County of San Luis Obispo Public Health Department Ketamine (Ketalar®)

Division: Emergency Medical Services Agency Effective Date: 01/01/2025

# **Ketamine Hydrochloride (Ketalar®)**

Classification: Nonopioid Analgesic (sub-dissociative doses)

**Actions:** In sub-dissociative doses, provides analgesia by non-competitively blocking

NMDA receptors to reduce glutamate release and by binding to sigma-opioid

receptors.

### Indications: Moderate to Severe pain due to:

- 1. Multisystem trauma with head, thoracic, or abdominal injuries.
- 2. Significant extremity trauma, dislocations, or burns.
- 3. Acute pain management for medical patients.
- 4. Pain management substitute for patients with an opioid tolerance.

#### Contraindications:

- 1. Conditions in which an increase in blood pressure would be hazardous (see notes)
- 2. Hypersensitivity
- 3. Known history of schizophrenia
- 4. Acute Coronary Syndrome
- 5. Pregnancy

Precautions: 1. History of severe Coronary Artery Disease

Adverse Effects: >10%

Cardiovascular: Tachycardia, hypertension, increase in cardiac output

**Neurological**: Dizziness, Tonic-Clonic Movement (non-seizure)

1-10%

**Cardiovascular**: Bradycardia, hypotension

**Neurological**: Dysphoria, partial dissociation, nystagmus

<1%

**Anaphylaxis**, arrhythmia, hypersalivation, hypertonia, laryngospasm\*, respiratory

depression/apnea, dysuria

# Administration: <u>ADULT DOSE</u>

#### **Pain Management**

1. 0.3 mg/kg (max of 30mg) in 100mL Normal Saline, administer IV/IO over 10 minutes one time dose.

2. 0.5mg/kg (max of 40mg) IM

When mixing Ketamine into 100mL bag, **label the bag** with "Ketamine/mg amount".

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### PEDIATRIC DOSE

\*\*\*Ketamine usage is not allowed for pediatric patients\*\*\*

**Onset:** IV onset 30-60 seconds, peak in less than 5 minutes.

**Duration:** Distribution half-life: 15 minutes

Duration of analgesia: 20-45 minutes

Notes:

 Risk of adverse neurological events is decreased with sub-dissociative doses and slow rate of administration.

Mix adult dose of ketamine in 100mL bags of normal saline.

- Ketamine may cause a slight increase in blood pressure and shall be avoided in hypertensive emergencies, dissecting aneurysms, hypertensive heart failure, and acute coronary syndrome.
- Ketamine should be considered as first line analgesic agent when fentanyl is contraindicated due to hypotension, pathology or injury inhibiting respiration, evidence of hypovolemic/hemorrhagic shock, or multisystem trauma with high potential for internal hemorrhage.
- Ketamine may be considered as preferable to fentanyl for patients that may have opioid tolerance due to habituation or addiction, and in patients where fentanyl use has other significant precautions.
- Ketamine is a potent anesthetic and dissociative agent in higher doses and is associated with higher incidents of significant adverse effects. This is <u>NOT</u> an approved use for prehospital care in the County of San Luis Obispo.