTRESS
Epinephrine 1:10,000	•	0.3 mg IV/IO may repeat every 5 min. 1 mg IV/IO may repeat every 5 mins to a max total dose of 3 mg in cardiac arrest	Severe allergic reaction Cardiac arrest	ALLERGIC REACTION CARDIAC ARREST: ASYSTOLE/PEA CARDIAC ARREST: VENTRICULAR FIBRILLATION/PULSELESS VENTRICULAR TACHYCARDIA REFRACTORY VENTRICULAR FIBRILLATION/PULSELESS VENTRICULAR TACHYCARDIA (ECMO PILOT)
Fentanyl Not indicated in: Systolic BP < 90 Child birth or active labor Sudden onset of severe headache Altered mental status Closed head injury	•	<ul> <li>IV/IO 50 mcg slowly over 2 min, may repeat q 5 min to a maximum dose of 200 mcg.</li> <li>IM 50 mcg, may repeat in 10 minutes x1</li> <li>IN 50 mcg, half dose in each nare, one dose only. No repeating for IN dose.</li> </ul>	Extremity trauma Cardiac chest pain Pulmonary edema Discomfort of transcutaneous pacing For treatment of pain when indicated	ABDOMINAL PAIN NON-TRAUMATIC PAIN ASSESSMENT AND MANAGEMENT BITES AND STINGS BURNS SUSPECTED ACUTE CORONARY SYNDROME DECOMPRESSION ILLNESS CARDIAC DYSRHYTHMIAS-BRADYCARDIA (SYMPTOMATIC) SNAKEBITE TRAUMA EVALUATION AND MANAGEMENT END OF LIFE CARE

Glucagon	•	1 mg IM if IV is not immediately available. May repeat once after 10 minutes if blood glucose is <80mg/dl. 1-3 mg IV/IO/IM	Symptomatic Hypoglycemia Symptomatic Beta Blocker Overdose	ALTERED MENTAL STATUS/ SEIZURES POISONING AND OVERDOSE
Glucose paste	•	24 gm po (one tube)	Hypoglycemia	POISONING AND OVERDOSE
Glucola	٠	50 gm po	Hypoglycemia	ALTERED MENTAL STATUS
Lidocaine 2% for cardiac use	•	1.0-1.5 mg/kg IV/IO, may repeat x 3 at 0.5 mg/kg IV/IO to a max of 3mg/kg	Persistent Ventricular Fibrillation	CARDIAC ARREST: VENTRICULAR FIBRILLATION/PULSELESS VENTRICULAR TACHYCARDIA INTRAOSSEOUS INFUSION
	•	IO 40 mg (2ml)	Pain Management for Intraosseous Infusion in alert patients	
Midazolam (Versed)	•	<ul> <li>1-2 mg IV/IM/IO may repeat every 5 min up to a max of 10 mg. Monitor breathing</li> <li>IN 1-5 mg, may repeat in 10 minutes, max dose 10 mg</li> </ul>	Persistent seizures with respiratory compromise For amnesic effect pacing or cardioversion For behavioral emergencies with concern for safety	ALTERED MENTAL STATUS CARDIAC DYSRHYTHMIAS: BRADYCARDIA (SYMPTOMATIC) CARDIAC DYSRHYTHMIAS: NARROW-COMPLEX TACHYCARDIA CARDIAC DYSRHYTHMIAS: WIDE-COMPLEX TACHYCARDIA WITH A PULSE OBSTETRICAL EMERGENCIES/CHILDBIRTH BEHAVIORAL EMERGENCIES AFTER BASE HOSPITAL CONTACT
Naloxone (Narcan)	•	1-2 mg IV/IM/IO IN 2 mg split into two doses, 1 mg each nare	Suspected opiate overdose with hypoventilation	ALTERED MENTAL STATUS/SEIZURE POISONING AND OVERDOSE END OF LIFE (AVOID)
Nitroglycerine	•	0.4 mg SL repeat as need every 5 min	Chest pain/discomfort of suspected acute coronary syndrome	SUSPECTED ACUTE CORONARY SYNDROME RESPIRATORY DISTRESS
Ondansetron (Zofran)	•	4 mg ODT (Oral Dissolving Tablet) or IV. May repeat every 15 min to a total of 12 mg.	Nausea and vomiting	NAUSEA AND VOMITING
Sodium Bicarbonate	•	1 mEq/kg IV/IO	Tricyclic antidepressant overdose Cardiac Arrest with Renal Failure Suspected hyperkalemia and widened QRS with hypotension Crush Injury	CARDIAC ARREST: ASYSTOLE & PEA CARDIAC ARREST: VENTRICULAR FIBRILLATION/PULSELESS VENTRICULAR TACHYCARDIA CARDIAC DYSRHYTHMIAS: WIDE-COMPLEX TACHYCARDIA WITH A PULSE POISONING AND OVERDOSE TRAUMA EVALUATION AND MANAGEMENT