

| DRUG                  | STANDARD                                    | CONC.            | INITIATION/BOLUS  | TITRATION RANGE  | CART? | NOTES   |
|-----------------------|---|------------------|---|--|-------|---|
| <b>Amiodarone</b>     | B: 150mg /100mL D5W<br>gtt: 450mg/250mL D5W | 1.8 mg/mL<br>gtt | 150mg IV bolus over 10min, then 1mg/min x6h, then 0.5mg/min thereafter  |  | Y     | Braun bag or glass, Filter. Will ↓ BP.                              |
| <b>Argatroban</b>     | 250mg/250mL NS                              | 1000 mcg/mL      | Initiate @ 2mcg/kg/min if normal hepatic fxn. Use 0.3-0.5 mcg/kg/min if hepatic dysfxn. Max 10mcg/kg/min              |  | N     | Protect from light. Use TBW for wt.                                 |
| <b>Bivalirudin</b>    | 250mg/50mL D5W**                            | 5 mg/mL          | 0.75 mg/kg bolus (PCI)  | 1.75 mg/kg/hour during procedure and up to 4 hours postprocedure if needed | N     | Reduce infusion to 1mg/kg/hr if CrCl<30                             |
| <b>Bumetanide</b>     | 10mg/100mL D5W                              | 0.1 mg/mL        | 1mg IV bolus  | 0.5 – 2 mg/hr infusion   | N     | Monitor for myalgia, met alkalosis, ↑SCr                            |
| <b>Diltiazem</b>      | 125mg/125mL NS*                             | 1 mg/mL          | Bolus: 0.25mg/kg over 2min, start gtt@5mg/hr. May rebolus 0.35  | ↑ by 5mg/hr q15m to target HR, max 15mg/hr                                 | N     | MR bolus @ 0.35 mg/kg. EKG, HR                                      |
| <b>Dobutamine</b>     | 500mg/250mL D5W (premix) *                  | 2000 mcg/mL      | Start @2.5mcg/kg/min. Titrate 2mcg/kg/min q15m to goal CI, same rate for taper, max 20, usual 2.5-20                  |  | N     |   |
| <b>Dopamine</b>       | 800mg/250mL D5W (premix) *                  | 3200 mcg/mL      | Start @ 5mcg/kg/min. Titrate 2mcg/kg/min q15m to goal SBP, same rate for taper, max20, usual 2-20                     |  | Y     | Central line ONLY – mean pressor dose =15                           |
| <b>Drotrecogin</b>    | 20mg/200mL NS                               | 100 mcg/mL       | No bolus  | 24 mcg/kg/hr X 96 hrs (use actual BW)                                      | N     | Stop 2hr before major proced., 12h to restart                       |
| <b>Epinephrine</b>    | 10mg/250mL NS*                              | 40 mcg/mL        | Start @ 1mcg/min. Titrate 1mcg/min q15 to goal SBP, same taper, no max, usual 1-10 mcg/min                            |  | Y     | Central line ONLY   |
| <b>Eptifibatide</b>   | 75mg/100mL (premix)                         | 750 mcg/mL       | 180mcg/kg bolus (max 22.6mg); repeat c/ PCI   | 2mcg/kg/min (max 15mg/hr); 1mcg/kg/min CrCl<50 (SCr>2)                     | N     | Up to 72 hrs ACS 18-24hr post PCI                                   |
| <b>Esmolol</b>        | 2500mg/250mL NS (premix)                    | 10 mg/mL         | 500 mcg/kg over 1min (optional)   | Start @50 mcg/kg/m, ↑by 50 q5-10m to goal HR, max 300, usual 50-200        | N     | Can cause pain at injection site                                    |
| <b>Fentanyl</b>       | 2500mcg/250mL NS (premix)                   | 10 mcg/mL        | 25-100 mcg bolus  | Titrate infusion 25 – 200 mcg/hr to pain scale.                            | N     | Use IBW for wt based dosing   |
| <b>Furosemide</b>     | 500mg/100mL D5W**                           | 5 mg/mL          | 0.1 mg/kg bolus. Start 5-20 mg/hr and double q2h. Usual 20-160mg/hr.  |  | N     | Ototox @ high rates   |
| <b>Haloperidol</b>    | 100mg/100mL D5W                             | 1 mg/mL          | 1-10 mg q20m, then 25% of max dose q6h. Gtt 3-20 mg/hr  |  | N     | Monitor BP, QTc, EPS  |
| <b>Heparin</b>        | 25000units/500mL D5W (premix) *             | 50 units/mL      | Per pharmacy protocol. For MI/DVT/PE, the protocol uses 80units/kg bolus and 18units/kg/hr drip start (adjBW, CF=0.4) |  | N     | Use 16units/kg/hr for age >70 yo                                    |
| <b>Hydrocortisone</b> | 250mg/250mL NS*                             | 1 mg/mL          | 200 mg bolus  | 10 mg/hr over 7days  | N     | For CAP, unlabeled use  |
| <b>Insulin</b>        | 100units/100mL NS                           | 1 unit/mL        | Start @ 0.5 – 1 units/hr, titrate to BG 80-120 (q1h BG checks)  |  | N     |   |
| <b>Isoproterenol</b>  | 2mg/250mL NS*                               | 8 mcg/mL         | Start 1 mcg/min, titrate by 1 q15m to HR same taper, max 10, usual 2-10   |  | N     | Not for bradycardia unless atropine, pacing, DA, or Epi didn't work |
| <b>Labetalol</b>      | 200mg/200mL NS*                             | 1 mg/mL          | 20-80mg IVP q15min  | Usual 0.5 – 3 mg/min   | N     |   |
| <b>Lepirudin</b>      | 100mg/250mL NS*                             | 0.4 mg/mL        | 0.4 mg/kg IVP (max 44 mg)   | Initiate 0.15mg/kg/hr (16.5mg/h max), then adjust per aPTT                 | N     | Decrease in renal dysfx   |
| <b>Lidocaine</b>      | 2000mg/250mL D5W/NS                         | 8 mg/mL          | 1 – 1.5mg/kg IVP. MR in 5-10m @ 0.5-0.75mg/kg. NTE 3mg/kg   | 1 – 4 mg/min infusion  | Y     | Monitor for convulsions/CNS sx                                      |
| <b>Lorazepam</b>      | 40mg/250mL D5W                              | 0.16 mcg/mL      | 0.02-0.06 mg/kg q2-6h   | 0.5 – 4 mg/hr  | N     | Monitor BP,RR, sOsm   |

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| Methylprednisolone | 1000mg/500mL NS           | 20 mg/mL      | 30 mg/kg bolus for SCI  | 5.4 mg/kg/hr x23hrs  | N                  | Monitor BP                                     |
| Midazolam          | 100mg/100mL NS (premix)   | 1 mg/mL       | 2 – 5 mg bolus  | 2 – 20 mg/hr   | N                  | Monitor BP, RR                                 |
| Milrinone          | 20mg/100mL D5W (premix) * | 200 mcg/mL    | 50 mcg/kg over 10min (no bolus recommended d/t decreased BP)  | Maint 0.375 mcg/kg/min. Titrate 0.125 q15m for goal CI, same taper. Max 0.75                                       | N                  | Accum. in renal dysfxn. More ADR @ >0.5mcg/k/m |
| Morphine           | 100mg/100mL NS (premix)   | 1 mg/mL       | Bolus 1-10mg  | Titrate drip 1- 20 mg/hr to pain scale   | N                  | Consider hydro-morphine in renal pts           |
| Naloxone           | 2mg/250mL NS              | 8 mcg/mL      | 0.4 – 2 mg q2-3m, (likely won't work if no response p 10mg)   | Usual 0.2 – 6.25 mg/hr. For OD, infuse at 2/3rds of effective bolus dose hourly. Give another ½ bolus after 15min. | N                  | Monitor RR, BP                                 |
| Nesiritide         | 1500mcg/250mL D5W**       | 6 mcg/mL      | 2 mcg/kg bolus initially, 1mcg/kg for rate increases  | 0.01 mcg/kg/min (increase q>3h by 0.005 to max of 0.03)  | N                  | Use boluses when incr. Do not start @ >0.01    |
| Nicardipine        | 26mg/260mL NS*            | 100 mcg/mL    | Initiate 5 mg/hr. Titrate 2.5 mg/hr q15m to goal SBP, same taper. Max 15 mg/hr, usual 5-15 mg/hr.   |  | N                  | Okay in D5W but often used in stroke           |
| Nitroglycerin      | 50mg/250mL D5W glass      | 200 mcg/mL    | 5 mcg/min, increase by 5 – 20 mcg/min q5min up to 200 mcg/min   |  | N                  | Increases ICP                                  |
| Nitroprusside      | 50mg/250mL D5W**          | 200 mcg/mL    | Initiate 0.3 – 0.5 mcg/kg/min. Titrate 0.5 q15m to goal SBP. Same taper. Max 10 mcg/kg/min. Usual 1 – 4 mcg/kg/min                                    |  | N                  | Renal/hepatic dz incr risk of cyanide posion   |
| Norepinephrine     | 4mg/250mL D5W             | 16 mcg/mL     | Initiate 2 mcg/min. Titrate 2 q10m to goal SBP, Same taper. No max, usual 1-30 mcg/min  |  | N                  | Central line ONLY                              |
| Octreotide         | 500mcg/250mL NS*          | 2 mcg/mL      | 50 mcg bolus  | Infusion at 25-50 mcg/hr x48-72h   | N                  | Monitor BG, HR, BP & GI SEs                    |
| Pantoprazole       | 80mg/100mL NS             | 0.8 mg/mL     | 80 mg bolus   | Infuse at 8 mg/hr  | N                  |  |
| Phenobarbital      | 2700mg/270mL NS*          | 10 mg/mL      | 15-20 mg/kg IVP (2 div doses) – Max 20mg/kg   | 1 – 3 mg/kg/hr after bolus NTE 100 mg/min  | N                  | Monitor EEG (3-5 bursts), RR, BP, ICP          |
| Phenylephrine      | 50mg/250mL NS*            | 200 mcg/mL    | Initiate 100 mcg/min. Titrate 20 q15m to goal SBP. Same taper. No Max. Usual 20-260 mcg/min   |  | Y                  | Peripheral ONLY IF very good line & <12h       |
| Procainamide       | 2000mg/250mL NS           | 8 mg/mL       | 15 - 18 mg/kg over 30min (NTE 30mg/min) – max 1 gm  | 1 – 4 mg/min   | N                  | Reduce LD/MD by 1/3 in renal or card impair    |
| Propofol           | 1000mg/100mL (premix)     | 10 mg/mL      | 0.5 – 2 mg/kg bolus (give as 20mg q10min)   | Usual 50-100 mcg/kg/min – use IBW (max 200 mcg/kg/min)   | N                  |  |
| Thiopental         | 500mg/250mL NS*           | 2 mg/mL       | 5-11 mg/kg over 1hr   | 3-6 mg/kg/hr infusion (use IBW)  | N                  | Monitor RR, BP, hemolysis                      |
| Theophylline       | 800mg/500mL D5W**         | 1.6 mg/mL     | 4.6 mg/kg (5.7 mg/kg as aminophylline) – use IBW  | 0.4 mg/kg/hr – incr if smoker; decr if card/liver disease or elderly   | N                  | Target 10-20mcg/mL. Monitor HR/EKG, N/V        |
| Vasopressin        | 40 units/250mL NS*        | 0.16 units/mL | Sepsis: 0.04 unit/min Post card surg hypotension: Initiate 0.01u/min. Titrate 0.01 q30m to goal SBP. Same taper. Max 0.1u/min, usual 0.01 – 0.1 u/min |  | Y                  | No titrate for sepsis                          |
| Vecuronium         | 100mg/100mL NS*           | 1 mg/mL       | 0.08 – 0.1 mg/kg bolus  | 0.8 – 1.7 mcg/kg/min infusion starting c/in 10min of bolus   | Y                  | Must have Sedation /TOF- use IBW               |
| Verapamil          | 50mg/250mL D5W**          | 0.2 mg/mL     | Initiate 0.075 - 0.15 mg/kg bolus over 2-4min. MR 0.075 q15m to goal HR. Max 20mg. Usual drip 5 – 10mg/hr (max 20mg/hr)                               |  | N                  | Monitor EKG, HR, drug interactions             |
| Gold = LD Required | Green = PREMIX            |               | *may be mixed in D5W  | **may be mixed in NS   | Red = IN CODE CART |  |