County of San Luis Obispo Public Health Department

Epinephrine 1:10,000 (Adrenalin®)

Division: Emergency Medical Services Agency Effective Date: 08/01/2018

EPINEPHRINE 1:10,000 (Adrenalin®)

Classification: Sympathomimetic agent (catecholamine)

Actions:

- 1. Increases cardiac output due to increased inotropy, chronotropy, dromotropy, and AV conduction (b1 effect)
- 2. Relaxes smooth muscles of the respiratory tract (b2 effect)
- 3. Increases systolic blood pressure due to increased cardiac output (b1effect) and vasoconstriction (a effect)
- 4. Increases coronary perfusion during CPR by increasing aortic diastolic pressure

Indications:

- 1. Cardiopulmonary arrest
- 2. Anaphylaxis
- 3. Respiratory distress with wheezing
- 4. Pediatric symptomatic bradycardia
- 5. Neonatal resuscitation
- 6. Suspected croup or epiglottitis

Contraindications:

- 1. Use with caution in pregnancy.
- 2. Consider base physician consultation if possible if the patient has a history of MI, angina or hypertension.

Adverse Effects:

CardiovascularNeurologicalTachycardiaAnxietyHypertensionDizziness

Chest pain Headache Palpitations Tremors

Ventricular fibrillation Seizures

Gastrointestinal Nausea/vomiting

Administration:

ADULT DOSE

- 1. Cardiac Arrest: 1 mg IVP/IO, may repeat every 3-5 minutes
- 2. **Anaphylaxis: base physician order only** 0.01 mg/kg, slow IVP titrated, not to exceed 0.5 mg
- 3. **Asthma: base physician order only** 0.01 mg/kg, slow IVP titrated, not to exceed 0.5 mg

PEDIATRIC DOSE

1. **Cardiac Arrest:** 0.01 mg/kg (0.1 ml/kg) slow IVP/IO, not to exceed 0.3 mg per dose, repeat every 3-5 minutes

EPINEPHRINE 1:10,000 (Adrenalin®) - continued

- 2. **Symptomatic Bradycardia:** 0.01 mg/kg (0.1 ml/kg) slow IVP/IO, not to exceed 0.3 mg per dose, repeat every 3-5 minutes
- 3. **Anaphylaxis: base physician order only** 0.01 mg/kg (0.1 ml/kg) slow IVP titrated, not to exceed 0.3 mg
- 4. **Respiratory Distress: base physician order only** 0.01 mg/kg (0.1 ml/kg) slow IVP titrated, not to exceed 0.3 mg

Notes:

- Use Epinephrine with caution in older patients. If a patient is clearly in anaphylaxis, this is the drug of choice, even in older patients. If doubt exists, initiate early base hospital contact, prior to drug therapy.
- Tachycardia is not a contraindication to Epinephrine.
- Base physician order for Epinephrine 1:10,000, 0.01mg/kg titrated IV not to exceed 0.5mg for circulatory collapse from anaphylaxis.
- IM administration is with 1-1½" needle in anterior/lateral thigh or deltoid.